Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

Michigan Prisoner ReEntry Initiative

MONTHLY STATUS REPORT

Pursuant to Public Act 154 of 2005
Section 407(2)&(3), Section 409, Section 411,
Section 1010 and Section 1011

September 1, 2006

Revision Log follows Table of Contents

Table of Contents

Section No. 1: Identifying and Addressing the Needs of Former Prisoners 1

A) Prisoner Population Characteristics 1

B) Parolee and MPRI Target Population Characteristics: January – December 2005 1

C) Components of the Michigan Prisoner ReEntry Initiative (MPRI) 2

Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach 2

The Three-Phase, Seven-Decision-Point MPRI Model 4

Table 1: The Three-Phase, Seven-Decision-Point MPRI Model 4

Coordinating Community Development: The Heart of MPRI 5

D) The Continuum of Services Corresponding to Prisoner Risk and Needs Assessment 5

Current Approach to Prisoner Risk and Needs Assessment 6

The MPRI Approach to Prisoner Risk and Needs Assessments 6

Transition Accountability Plans and Prison In-Reach 7

Table 2: Transition Accountability Plans Utility 7

Pre- and Post-Release Programs and Services 7

Ongoing Offender Behavior Assessments 8

Data Collection and Analysis for Future Efforts 8

E) PA 154, Section 407(3): Characteristics of Prisoners Enrolled in the MPRI 9

Table 3: Monthly Status/Recidivism Levels of Released MPRI-Related Participants 10

First IRU Offender Release Cohort (2005 Releases) 10

Second IRU Offender Release Cohort (2006 Releases) 11

First MPRI Round 1 Pilot Site Offender Release Cohort 11

Second MPRI Round 1 Pilot Site Offender Release Cohort 11

MPRI Mentally Ill Inmate Demonstration Project 12

MPRI-Related Offender Release Cohorts by Crime Group 12

Table 4: Crime Groups for MPRI-Related Participants Released Thru 7/31/06 13

Section No. 2: Program Design and Strategy 13

A) The Plan to Implement the Critical Elements of the Strategy 13

Prisoner Assessment and Planning 13

PA 154, Section 1010 and 1011: Vocational/Education and Academic Programs for Prisoners 14

Table 5: PA 154 of 2005, Sections 1010 (1) (2) Summary 16

Table 6: PA 154 of 2005, Sections 1011 Summary 18

Pre-Release Services for Prisoners 19
Table 7: Pre-Release Programs Current and Expanded 20
Transition Accountability Plans (TAP) and Prison In-Reach 21
Post-Release Services for Former Prisoners 22
B) Operational Responsibilities of MPRI Pilot Site Steering Teams 23
Analysis of the Current Systems to Screen and Assess the Nonviolent Prisoner Population 23
Coordination of Pre-Release Services 24
Coordination and Orientation to FB/CBO Partners to Help Develop Transition Plans 24
C) Operational Implementation Planning 24
Prisoner Engagement in the Process 25
Section No. 3: Management and Organizational Capability 25
A) Advice and Leadership to Implement the MPRI: Structure and Membership 25
State Level Advisory Group: The MPRI State Policy and Executive Management Teams 25
Local Level Advisory Group: MPRI Pilot Site Steering Teams 26
B) Management Structure and Staffing 26
The Responsibilities of the Community Liaison 27
Table 8: Community Liaison Responsibilities 27
The Responsibilities of the Community Coordinator 28
Table 9: Community Coordinator Responsibilities 28
Section No. 4: Performance, Evaluation and Sustainability 29
A) Evaluation of Performance 29
Goals and Objectives for Program Development, Implementation, and Outcomes 29
B) PA 154, Section 411: The MDOC Recidivism Reduction Plan 30
Baseline Recidivism Rate 30
Subsequent Recidivism Trend Results Against Baseline Recidivism Rate 30
Recidivism Reduction Measures 31
Michigan Comparison to the Recidivism Rates of Other States and a National Average 32
Recidivism Reduction Plan 32
Expectations 33
C) Sustainability: Leveraging Evaluation and Collaborative Partnerships 34

Addenda to MPRI Monthly Report

Addendum No. 1 1st Round Pilot Site Offender Characteristics

Addendum No. 2 The Ready4Work Model

Addendum No. 3 MPRI Design & Implementation Guidelines

Addendum No. 4 The MPRI Model

Addendum No. 5 FY 2006 MPRI Funding

Addendum No. 6 MPRI Statewide Implementation Plan

Addendum No. 7 COMPAS Risk & Needs Assessment

Addendum No. 8 TAP Development & Prison In-Reach

Addendum No. 9 Prison Academic and Vocational Programs Report

Addendum No. 10 Community Assessment

Addendum No. 11 Community Coordinator Skills & Responsibilities

Addendum No. 12 Oakland County Timeline and Position Descriptions

Addendum No. 13a MPRI Implementation Process Description

Addendum No. 13b MPRI Implementation Structure Chart

Addendum No. 14 FY2006 Comprehensive Plan and Application for Funds

Addendum No. 15 Recidivism Reduction Plan

Addendum No. 16 Prisoners Who Have Served Their Maximum Sentence

Addendum No. 17 Prisoner Reintegration Programs Report

Addendum No. 18 MPRI Pilot Site Comprehensive Prisoner ReEntry Plan Summaries

Addendum No. 19 Mentally Ill Inmate Demonstration Project

Addendum No. 20 Parolee Reintegration Services Summary

Addendum No. 21 Evidence-Based Practices Summary

Addendum No. 22 MPRI PowerPoint Presentation

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Revision and Reposting Log

Posting Date	Content Changes
1/31/2006	Original Posting
2/3/2006	Tables 5 & 6 edits, including citations (MPRI Monthly Status Report) Full research citations for Addendum No. 9
3/1/2006	Addendum No. 16 added Full research citations for Addendum No. 14 Monthly update through 1/31/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report - Section 1E)
4/1/2006	Addenda No. 17, 18, 19, 20, 21 and 22 added Monthly update through 2/28/2006 regarding MPRI participant status and recidivism (MPRI Monthly Status Report - Section 1E)
5/1/2006	Monthly update through 3/31/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report – Section 1E)
6/1/2006	Monthly update through 4/30/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report – Section 1E)
7/1/2006	Monthly update through 5/31/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report – Section 1E)
8/1/2006	Monthly update through 6/30/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report – Section 1E)
9/1/2006	Monthly update through 7/31/06 regarding MPRI participant status and recidivism (MPRI Monthly Status Report – Section 1E)

Michigan Prisoner ReEntry Initiative
MONTHLY STATUS REPORT

Pursuant to Public Act 154 of 2005, Section 407(3), Section 411, Section 1010 and Section 1011

Section No. 1: Identifying and Addressing the Needs of Former Prisoners

A) Prisoner Population Characteristics

Michigan prisons and camps currently hold 49,377 prisoners. Based on each inmate's sentence with the largest minimum term, the offenses for which State prisoners are incarcerated include: 24% sex crimes, 44% other violent crimes, 9% drug crimes, and 23% other nonviolent crimes. Over 62% of the inmates are serving their first prison term (A prefix). The average cumulative minimum sentence is 8.2 years. Approximately 35% of all prisoners are serving sentences of 10 years or more. Nearly 31% of the prison population is past the potential earliest release date (ERD). Of those past the ERD, 76% have been denied parole throughout the current prison term and 24% have paroled but then returned as violators. There are 4,843 lifers.

The prisoner population gender breakdown is about 96% male and 4% female. Prisoner ages range from 15 to 92, and the average age is 36. The racial breakdown is 52% Black, 45% White, 2% Hispanic, and less than 1% Asian, American Indian, or Other. Substance abuse history data from pre-sentence investigation reports shows 57% with a history of drug and/or alcohol abuse (34% with past drug and alcohol abuse, 15% with past drug abuse only, and 8% with past alcohol abuse only). Twenty-five percent (25%) of prisoners have a past history of mental health issues according PSI data.

B) Parolee and MPRI Target Population Characteristics: January – December 2005

The Michigan Department of Corrections paroled nearly 10,300 offenders to the community in calendar year 2005. Given parole approval rate patterns, some parole population

characteristics are somewhat different from those for the prisoner population. Parolees are more commonly serving sentences for drug and other nonviolent crimes, as well as comparatively shorter sentences. Though still small, the percentage of female parolees is somewhat higher than for prisoners. And a history of mental health issues is less common for parolees. An examination of the MPRI 1st round pilot site parole population characteristics reflects these differences[1].

C) Components of the Michigan Prisoner ReEntry Initiative (MPRI)

The **VISION** of the MPRI is that every prisoner released to the community will have the tools needed to succeed. The **MISSION** of the 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. MPRI **GOALS** 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 former prisoners** by fostering effective risk management and treatment programming, accountability, and community and victim participation.

Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach

Michigan is a leader in prisoner re-entry and is the first state in the nation to converge the three major schools of thought on prisoner re-entry to develop and fully implement a comprehensive model of prisoner transition planning. The MPRI Model begins with the three-phase re-entry approach of the Department of Justice's Serious and Violent Offender ReEntry Initiative (SVORI); further delineates the transition process with the seven decision points of the National Institute of Corrections' Transition from Prison to Community Initiative (TPCI) model; and incorporates into its approach the policy statements and recommendations from the Report

[1] Please see Addendum No. 1, "1st Round Pilot Site Offender Characteristics" for details

of the ReEntry Policy Council coordinated by the Council of State Governments. In this way, the MPRI represents a synergistic model for prisoner re-entry that is deeply influenced by the nation's best thinkers on how to improve parolee success.

In developing the MPRI Model, Michigan had the tremendous benefit of technical assistance grants from the National Governors Association (NGA) and the National Institute of Corrections (NIC) that provided substantial resources for consultation, research, training, and technical assistance. Recently, as part of collaboration with the federal Department of Labor and the federal Department of Justice, the MPRI Model will also incorporate the Ready4Work Model at select locations. This model emphasizes job training and placement, mentoring and case management, each of which is essential for job retention for former prisoners but none of which is sufficient alone given the enormous barriers to successful reintegration of former prisoners to Michigan's work force[2]. Thus, the knowledge base is unprecedented.

The MPRI Model is being implemented using funding provided by the Legislature for Fiscal Year 2006 at eight Pilot Sites throughout Michigan at the following locations:

- Wayne County
- Kent County
- Genesee County
- Macomb County
- Kalamazoo County
- Capital Area (Ingham, Eaton, Clinton)
- Berrien County
- 9-County Rural Region[3]

As a result of funds provided to the MPRI by the JEHT Foundation, an additional seven Pilot Sites are being developed in 2006. JEHT funds provide for a Community Coordinator at each location to organize these sites which will include the remaining seven urban counties:

- Oakland County
- Muskegon County
- Jackson County
- Saginaw County
- Washtenaw County
- St. Clair County
- Calhoun County

[2] See Addendum No. 2, "The Ready4Work Model"
[3] The 9 County rural region includes the following counties: Antrim, Benzie, Crawford, Grand Traverse, Kalkaska, Leelanau, Missaukee, Otsego, and Wexford.

The Three-Phase, Seven-Decision-Point MPRI Model

The National ReEntry Policy Council Report was adapted to create two types of documents[4] to assist Michigan's efforts in designing and implementing the MPRI Model: First, a set of guidelines on design and implementation issues and second, a set of three workbooks--one for each of the three MPRI Model phases (Getting Ready, Going Home, Staying Home)--that have been used to determine the policy statements, recommendations and implementation strategies for the MPRI Model that provides a summary of the MPRI Model, a series of 22 Policy Statements and approximately 150 recommendations which the cabinet-level MPRI State Policy Team approved for implementation. The 22 Policy Statements are categorized by the three MPRI Phases and delineated by the seven primary decision points that comprise the Model as illustrated in Table 1.

Table 1: The Three-Phase, Seven-Decision-Point MPRI Model

PHASE ONE—GETTING READY

The **institutional phase** describes the details of events and responsibilities which occur during the offender's imprisonment from admission until the point of the parole decision and involves the first two major decision points:

***1. Assessment and classification*:** Measuring the offender's risks, needs, and strengths.
***2. Prisoner programming*:** Assignments to reduce risk, address needs, and build on strengths.

PHASE TWO—GOING HOME

The **transition to the community or re-entry phase** begins approximately six months before the offender's target release date. In this phase, highly specific re-entry plans are organized that address housing, employment, and services to address addiction and mental illness. Phase Two involves the next two major decision points:

***3. Prisoner release preparation*:** Developing a strong, public-safety-conscious parole plan.
***4. Release decision making*:** Improving parole release guidelines.

PHASE THREE—STAYING HOME

The **community and discharge phase** begins when the prisoner is released from prison and continues until discharge from community parole supervision. In this phase, it is the responsibility of the former inmate, human services providers, and the offender's network of community supports and mentors to assure continued success. Phase Three involves the final three major decision points of the transition process:

***5. Supervision and services*:** Providing flexible and firm supervision and services.
***6. Revocation decision making*:** Using graduated sanctions to respond to behavior.
***7. Discharge and aftercare*:** Determining community responsibility to "take over" the case.

[4] See Addendum No. 3, "MPRI Design Guidelines" and Addendum No. 4, "The MPRI Model"

The MPRI Model involves improved decision making at these seven critical decision points in the three phases of custody, release, and community supervision and discharge process. The first 8 Pilot Sites are fully funded and additional funding is expected to be available to implement the MPRI Model statewide by the end of FY 2007[5].

Coordinating Community Development: The Heart of MPRI

Strong and sustained local capacity is the single most critical aspect of the MPRI implementation process. Pilot Site communities have become dedicated champions of improved prisoner re-entry that will result in less crime through determined and specific preparation for prisoners who will transition back to their communities. Local efforts at education, training, planning, and implementation need significant guidance and support in order to build the capacity for system reform.

Each Pilot Site has a full- time local Community Coordinator funded by a grant from the JEHT Foundation to help the community effectively prepare for prisoner re-entry while MDOC is better preparing prisoners for release. This community coordination will serve to elicit community buy-in and investment, plan for sustainability, and ensure quality results throughout the process.

D) The Continuum of Services Corresponding to Prisoner Risk and Needs Assessment

One of the more important goals of the MPRI is to establish a process for assessing offender risk, needs, and strengths to begin at intake and continue through discharge from parole, connecting the assessed risks, needs, and strengths to prisoner programming, and developing transition plans that will effectively manage the risks, address the needs and build on the strengths. This section describes that continuum of services.

[5] See Addendum No. 5, "MPRI Funding for FY 2006" and Addendum No. 6, "The MPRI Statewide Implementation Plan"

Current Approach to Prisoner Risk and Needs Assessment

The MDOC has a long standing history of using objective classification instruments at many stages from sentencing through final discharge, but the instruments used have been developed independently and do not comprise a unified system of risk, needs and strengths assessment. Therefore, the MPRI has identified a risk instrument that integrates many of the elements of risk, needs, and strengths into a single assessment.

Also, many of the instruments currently employed by MDOC rely heavily on "static factors" that cannot change, making it difficult to assess offender progress toward reducing the risk of recidivism. Thus, the new MPRI instrument (COMPAS) captures information about factors subject to change ("dynamic factors") to facilitate the tracking of progress toward MPRI objectives[6].

The MPRI Approach to Prisoner Risk and Needs Assessments

The MPRI has focused on achieving the goals of the Assessment and Classification decision point that includes incorporating approaches to fully respond to assessed risk, needs, and strengths through a Case Management Plan. The Case Plan is summarized in a simple and straightforward Transition Accountability Plan (TAP) (see next section).

Effective assessment and classification, the Case Plan and the TAP form the four cornerstones of the Institutional Phase 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 (See Section 2 for additional detail). This evidence-based approach is critical and fundamental to the implementation of the full MPRI Model.

[6] See Addendum No. 7, "The COMPAS: Risk and Needs Assessment in the MPRI Model"

Transition Accountability Plans and Prison In-Reach

The lynchpin of the MPRI Model is the development and use of Transition Accountability Plans (TAPs) at four critical points in the prisoner transition process[7]. Each of the four TAPs succinctly describe for the prisoner, former prisoner, the institution and field staff and the community exactly what is expected for a successful re-entry process as illustrated by Table 2. Under the MPRI Model, TAPs, which consist of summaries of the offender's Case Management Plan at critical junctures in the transition process, are prepared with each prisoner:

- As part of the prison intake process (MPRI Phase I)
- As part of the parole decision process (MPRI Phase II)
- When the prisoner re-enters the community (MPRI Phase III), and
- When the former prisoner is discharged from parole supervision (MPRI Phase IV)

Table 2: Transition Accountability Plans Utility

o	**TAP1:**	The expectations for the prison term that will help inmates prepare for release.
o	**TAP2:**	The terms and conditions of prisoner release to communities.
o	**TAP3:**	The supervision and services parolees will experience in the community.
o	**TAP4:**	The elements of the Case Management Plan for eventual discharge from parole.

Pre- and Post-Release Programs and Services

Each of the MPRI Prison Facilities that house prisoners who will be returning to the MPRI Pilot Site communities currently provide many core elements of essential cognitive behavioral programs and services as part of Phase II of the MPRI Model and eventually will be driven by the Ready4Work Model for employment retention.

As the MPRI Model is fully implemented across the state, post release programs and services will be implemented following the same employment retention model. Additional programs to strengthen the pre-release core curriculum within the prison will be accomplished as more state and federal funding becomes available.

[7] See Addendum No. 8, " Transition Accountability Plans and the Importance of Prison In-Reach"

A continuum of "pre" and "post" release service – driven by the results of the COMPAS assessments – will be accomplished as a result of the collaborations that form the core of the MPRI. (Section 2 provides more detail on services.)

Ongoing Offender Behavior Assessments

The principles of the COMPAS will provide standardized, accurate, and complete assessments of risk, needs, and strengths performed at prison intake and periodically thereafter. The assessments will identify the risk of failure for each prisoner and which programs, treatments, and interventions will reduce each prisoner's risk of failure. Periodic reassessment will be performed to measure the degree to which each offender's risks and needs are being affected at each stage of the MPRI process from intake through discharge and aftercare. Using the COMPAS will allow for a process that both staff and prisoners understand so that they "buy into" the process as this is critical for effective implementation (See Section 2 for more detail).

Data Collection and Analysis for Future Efforts

The COMPAS system will provide the MDOC and the MPRI Pilot Sites the capacity to enable users to input data related to offender risk, needs and strengths, specifically in the areas of: Criminal Attitudes, Educational Achievement, Vocational Training and related abilities, Substance Abuse History, Criminal Associates/Family, Mental Health History, Housing/Neighborhood, and Employment History/Financial Stability. Northpointe, Inc., which developed the COMPAS and is under contract with the MDOC, will routinely assess the collected data and assessment scales for internal validity, and present the outcomes study to the MDOC. "Known-group" analysis will also be conducted on the MDOC data as an additional validity measure in testing the differentiation between selected offender risk groups. MDOC staff feedback and administrative requirements will also be employed to enhance operational revisions at the early stages of the COMPAS tool implementation, including the potential inclusion of additional risk or need scales into the instrument.

Moreover, the JEHT Foundation and the MDOC have partnered to fund a full-scale evaluation of the MPRI that will measure the degree to which the MPRI and each Pilot Site is reducing parolee failure and increasing public safety.

E) PA 154, Section 407(3): Characteristics of Prisoners Enrolled in the MPRI

(UPDATE THROUGH 7/31/2006) Public Act 154 of 2005, Section 407(3) requires that the department provide monthly reports on the status and recidivism levels of offenders who participated in the MPRI and have been released, including a breakdown by the following offender types: drug, other nonassaultive, sex, and other assaultive. The follow up of MPRI-related offenders who are released to the community will be done by systematically tracking individual offender release cohorts since the MPRI is being implemented in stages to build toward the full MPRI Model. For example, the Intensive ReEntry Units (IRU) that were implemented in 2005 are actually "precursors" to the MPRI because they serve as a testing ground for some MPRI practices, but they have not implemented the full MPRI Model.

Similarly, the activity for the first round of official MPRI pilot sites is concentrated on Phases II and III of the MPRI Model because the new, dynamic risk/needs assessment instrument (COMPAS) that is the lynchpin of Phase I at the point of reception into prison has not been implemented yet, although it is in the development stage. Consequently, as each cohort of MPRI-related cases transitions to parole with the escalating benefit of the MPRI Model in place, it is expected that progressively improving recidivism outcomes will be apparent.

Table 3 shows the monthly status and recidivism levels for the first five offender release cohorts. It is important for some time to pass before reliable recidivism outcomes are established since relatively few offenders are returned to prison during the first several months following release. The Office of Research and Planning is working to develop matched comparison groups for these release cohorts, rather than continuing to compare all groups to the overall baseline – in recognition of variable failure rates among offenders with different characteristics. This

"matched sample" approach will be much more credible than the current method and provide us better comparisons. **Nevertheless, across all of the offender release cohorts as a group, the data show a 6% improvement in total returns to prison so far against the overall baseline.**

Table 3: Monthly Status/Recidivism Levels of Released MPRI-Related Participants

	Number of Cases To Date	Number Released Thru 7/31/06	Returned to Prison Thru 7/31/06		Baseline Returns Expected Within period		Improvement So Far Against Baseline	
			Number	Percent	Number	Percent	Number	Percent
IRU 1st Cohort (2005 IRU releases)	687	687	130	18.9%	131	19.1%	-1	-0.8%
IRU 2nd Cohort (2006 cases so far)	1,276	830	43	5.2%	48	6.0%	-5	-10.4%
MPRI Pilot 1st Cohort (1st round 1st wave)	160[a]	152	13	8.6%	16	10.5%	-3	-18.8%
MPRI Pilot 2nd Cohort (1st round 2nd wave)	804	478	8	1.7%	12	2.5%	-4	-33.3%
MPRI Mentally Ill Demonstration	157 parole [b] 21 max out [c]	5 parole 7 max outs	0 0	0.0% 0.0%	0 0	0.0% 0.0%	n/a n/a	n/a n/a

[a] Six of the original 160 had their paroles suspended and denied before release - 3 for misconduct, 2 for pending charges, and 1 for statutory GED requirement not met. Two more of the original 160 were paroled as non-MPRI cases.

[b] Through 7/31/2006, 7 of the potential parole cases were terminated from the MPRI Mentally Ill Demonstration Project by the parole board before parole was granted – 1 for refusal to participate, 4 for misconduct, 1 because mental health assessment indicated an unacceptable level of risk to the community, and 1 because determined to be unamenable to treatment.

[c] Eighteen of the original 39 potential max out cases for the MPRI Mentally Ill Demonstration Project received only an assessment before discharge from sentence.

First IRU Offender Release Cohort (2005 Releases)

All offenders released to parole from the IRU's in 2005 represent the first pre-MPRI offender release cohort that is being tracked. The first of these offenders transitioned to parole in February of 2005. Through July 2006, this first pre-MPRI offender release cohort has yielded a 1% improvement in returns to prison so far against the overall baseline rate, with continuing long-term potential for a savings of more than 200 prison beds. As time goes on, this cohort will

continue to be tracked with the expectation that at least minor improvements in return to prison and time to failure will result.

Second IRU Offender Release Cohort (2006 Releases)

All offenders released to parole from the IRU's in 2006 represent the second pre-MPRI cohort to be tracked. The first 830 of these cases transitioned to parole in January-July, with only 5% returned to prison through the end of July. Although the numbers involved are too small to draw any statistically significant conclusions this early, this represents a 10% improvement in returns to prison so far against the overall baseline rate. The size of this release cohort will continue to grow as the year progresses.

First MPRI Round 1 Pilot Site Offender Release Cohort

The first official MPRI pilot site offender release cohort consists of 160 offenders (20 at each of eight pilot sites). Six of these offenders had their paroles suspended prior to release and are now serving continuances, two due to pending charges, three due to institutional misconduct, and one due to failure to complete the statutory GED educational requirement. Two more of the original 160 were paroled as non-MPRI cases.

These first MPRI offenders began paroling in November and December of 2005, and all had transitioned to parole by the end of April, 2006. Less than 9% had returned to prison through the end of July. Although the numbers involved are too small to draw any statistically significant conclusions this early, this represents a 19% improvement in returns to prison so far against the overall baseline rate.

Second MPRI Round 1 Pilot Site Offender Release Cohort

The 2nd wave of first round MPRI pilot site cases began to be released in larger numbers in May. Through the end of July, 478 of these cases had been released to parole, with less than 2% returned to prison. Although the numbers involved are too small to draw any statistically

significant conclusions this early, this represents a 33% improvement so far against the overall baseline rate. There are over 1,800 total prisoners who will be targeted for MPRI in FY2006, and each release cohort (4-6 month cycles) will benefit from fuller implementation of the complete MPRI Model.

MPRI Mentally Ill Inmate Demonstration Project

The first 178 mentally ill inmates have been engaged in this demonstration project, with the first 12 releases now on positive parole status or discharged from sentence. The first 178 cases engaged in the demonstration project consist of 157 potential transitions to parole and 21 discharges on the maximum sentence (aftercare is being proactively arranged for the latter cases for the first time).

Seven of the 157 offenders transitioning to parole have been terminated from the Project by the parole board before parole was granted – one for refusal to participate, four for misconduct, one because mental health assessment indicated an unacceptable level of risk to the community, and one because of being unamenable to treatment.

The cases targeted in this demonstration project will eventually grow to as many as 300 at a time.

MPRI-Related Offender Release Cohorts by Crime Group

Table 4 shows the principal crimes for which sentences are being served among those offenders transitioned to parole so far from the first offender release cohorts. Sentences for drug and other nonassaultive crimes are understandably the most common for these initial offender release cohorts. After successes are achieved and parole board confidence in positive outcomes is increased, it is anticipated that the mix of offenses will gradually include a higher proportion of assaultive cases.

Table 4: Crime Groups for MPRI-Related Participants Released Thru 7/31/06

	Sex	Other Assaultive	Drug	Other Nonassaultive	Total
IRU 1st Cohort	42	202	127	316	687
(2005 IRU releases)	6.1%	29.4%	18.5%	46.0%	100%
IRU 2nd Cohort	32	259	123	416	830
(2006 cases so far)	3.9%	31.2%	14.8%	50.1%	100%
MPRI Pilot 1st Cohort	0	33	38	81	152
(1st round 1st wave)	0.0%	21.7%	25.0%	53.3%	100%
MPRI Pilot 2nd Cohort	17	133	82	246	478
(1st round 2nd wave)	3.6%	27.8%	17.1%	51.5%	100%
MPRI Mentally Ill Demonstration	2	5	0	5	12
	16.7%	41.7%	0.0%	41.7%	100%

Section No. 2: Program Design and Strategy

A) The Plan to Implement the Critical Elements of the Strategy

The Implementation Plan for the MPRI at each Pilot Site has four distinct but inter-related components: prisoner assessment and planning; pre-release services for prisoners; prison in-reach and transition planning for prisoners; and post-release supervision and services for former prisoners. Each is described in detail in this section.

Prisoner Assessment and Planning

The MPRI will be using the COMPAS risk assessment instrument, a tool specifically designed for assessment of risk and needs factors in correctional populations, and for providing decision support to justice professionals in assessing offenders for community placement. COMPAS is automated, theory-driven, and designed to assist practitioners in designing case management support systems for offenders in community placement settings. COMPAS has built multiple validity tests into the assessment to improve reliability of the collected data, and uses 22 risk and criminogenic scales, including Criminal Behavior, Needs and Social Factors, Personality, Cognition and Social Supports, Recidivism-related factors, and Validity scales.

Perhaps the most important aspect of the COMPAS, from an operational, service-delivery standpoint is that it addresses the principle of "responsivity" in that it is designed to build the Case Management Plan based on the unique needs, risks, and strengths of the prisoner and leads to the successful match to programs during the pre-release phase of the MPRI.

PA 154, Section 1010 and 1011: Vocational/Education and Academic Programs for Prisoners

PA 154 of 2005, Sections 1010 (1) (2) and 1011 required the department to provide information regarding the percent of offenders who have a high school diploma or a General Educational Development (GED) certificate; statistical reports on the efficacy of academic and vocational education programs on reducing recidivism rates; and for GED rates, a plan on how to improve those rates. This section of the report provides a brief synopsis of information regarding academic and vocational program operated in Michigan Department of Corrections (MDOC) prisons and camps[8].

Prison academic and vocational programs are only two of many programs, interventions and strategies targeted at improving offender's skills and abilities to enhance their prospects for parole success and satisfactory reintegration into society. Education, both academic and vocational, is a critical component of preparing offenders to successfully reintegrate into society following completion of their prison term. Prisoner education can provide prisoners with necessary skills to obtain employment upon release, and rapid connection to employment is known to play a significant role in successful parole.

Many parolees tend to have difficulties finding work that will adequately provide for their basic needs (and often dependents) due in part to their deficiencies in marketable skills and their stigma of being felons. This problem is even more pronounced in states such as Michigan with higher than average unemployment rates. The guiding premise of adult basic education is

[8] See Addendum No. 9, "Prison Academic and Vocational Programs Report"

that if offenders' deficiencies in basic skills for reading, math, writing, science, and social studies are improved then these offenders will have improved chances of being employed and avoiding criminal behavior upon their community re-entry.

Because educational and vocational programs lead to skills that, it turn, work in concert with other programs and treatments to make offenders more likely to succeed upon parole, they are central to MDOC's efforts to better protect the public through increasing parolee success. Those efforts are centered on the implementation of the MPRI.

MDOC correctional educators instruct a unique and difficult population. For these prisoner students, the following barriers have been identified:

- Prisoners begin their correctional education with low grade level test scores, and require basic academic instruction before they can begin GED preparation.
- The vast majority of these students have a history of polysubstance abuse which is known to result in memory loss and learning difficulties.
- Many students, that are too old to currently qualify for services, report a previous special education history (which is an indicator of learning difficulties).
- Prisoner students (whose average age is approximately 35) that are mandated to go to school, combined with their previous negative educational experiences, results in a poor attitude in the classroom.
- The majority of these students have not developed study habits, work ethics, or testing strategies, all of which must be taught in addition to the core curricula.
- High prisoner transfer rates impede continuity of studies through enrollment, removal, and re-enrollment in numerous schools on the path to GED completion.
- Approval for educational software has yet to be received, which impedes the use of computer assisted instruction.
- There is a need for improved support to maintain educational delivery and data collection systems.

MDOC educators work within these barriers, and consistently create success as evidenced by the statistics that are provided in summary in Table 5 and Table 6.

- MDOC prisoner education is responsible for more completed GEDs than all of the other Adult Education programs in the state combined. In 2005, 2,586 GEDs were completed by MDOC prisoners

- For the five year period from 2000 through 2005 an average of 2,256 GEDs were completed per year.

While public schools measure success by student advancement of one grade level in a year, prisoner students regularly advanced by two or more grade levels in a year, and the expectation is that in the average two-three year sentence, teachers will advance these students by half a dozen years, to attain their GED. Thousands of these students are made into GED graduates in a year. A majority of MDOC's prisoners enter prison with poor job market skills and employment records. The intent of MDOC's vocational training is to improve their chances of community employment and thereby decrease their chances of subsequent criminal activity. The teachers of MDOC meet the challenge, and prepare prisoners for return to their communities. Some key findings regarding vocational programming in the MDOC:

- At any given point in time, there are over 9,000 prisoners enrolled in prison educational programming.

- In 2002, approximately 15.8% (Voc Report N=281, 12 month estimate = 1,686) of all parole/discharges completed at least one vocational program during their most recent incarceration.

- In 2005, 2,720 Vocational programs were completed

- The estimated annual participation in Vocational programs is between 6,000 to 8,000 depending on the amount of participant turnover in these programs.

Table 5: PA 154 of 2005, Sections 1010 (1) (2) Summary

Requirement	Findings
1010 (1): Percent of offenders included in the prison population intake for fiscal years 2003-2004 and 2004-2005 who have a high school diploma of a general education development (G.E.D.) certificate	• 2003-2004: 47.2% • 2004-2005: 50.6%

1010 (2): Statistical reports on the efficacy of both department-provided prison general education and vocational education programs in reducing offender recidivism rates	48.7% Baseline Recidivism Rate[9] Program Completion & Recidivism Rate • GED Only: **48.3%** • Vocational Program Only: **46.1%** • Both GED and Voc Program: **45.6%**

The data indicate that there is a moderate improvement in the return to prison rate (recidivism) for prisoners who participate in either vocational education programs (2.6%) or the GED program (.4%) or both (3.2%). Regardless of what the data indicate, this information should be viewed with caution. Research in other jurisdictions substantiates that while education and employment programs can impact recidivism, the relationship is complex and must be studied in the broader context of offender needs and causes of their criminality. An Urban Institute report (Solomon, et al, 2004) notes that "…because the link between employment and crime is complicated by other factors, including housing, health care and drug treatment, employment is only one component of a multifaceted approach to assist returning prisoners." The study continues on to note "Programs ... that are multi-modal in nature are, in general, more likely to be effective than those that are not.

Thus, if an inmate has vocational needs as well as substance abuse and life skills (including educational) needs, the efficacy of any one of these interventions is enhanced even more if treatment and services are well integrated ...." Put simply, studying one program in isolation is unlikely to produce evidence of a strong relationship with outcomes.

This report was limited to reviews of academic and vocation programs and does not consider other barriers to community transitions such as substance abuse, mental illness, and other confounding factors. For example, over half of the parolees in this report had indicators for substance abuse dependence. Because the Offender Education Tracking System (OETS) was not implemented until July 2004, data on GED and vocational programs was in large part collected

[9] Comparisons do not include effects of MPRI because the first offenders paroled from MPRI in November 2005, so effects cannot yet be calculated.

from paper files. In addition, standards for program completion were not clear during the entire period reviewed. These standards are being refined and clarified on an ongoing basis as OETS usage expands. Also, the effectiveness of OETS is dependent on the roll out of the Offender Callout Management System (OCMS) data base. The Department of Information Technology (DIT) developed OCMS and OETS to run complementarily. Thus, OETS will run more efficiently and accurately upon the complete implementation of OETS statewide.

Results of research in Michigan and elsewhere in the country suggest that academic and vocational programs can positively impact offender reintegration and, as a consequence, reduce recidivism. Equally important are the consistent findings that considering academic and vocational programs in isolation can result in misleading and incomplete conclusions about their impact. These results strongly indicate that recidivism is a very complex phenomenon, influenced by a variety of factors working in combination. Thus, any strategy to reduce recidivism must address the issue with an equally complex and integrated approach. It is precisely that approach which provides the underpinnings of MPRI, which takes a holistic view of offenders' risk, needs and strengths and targets a coordinated package of services, programs and interventions to improve their chances of making a successful transition back into society.

Table 6: PA 154 of 2005, Sections 1011 Summary

Requirement	Response
Certification rates for the most recent 5-year period	Number Prisoners Completing GEDs: 2001: 2,613 2002: 2,130 2003: 1,999 2004: 1,951 2005: 2,205
Comparison of prisoner certification rates in other states and a national average	GED Pass Rates*: **MDOC Prisoners 72%** U.S. Correctional Institutions 64% Michigan General Public: 71% New Jersey General Public 52% New York General Public 54% Illinois General Public 64% Texas General Public 65% California General Public 67% Massachusetts General Public 68%

	Pennsylvania General Public 69% Average for all jurisdictions 71%
Plan to increase certification rates among prisoners enrolled in general educational development (G.E.D.) programs at correctional facilities.	MDOC is initiating action in several areas to improve GED certification rates. Among the areas to be addressed are: • Data Collection and Reporting • GED program administration, including improvements to the Education Plan, program standardization, establishment of revised objectives, clear prioritization for school psychologists. • Curriculum, including standardized progress plotters, identification of additional math/writing strategies for increasing competencies. • Training to improve teacher skills and professional development • Testing mandates to address test administration, frequency of testing, optimization of GED testing procedures.

Source: GED Testing Service 2003 Statistical Report

* Federal Correctional Institutions and MDOC are the only two prison systems that report GED results separately from public school systems. Data for jurisdictions other than U.S. BOP provided for comparisons purposes only.

Pre-Release Services for Prisoners

During the initial phase of pre-release assessment and program planning at the MPRI Prison Facilities, the COMPAS and other assessment instruments such as the Substance Abuse Subtle Screening Index (SASSI) will be utilized to create comprehensive case management plans which will determine programming according to the specific needs and risks for the target population. A trained professional will administer, interpret, and report data to case managers for program planning and compile data for evaluation functions. Examples of some of the current and expanded pre-release programs are shown in Table 7.

As part of the dedicated effort to employ prisoners upon release, a "Ready4Work Employment Plan" will eventually become part of the Transition Accountability Plan prepared by the prison staff, the institutional parole agent, and community representatives. Ready4Work training programs will be provided by the local Michigan Works! agencies whenever possible. The Ready4Work Employment Plan is expected to engender valuable information regarding each prisoner's specific skills, talents, and potential barriers to employment upon release furthering the ability to ensure a seamless re-entry to employment.

Pre-release programming that includes Cognitive-Behavioral Restructuring utilizing the evidence-based model will improve a variety of social, financial, and community skills necessary to ensure a work ethic that will lead to long-term employment, opportunities for advancement, and personal financial responsibility. Offering these services with community-based experts provides prisoners with the best possible training. Community agencies involved have an increased investment in the success of the MPRI and each prisoner who will be returning to their communities. Finally, substance abuse programming will add a critical focus on the point of release as a "trigger point" for relapse and help prepare the prisoner for effective responses to addictive behavior.

Table 7: Pre-Release Programs Current and Expanded

Job Development. ABE/GED, Food Technology, Horticulture, Math Technology, Computer Literacy and Pre-Release (employability skills). *Adding Skills Building Correspondent Courses and the development of a Strategic Employment Plan in collaboration with community services and employers will make the prisoner more marketable.*

Cognitive Behavioral Therapy. Cognitive Restructuring for Change. *Adding Soft Skills; Attitude/Demeanor, Responsibility, Teamwork, and Character Building will assist in preparedness and retention of employment.*

Financial Training. Budget/Finance workshop. *Adding Retirement planning, Building for the Future will assist in financial independence.*

Mental Health Treatment. Outpatient Treatment (mentally ill), and Psychological Services. *Adding general Mental Health education on disorders, aftercare, medication, community services etc., and Diagnosis/Treatment options for depression, Bipolar, ADD/ADHD etc. will assist in minimizing Mental Health disorder behaviors.*

Substance Abuse Treatment. Education, Reintegration, ASAT. *Adding Relapse Prevention Programs prior to release will assist the prisoner with aftercare services.*

Family Counseling. Family Reunification, Parenting, and Relationship Building. *Adding Step Fathering and Fathering Outside the Home will assist with understanding families and family structures.*

Transition and Permanent Housing. Currently no programs. *Adding programs to explain transitional housing options and strategic planning for permanent housing will assist in preparations for independent living.*

Transition Accountability Plans (TAP) and Prison In-Reach

The TAP integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. The TAP is a collaborative product that at any given time may involve prison staff, the prisoner, the parole board, field agents, service providers (public and/or private), victims, and community and faith-based organizations. The TAP describes actions that must occur to prepare individual prisoners for release to the community, defines terms and conditions of their parole supervision, specifies both the type and degree of supervision and the array of services they will experience in the community, and describes their eventual discharge to aftercare upon successful completion of supervision from parole. The objective of the TAP process is to increase both overall community protection by lowering risk to persons and property and by increasing individual prisoner's prospects for successful return to 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, continuing after their discharge from supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. The TAP1 is developed in prison by prison and academic and education staff who form the TAP1 Transition Team. Beginning with the TAP2, the TAPs are developed by a Transition Team that includes prison staff, parole supervision staff, community agencies and service providers. (See Addendum No. 8, "Transition Accountability Plans and the Importance of Prison In-Reach")

Thus, the membership of the Transition Team and their respective roles and responsibilities change over time as the prisoner moves through the re-entry process. During the institutional phase (Phase I), prison staff lead the team. During the re-entry and community supervision phases (Phase II and III), the institutional parole agents lead the teams, with both prison staff and

community service providers as partners in the collaborative process. After former prisoners have successfully completed community supervision, their TAP will continue as needed, and be managed by staff of service agencies as services and support continue.

The TAP reduces uncertainty in terms of release dates and actions (and timing of actions) that need to be taken by prisoners, prison staff, the parole board, field agents, and partnering community agencies. Increased certainty will motivate prisoners and former prisoners to fully participate in the TAP process and become engaged in fulfilling their responsibilities, ensuring all parties are held accountable for timely performance of their respective responsibilities. (See last page for an illustration of the TAP process.)

A pivotal activity that distinguishes the old way of doing business from the new is the Prison In-Reach process that is the centerpiece of MPRI Phase II, the Re-Entry Phase.

When reviewing the policy statements and recommendations that comprise the MPRI Model, the importance of the Prison In-Reach process becomes more focused[10].

Post-Release Services for Former Prisoners

The TAP prepared during the MPRI Phase II Prison In-Reach process identifies the specific approaches needed in the community to reduce former prisoners' risk, address their needs, and build on their strengths. The Transition Team, led by the institutional field agent, will ensure connections to community and faith-based services as part of the TAP. The programming decisions will focus on a seamless hand-off from prison to parole supervision in the community. The careful planning and connections for release will provide continuity of services beyond prison walls initially through the service capabilities in as many as 16 service areas are within each Pilot Sites' Comprehensive Prisoner ReEntry Plan.

[10] For a review of the MPRI Model Policy Statements and Recommendations on the implementation of the TAP during the Prison In-Reach process, please refer to Addendum No. 4, Policy Statements No. 9 through No. 27.

The targeted areas of employment and housing will initially be addressed within the TAP by the Transition Teams that include service providers in those two fundamental service areas. To further augment employment readiness, some MPRI prison facilities, such as the Macomb Regional Facility, will place a "Ready4Work Employment Specialist" in the prison to work under the auspices of the Michigan Works! Agency to assure employment assessments, employment readiness, and connectivity to the labor market during post-release are completed concurrent with other services described in the TAP to reduce risk and address other needs. These types of Ready4Work assessments will expedite offender employment readiness once in the community, and, as part of the three component Ready4Work model, will greatly increase employability, the prospect of employment, and employment retention.

Suitable housing, substance abuse, mental health and other service needs will be assessed prior to release and on an ongoing basis after release. Efforts within prison prior to release will increase prisoner understanding and motivation to engage in crucial services, including identifying relapse "triggers." Access to "wrap-around" services will increase tools for success.

B) Operational Responsibilities of MPRI Pilot Site Steering Teams

Each MPRI Pilot Site has a Steering Team that acts as an operational advisory and oversight committee for their community's prisoner re-entry efforts. Their responsibilities revolve around three core functions: analysis of the current systems to screen and assess the nonviolent prisoner population; coordination of pre-release services; and coordination and orientation to the community's Faith-Based and Community-Based Organization (FB/CBO) partners to help develop transition plans.

Analysis of the Current Systems to Screen and Assess the Nonviolent Prisoner Population

The MPRI has developed a Community Assessment instrument that provides the structure for local Steering Teams to assess not only the prison and parole supervision systems' current ability to screen and assess the prisoner population returning to their communities, but

also the capability of the service delivery systems for housing, employment, alcohol, substance abuse and mental health services, transportation and 11 other service modalities[11]. Each Pilot Site completes this assessment prior to applying for state funds and forms the basis for their Comprehensive Prisoner ReEntry Plan.

Coordination of Pre-Release Services

The Warden of the designated MPRI Prison Facility is one of the co-chairs of the local Pilot Site Steering Team and also has a representative on the statewide MPRI Executive Management Team. The Warden and his or her designated staff, lead the effort for the Steering Teams to coordinate pre-release services as part of the MPRI Phase I, II and III continuum.

Coordination and Orientation to FB/CBO Partners to Help Develop Transition Plans

Each of the major decision points for improved prisoner re-entry under the MPRI Model must involve community input and collaboration so the process is not viewed as "top down" and so local expertise and experience is targeted at the ground level where service delivery must focus. The MPRI Community Coordinator is the "point person" to coordinate community input so that key local stakeholders have enhanced capability to adjust their processes accordingly, provide communication to ensure clarity and input, and ensure coordination and orientation to the Faith- and Community-Based partners[12].

C) Operational Implementation Planning

Each local MPRI Pilot Site Steering Team and the MDOC provide the implementation planning for the effort in four key areas: development, execution, monitoring and evaluation so that the Initiative is assured that offenders successfully complete pre-release programming and participate in community-based services upon release.

[11] See Addendum No.10 "MPRI Community Assessment for Pilot Site Development"
[12] See Addendum No. 11, "The Skills, Responsibilities and Tasks of Community Coordinators"

Prisoner Engagement in the Process

The effort will guarantee that prisoners are targeted and provided pre-release services for the project so that former prisoners are engaged in post-release services. As indicated in Section No. 1, "Identifying and Addressing the Needs of Former Prisoners," there are over 1,800 prisoners who are targeted for the MPRI in Fiscal Year 2006. Pilot Site specific and statewide implementation plans reflect the movement of prisoners eligible for parole in the next 12 months to local MPRI Prison Facilities for MPRI Phase I and II of the MPRI Model[13].

Section No. 3: Management and Organizational Capability

A) Advice and Leadership to Implement the MPRI: Structure and Membership

As part of the larger MPRI, each MPRI Pilot Site has the benefit of both state and local advisors who will assist with the management of the project *within and across* service delivery systems (corrections, housing, employment, alcohol/drug, mental health, transportation, etc.) as described briefly in this section. Local Implementation Plans lay out how this management and organizational structure matches the staff needs necessary to accomplish the goals of each local initiative (See Addendum No. 12 for an example).

State Level Advisory Group: The MPRI State Policy and Executive Management Teams

The MPRI leadership structure is led by the inter-departmental MPRI State Policy Team that is comprised of Cabinet members in departments that control resources needed to reduce parolee failure. This State Policy Team has been responsible for the development and implementation of

[13] See Addendum No. 12 for an example of a Pilot Site Implementation Plan, "Oakland County Submission to DOJ"

the MPRI Organizational Structure[14]. Their accomplishments since the MPRI was launched in 2003 include:

- The development of the MPRI Model
- The development of the Pilot Site Comprehensive Prisoner ReEntry Plan approach[15]
- Implementation of the first 15 Pilot Sites by the end of FY 2006
- Funding MPRI through a mix of state funds ($12M) and foundation funds ($4M)
- Placing full-time Community Coordinators at each site
- Designing and funding the Evaluation Strategy
- Creating the political and operational capability to implement the MPRI statewide

Local Level Advisory Group: MPRI Pilot Site Steering Teams

Each MPRI Pilot Site has in place a Steering Team that includes representatives from institutional corrections (co-chair), parole supervision authority (co-chair); community and faith-based organizations (co-chairs), as well as local law enforcement, victim representatives, community-based service and treatment providers and others. This Steering Team in each of the 1st Round Pilot Sites have already demonstrated the capability at the local level to gather and analyze information, and to develop and implement a plan as evidenced by their successful applications to the Michigan Department of Corrections for MPRI funding that requires the development a local Comprehensive Prisoner ReEntry Plan.

B) Management Structure and Staffing

The management of each MPRI Pilot Site has the benefit of both state and local staffing. At the state level, Community Liaisons are assigned to each MPRI jurisdiction from the MDOC's Office of Offender ReEntry. At the local level, the MPRI Pilot Site Community Coordinator, who are initially hired using JEHT Foundation funds until state dollars are available, report to the Pilot Site Steering Team and manage local implementation duties.

[14] See Addendum No. 13, "The MPRI Implementation Process Description" that includes the frequency of the various teams, workgroups and committees meetings
[15] See Addendum No. 14 for an outline of an MPRI Comprehensive Prisoner ReEntry Plan.

The Responsibilities of the Community Liaison

Community Liaisons within the Michigan Department of Corrections, Office of Offender ReEntry plan, implement, coordinate, and provide oversight of pilot sites under the statewide Michigan Prisoner Reentry Initiative (MPRI). The Community Liaison serves as the expert in community development and capacity-building techniques in MPRI. The community Liaison conducts analyses of community assets, barriers and gaps to determine the extent of community readiness for reentry and this analysis will guide the process of state/local collaboration to demonstrate elements of the MPRI Model and institute full Pilot Sites. See Table 8 below for a description of their responsibilities.

Table 8: Community Liaison Responsibilities

Responsibilities of MDOC, Office of Offender ReEntry, Community Liaisons include:

- Coordinate tasks in the local community related to the development, implementation and monitoring of the MPRI Model in local communities that result in improved service delivery so that fewer parolees return to prison. Write specific Implementation Plans for pilot and demonstration sites.
- Evaluates program and makes recommended policy and procedural changes.
- Research, analyze, develop and maintain databases and record systems on information related to local pilot and demonstration site development, implementation and monitoring.
- Prepare reports and correspondence related to the work.
- Coordinate local implementation of the MPRI.
- Developing system-wide approaches to reduce parolee failure.
- Collaborating with service delivery agencies for special needs populations such as women, veterans, mentally ill, substance abuse, health care, etc., that focus on housing, employment and treatment services that will increase the likelihood of community success after prison.
- Community with communities to engage in discussion and planning for demonstration of MPRI elements.
- Serve as a liaison for Policy and Strategic Planning Administration with MDOC and non-MDOC employees, agencies and organizations, elected and appointed officials who are engaged in local pilot and demonstration site activities, focusing on improved coordination of services for parolees in the areas of housing, employment, substance abuse and mental health services, etc.
- Serve as liaison between MDOC and other stakeholder state and community agencies

The Responsibilities of the Community Coordinator

The involvement of Michigan's communities in the MPRI revolves around three "focus areas" that will be coordinated and facilitated by dedicated MPRI Community Coordinators with the requisite skills needed to do the job funded at each Pilot Site under a grant award from the JEHT Foundation: (1) gathering and analyzing information assets that can be applied to improve parolee success; (2) policy and operational barriers among state and local agencies; and (3) service gaps that can be filled with federal, state and local funding. This information is essential to the development of the Community Assessment, and the subsequent Comprehensive Prisoner ReEntry Plan for each Pilot Site[16].

The Community Coordinator is responsible for coordinating community wide involvement in prisoner reentry planning and service provision in accordance with the Michigan Prisoner Reentry Initiative (MPRI) Model. See Table 9 below for a description of their responsibilities.

All Community Coordinators begin their work under the JEHT Foundation grant to Public Policy Associates, Inc. and their non-profit partner, the Michigan Council on Crime and Delinquency.

Table 9: Community Coordinator Responsibilities

Responsibilities of MPRI Pilot Site Community Coordinators:

- Organization and coordination of the process to create Comprehensive Prisoner Reentry Plans for Pilot Site communities (community assets, barriers, and gaps affecting prisoner reentry);
- Facilitation and staffing of the local MPRI Steering Team
- Coordination and communication, both within the local community and between the community and the statewide partnership, regarding the evolving design of the MPRI so that the entire process is deeply influenced by the community perspective
- Organization and coordination of the implementation process, including contract management, for the Comprehensive Prisoner Reentry Plan.

[16] See Addendum No's. 10, 11 and 14 for more detailed information

Section No. 4: Performance, Evaluation and Sustainability

A) Evaluation of Performance

The objective of the MPRI evaluation is to learn as much as possible about what works, what does not work, and how to improve the Project and the MPRI in general. This implies understanding both the *outcomes* of the work and the *processes of implementation*. Measuring the *outcomes* lets one know whether the direction and magnitude of change is meaningful, and assessing the processes of implementation lets one know how the outcomes were achieved.

Evaluation outcomes will be fed constantly back to policy makers, MPRI architects, and practitioners and researchers in the field. Presenting these outcomes periodically will allow the MPRI to be refined and improved when needed. Lessons learned from the earliest implementation efforts can be applied to later efforts and across sites. Thus, the evaluation is not simply an academic exercise. Rather, it is a critical operational element of MPRI that will contribute important knowledge to it and help guide the process of implementation.

Funding from the JEHT Foundation and the Michigan Department of Corrections will augment funds from this grant award and completely pay for the Project evaluation.

Goals and Objectives for Program Development, Implementation, and Outcomes

As part of the MDOC's commitment to reduce parolee failure – one measure of recidivism – the agency has developed a Recidivism Reduction Plan that relies heavily on the MPRI as the centerpiece. The potential for individual programs to impact recidivism will also be studied but is not expected to produce the intended impact as national research indicates that these "stand alone" approaches have scattered successes at best[17].

[17] See, for example: Wilson, et al, Journal of Research in Crime and Delinquency (2000); Solomon, et al, Urban Institute (2004); Gerber and Fritsch, Sam Houston State University (1994); Bushway, New York University Law School (2003); Aos, et al, Washington State Institute for Public Policy (2001).

Key *outcome measures* for the MPRI include:

(1) Reducing recidivism as defined by a return to prison during the term of parole;

(2) Increasing the time between release and failure;

(3) Reducing the number of violations of supervision conditions by parolees. The Implementation Plan outlines the deliverables for program development and implementation.

B) PA 154, Section 411: The MDOC Recidivism Reduction Plan

Section 411 of 2005 P.A. 154 requires that the Department of Corrections provide a plan to reduce recidivism rates among prisoners released from correctional facilities, including detailed information regarding:

- Recidivism rates in Michigan for the most recent 5-year period,
- Comparison of those rates to rates in other states and a national average,
- How the department plans to improve recidivism rates, and
- How the department proposes to measure the success of the plan.

This section provides a brief summary of the Recidivism Reduction Plan report.[18]

Baseline Recidivism Rate

The baseline recidivism rate (1998) against which to determine the impact of recidivism reduction measures shows that, on average, 51.3% of paroled offenders would be expected to successfully remain in the community two years after release. Within that time, the other 48.7% would either return to prison with new sentences (12.3%), or return to prison as parole technical violators (26.5%), or be on parole absconder status (9.9%).

Subsequent Recidivism Trend Results Against Baseline Recidivism Rate

The results of multi-year recidivism analysis show a gradual 2.1% improvement in the overall two-year success rate for the offender release cohorts subsequent to the 1998 baseline

[18] See Addendum No. 15, "Recidivism Reduction Report."

year. That modest improvement translates into 228 more successes in the 2003 release cohort than would otherwise have been expected. (A slight increase in the proportion of returns to prison with new sentences is offset by a drop in technical returns and the reality that about 70% of technical returns also involve new criminal activity, with either dropped or pending charges.)

Recidivism Reduction Measures

The gradual, modest 2.1% improvement in the overall two-year success rate during the six years of offender release cohorts (as well as lengthened time to failure) have been achieved via actions taken under the Five Year Plan to Control Prison Growth that were implemented through FY 2005, including:

- Expanded community sanctions for low level offenses.
- Expanded community sanctions and control for parole technical violators.
- Expanded use of community residential programs – including work oriented community residential facilities for female parolees.
- Intensive Reentry Units (IRU) that have served as a testing ground for Michigan Prisoner ReEntry Initiative (MPRI) practices.

To take recidivism rate reduction to the next level of improvement beyond the 2.1% will require ongoing and extended impact from the above measures, as well as new impact from the following initiatives that are now also underway in FY 2006:

- First round MPRI Pilot Site implementation at 7 Prison Pilot Site Facilities serving 8 Pilot Site communities.
- Implementation of the Mentally Ill Inmate ReEntry Demonstration Project.
- MPRI expanded drug treatment programming.
- Evidence-based policy and procedure improvements for probation and parole sanctions, services and supervision.

The ongoing/expanded actions and new initiatives listed above are the major components of the Department's Recidivism Reduction Plan.

Michigan Comparison to the Recidivism Rates of Other States and a National Average

Michigan has the 8th largest parole population among the fifty states. However, the number of parolees per 100,000 adult residents in Michigan is lower than the national state average, and is the second lowest among the ten largest state parole systems. Michigan's percentage of successful parole discharges is 10% above the national average of 41.9%. And while Michigan's parole failure rate is higher than the failure rates of some states with comparable parole populations (such as Georgia, Illinois, and New York), it is also much lower than the failure rate of the state with the largest parole population (California).

Recidivism Reduction Plan

Among the recidivism reduction measures adopted by the department, the one with by far the greatest potential long-term impact is the Michigan Prisoner ReEntry Initiative (MPRI). In fact, one way or another, every other recidivism reduction measure listed earlier is intimately related to the MRPI – either as a precursor to the full implementation of the MPRI Model (e.g., Intensive ReEntry Units or IRUs), or as specialized subgroups to be addressed within overall MPRI implementation (such as the Mentally Ill Inmate ReEntry Demonstration Project). The MPRI goals will be achieved by implementing the several critical strategies:

- State-of-the-art prisoner assessment and classification.
- Prison-based planning and programming aimed at sharply reducing risk of recidivism.
- Linkage between the prisons and the community that prepares inmates for release.
- Effective coordination and collaboration among community agencies to deliver supervision and services that reduce recidivism.
- Interagency information sharing.
- Performance-based management.
- System reforms based on evidence-based practices.

Expectations

The impact of the MPRI will be reduced crime, fewer victims, safer neighborhoods, better citizens, fewer returns to prison and reduced costs. Michigan is poised for success combining a strong mandate from the Governor, a powerful policy framework, and strong community buy-in. The challenge now is staged statewide implementation on an eventual scale of 10,000 inmates per year transitioning successfully from prison.

Since better offender parole plans will result from the MPRI, the parole approval rate is expected to increase modestly without jeopardizing public safety and the parole success rate will increase as the MPRI is implemented and expanded statewide. One objective is to increase the parole approval rate by 2% each year as the parole board gains confidence in release outcomes. Another objective is to increase the success rate of MPRI participants by 6% by the end of FY 2006, and eventually by as much as 10% statewide when the MPRI Model is fully implemented.

An indicator of the potential improvement is Ohio's experience, where the percentage of successful parole discharges has improved 10% in two years, from 44% in 1999 to 54% in 2001. And there have already been successes in Michigan resulting from the MPRI:

- Intensive ReEntry Units (IRU) have served as a testing ground for MPRI practices, and the first IRU offender release cohort of 687[19] paroled IRU participants has yielded a 26% improvement in returns to prison so far, resulting in fewer crimes, fewer violations, and potential savings of more than 320 prison beds.

- The first official MPRI pilot site cohort began paroling in November and December, with 100% positive community supervision status at the end of the year. The size of each MPRI offender release cohort is scheduled to increase with each "wave" every 4-6 months, and each release cohort will benefit from fuller implementation of the complete MPRI Model.

- The first 21 mentally ill inmates have been identified for the MPRI Mentally Ill Inmate Demonstration Project, with Transition Accountability Plans (TAP) in progress and the first releases anticipated in late spring.

[19] First IRU offender release cohort reduced to 687 from 709 initially reported to restrict the first cohort to 2005 releases (some determined to have been released on 1/3/06).

C) Sustainability: Leveraging Evaluation and Collaborative Partnerships

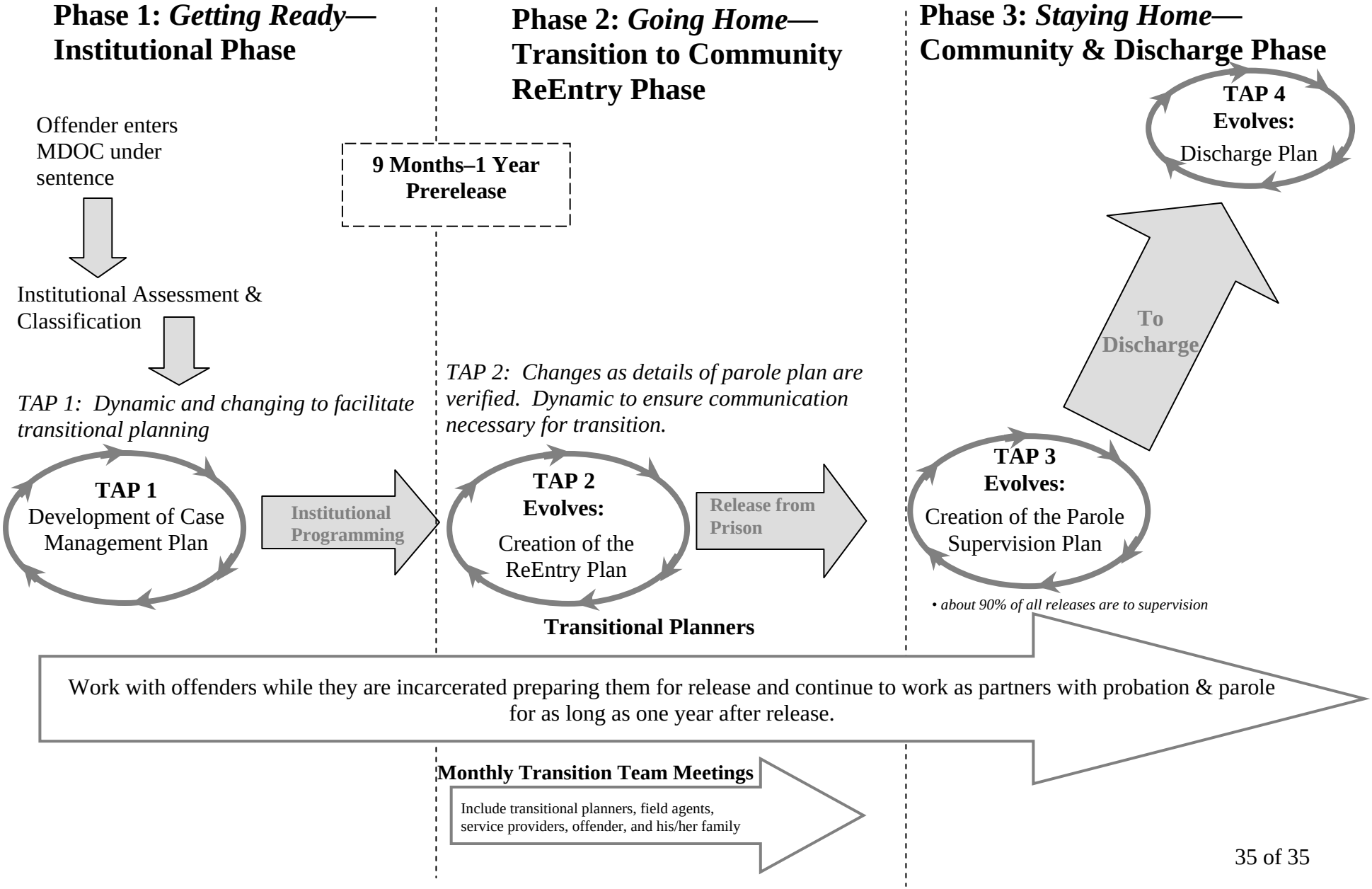
The existence of a fully supported statewide initiative to reform prisoner re-entry policies, practices, and procedures under the MPRI guarantees the long-term support and resources for the project because the effort will be fully integrated into the MPRI Model. The strong support by the Governor and the Legislature which fully funded the 1st Round MPRI Pilot Sites will continue into the 2nd Round of implementation which includes an additional seven counties and will accomplish the implementation of the MPRI in all urban centers to which over 90% of parolees return.

The development and implementation of a fully developed comprehensive re-entry plan – rather than simply the funding of programs and services – guarantees that the effort will be integrated into the state and local justice system plans because it is developed and implemented by the individuals who run those systems. After federal funds end, state funding will continue the effort as long as it produces positive results. The *long-term results for the program include* positive outcomes for the three measures described above, which will in turn lead to long-term *impacts* that are fully supported by the broad spectrum of policy makers: (1) safer communities and safer prisons; (2) lower prison costs than the system would otherwise have incurred; and (3) more offenders leading constructive lives.

> *Preventing new crimes by offenders being released from prison is a challenge that must be met …. Arrangements for post prison transition must deal realistically with the poor coping skills that contribute to offenders' return to prison, particularly in the area of alcohol and drug relapse. We must make certain that as our prison system punishes, it also provides full opportunities for offender rehabilitation – particularly as they are near their release. We must work to devise strategies that will help families and communities build support systems for those leaving prison that begin when the offender is still in prison.*
>
> Jennifer Granholm, Securing Michigan's Future, October 2002

Transition Accountability Plan

MPRI Process Flowchart



Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

Michigan Prisoner ReEntry Initiative

ADDENDA 1 - 22
TO
MONTHLY STATUS REPORT

Pursuant to Public Act 154 of 2005
Section 407(3), Section 411,
Section 1010 and Section 1011

Addendum No. 1

1st Round Pilot Site Offender Characteristics

Site:	Berrien	Genesee	Kalamazoo	Kent	Macomb	N Michigan	Wayne	Tri-County
Total Paroles (6/1/04 - 5/31/05)	**289**	**565**	**263**	**718**	**361**	**232**	**3,314**	**309**
Demographics								
Population (7/1/04)	163,125	443,947	240,724	593,898	822,660	250,248	2,016,202	455,929
Percent Below Poverty (1999)	12.7%	13.1%	12.0%	8.9%	5.6%	7.9%	16.4%	11.0%
Unemployment Rate (4/05)	7.4%	8.2%	5.7%	6.3%	6.8%	6.5%	8.5%	6.3%
UCR Crime Data								
Total Crimes (2003)	133.3	97.6	118.6	112.4	89.3	104.1	119.5	109.2
Index Crimes (2003)	35.9	44.7	44.3	40.2	28.7	25.9	62.6	36.1
2004 Prison Intake								
Intake	203	523	233	728	424	309	2,473	298
PVNS	25	97	69	163	87	44	476	57
Parole Technical Violator (PTV)	112	141	106	255	137	33	1,132	103
Est PTV w New Criminal Activity	84	106	80	191	103	25	849	77
Failures (PVNS+PTV)	137	238	175	418	224	77	1,608	160
Characteristics of Parole Releases								
Number of Paroles	289	565	263	718	361	232	3,314	309
B or Higher Prefix	37%	42%	45%	48%	38%	32%	45%	33%
Drug Problem	33%	64%	48%	45%	57%	50%	50%	41%
Alcohol Problem	25%	59%	39%	36%	48%	55%	31%	38%
Drug & Alcohol Problem	20%	53%	34%	32%	42%	42%	26%	32%
Substance Dependence (SASSI)	57%	60%	62%	61%	58%	67%	43%	62%
Previous Mental Health	7%	10%	9%	12%	10%	8%	10%	10%
Active Mental Health at Parole	3%	3%	3%	5%	4%	3%	4%	3%
< GED at commitment	47%	51%	58%	55%	61%	61%	45%	57%
Not Employloyed at time of crime	57%	59%	48%	58%	48%	52%	57%	57%
Gender Males	91%	94%	94%	87%	93%	93%	91%	92%
Females	9%	6%	6%	13%	7%	7%	9%	8%
Offense CSC	12%	6%	9%	11%	14%	17%	5%	10%
Other Assaultive	31%	37%	35%	30%	35%	19%	37%	34%
Drug	20%	16%	15%	19%	15%	12%	12%	14%
Other Nonassaultive	37%	41%	41%	40%	36%	52%	46%	42%
Prior Assaultive Conviction	19%	23%	27%	31%	31%	25%	23%	24%
Honorably Dischaged Veteran	3%	4%	4%	4%	6%	5%	3%	4%

Addendum No. 1

1st Round Pilot Site Offender Characteristics

	Site:	Berrien	Genesee	Kalamazoo	Kent	Macomb	N Michigan	Tri-County	Wayne
2004 Prison Intake									
Intake		203	523	233	728	424	309	298	2,473
Offense	CSC	12%	6%	9%	11%	14%	17%	10%	5%
	Other Assaultive	31%	36%	35%	30%	36%	18%	34%	36%
	Drug	20%	16%	15%	19%	15%	12%	14%	12%
	Other Nonassaultive	37%	41%	41%	40%	36%	52%	42%	46%
Race:	Asian	1	0	0	3	2	0	0	6
	Black	109	314	115	362	141	21	124	1,933
	Indian	2	4	1	7	0	7	4	9
	Mexican	2	4	1	21	2	0	3	17
	Other	0	0	0	1	0	0	4	7
	White	89	201	116	334	279	281	163	501
Age	<20	12%	11%	10%	9%	4%	12%	11%	10%
	20-29	39%	41%	39%	38%	30%	38%	42%	39%
	30-39	26%	26%	29%	29%	32%	26%	24%	28%
	40-49	20%	17%	18%	18%	26%	20%	16%	18%
	50-59	3%	4%	3%	5%	7%	4%	6%	4%
	60-69	0%	0%	0%	0%	1%	1%	1%	1%
	70+	0%	0%	0%	0%	0%	0%	0%	0%
Chararacteristics of Parole Releases									
Number of Paroles		289	565	263	718	361	232	309	3,314
Race:	Asian	1	0	0	0	1	0	0	1
	Black	164	332	130	419	69	18	119	2,650
	Chinese	1	0	0	0	0	0	0	0
	Indian	1	1	0	2	1	6	3	6
	Mexican	0	2	9	14	2	1	13	24
	Other	0	0	0	0	0	0	1	3
	White	122	230	124	283	288	207	173	630
Age	<20	4%	1%	3%	2%	1%	4%	2%	1%
	20-29	40%	36%	34%	34%	28%	43%	37%	27%
	30-39	34%	33%	35%	34%	33%	24%	31%	35%
	40-49	17%	23%	22%	24%	28%	20%	23%	27%
	50-59	3%	5%	5%	6%	9%	9%	6%	8%
	60-69	1%	1%	1%	0%	1%	0%	2%	1%
	70+	0%	0%	0%	0%	0%	0%	0%	0%

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

The Ready4Work Model

The Ready4Work approach is comprised of three main elements: job training and placement, mentoring and case management, each of which is essential but none of which is sufficient alone. While there is little argument among criminologists and social scientists that employment may be the most essential aspect of successful former prisoner re-integration[i], sustainable employment cannot happen in a vacuum:

> *While job training and placement are clearly key elements in any attempt to reduce recidivism, many such programs have had disappointing results… [and it] seems job training and placement may not be enough, particularly for offenders who have become "embedded" in criminality. Some offenders have gotten used to easy gains and violence and have weak bonds to conventional society, such as attachment to parents and commitment to jobs or school…*
>
> *This is where Ready4Work's commitment to mentoring—to matching returnees with caring, responsible adults in their community—comes in. Prisoners facing release in recent years have served longer prison sentences than in the past, and family ties weaken as prison terms lengthen. Only the luckiest returnees can count on meaningful family support. Yet as Petersilia points out, "Every known study that has been able to directly examine the relationship between a prisoner's legitimate community ties and recidivism has found that feelings of being welcomed at home and the strengths of interpersonal ties outside prison help predict post-prison adjustment."*
>
> *Ready4Work is testing the idea that mentors can make a crucial difference in helping returnees gain much-needed motivation…Because of the demanding nature of working with returnees and the narrow opportunity to make a difference in their lives, Ready4Work has made it a priority to recruit only mature provider organizations that can ensure that nothing falls between the cracks, and it both prods and supports the providers by requiring rigorous monitoring and reporting of the services that returnees receive…*[ii]

Ready4Work requires significant community support, in the form of advisory groups, which are already in place in Michigan under the MPRI local Steering Teams, and also need guidance as the program is implemented and monitored. The program components for Ready4Work include:

- *Identifying participant referral sources:* Each lead agency, along with its advisory board, is tasked with identifying correctional institutions that could recommend candidates for the program. Site leaders—often the case managers—work to cultivate

strong relationships with officials in nearby correctional facilities. They also seek out potential participants through congregations and local community organizations.

- *Screening Candidates:* Suitability for the initiative takes into consideration the criminal record, public-safety factors, and the attitude and willingness of each former prisoner. Given the time commitment needed to participate in the program's various elements, it's critical that those who enrolled do so freely and because they desired to improve their circumstances after release from incarceration.

- *Offering Services Designed to ensure long term and meaningful attachment to the labor market:* To help create a seamless network of local employment services, lead agencies work with a variety of other programs, including Workforce Investment Boards, One-Stop Career Centers, workforce development organizations, local educational institutions and other community and faith-based organizations. Each site develops mechanisms for employment readiness, placement and post-placement support services. Sites work hard to "recruit" employers, treating them as customers and describing to them the merits of hiring prescreened and trained Ready4Work participants. Faith and community-based organizations offer orientation and post-placement support for business leaders and managers who are willing to employ program participants. Whenever possible, sites inform the development and implementation of employment services by involving businesses in the local council.

- *Recruiting, screening, training and supporting faith-based mentors:* Each lead agency is required to develop and implement a strategy to recruit and retain mentors who are then matched with returnees. The goal is to match every adult Ready4Work participant with an appropriate mentor, who is primarily responsible for supporting the returnee in the transition back to the community, especially to the workplace—offering support, guidance and assistance with personal and work challenges. Lead agencies work closely with the congregations and community-based organizations that recruit mentors. They screen the mentors according to national standards, match them with program participants, offer ongoing support and provide case management for mentors and mentees. Mentors are required to complete a monthly log describing their contact with their mentees. Case managers regularly ask participants about their relationships to help reinforce participation and negotiate any concerns.

- *Providing Case Management and referral and/or direct wraparound services as needed:* Case management is conceived as the primary component that holds Ready4Work's various other elements together. Sites develop a strategy whereby case managers work individually with participants to maximize their likelihood of job retention and progress, establish successful mentoring, and identify other services needed to successfully reenter society. Sites hire full-time case managers who are required to meet regularly with participants and offer individual referrals for outside services, such as substance abuse treatment, housing, transportation and mental and/or physical health services. Areas of special emphasis include health-related concerns such as HIV/AIDS support, services for parents and families, and assistance with obtaining identification. Sites are urged to keep

case managers' client lists management—25 to 35 participants—which helps ensure the successfully delivery of services.

- *Providing literacy, education and work-based learning opportunities:* Sites provide appropriate educational opportunities in partnership with other local institutions. These include GED programs, alternative high schools for delinquent youth, community colleges or historically black colleges and universities, specialized work-learning programs for youthful offenders and soft skills or training programs tailored to the reentry population.

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[i] A 1995 meta-analysis of 400 studies found that employment was the single most effective factor in reducing recidivism. Lipsey, Mark W. *What Works: Reducing Reoffending.* West Sussex, U.K.: Wiley, 1995

[ii] J. Good and P. Sherrid. *When the Gates Open; Ready4Work; A National Response to the Prisoner Reentry Crisis.* Public/Private Ventures, October 2005 (See Attachment No. 1); Section which follows quote is excerpted from this document.

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

THE MPRI MODEL
DESIGN AND IMPLEMENTATION GUIDELINES

The National ReEntry Policy Council (www.reentrypolicy.org) developed a guide for states and other jurisdictions interested in pursuing improvements for prisoner re-entry. The 2003 ReEntry Policy Council Report includes a series of policy statements and recommendations to guide the re-entry planning and development process and to improve prisoner re-entry services. The Report has been used extensively in Michigan, alongside the Transition from Prison to Community Initiative (TPCI) Model, and the Serious and Violent Offender ReEntry Initiative (SVORI) Model, to develop our approach.

Specifically, the ReEntry Policy Council Report was adapted to create two types of documents to assist Michigan's efforts in designing and implementing the Michigan Prisoner ReEntry Initiative (MPRI) Model: First, a set of guidelines on design and implementation issues and, secondly, a set of Workbooks - one for each of the three MPRI Model phases (Getting Ready, Going Home, Staying Home) - that have been used to determine the policy statements, recommendations and implementation strategies for the MPRI Model.

This document provides the guidelines for MPRI design and implementation. References to the ReEntry Policy Council Report are included. Our thanks to the ReEntry Policy Council for their excellent advice and assistance.

THE MPRI MODEL
DESIGN AND IMPLEMENTATION GUIDELINES

Planning A Re-Entry Initiative

Policy Statement 1: Encouraging Collaboration Among Key Stakeholders

Engage key stakeholders in a joint venture regarding prisoner re-entry and focus the group's attention on a particular aspect of the issue. (Reference: Report of the ReEntry Policy Council, pgs. 18-22)

Recommendations:
A. Recognize the complexities of the different systems.
B. Identify key stakeholders and engage them in a discussion regarding re-entry.
C. Define the scope of the problem.

Policy Statement 2: Developing a Knowledge Base

Understand the nature and scope of local re-entry issues and develop familiarity with local release policies, the characteristics of returning prisoners, and the resources and capacities of the communities to which prisoners return. (Reference: Report of the ReEntry Policy Council, pgs. 23-35)

Recommendations:
A. Understand *who* is being released from prison.
B. Identify *what* state and local policies influence and govern re-entry.
C. Identify *where* released prisoners are returning, and understand the characteristics and service capacities of those communities.
D. Understand *why* released prisoners are re-offending.
E. Examine *how* prisoners are prepared for re-entry, supervised, and aided in the transition from prison to community.

Policy Statement 3: Incorporating Re-Entry into Organizations' Missions and Work Plans

Change cultures of criminal justice and health and human services organizations so that administrators of these entities recognize that their mission includes the safe and successful return of prisoners to the communities from which they came. (Reference: Report of the ReEntry Policy Council, pgs. 38-52)

Recommendations:

A. Determine how each organization's mission relates to re-entry.
B. Concentrate services and supervision in the communities where releasees live.
C. Engage community-based organizations, including faith-based institutions, to serve people who are incarcerated and who have been released from prison or jail.
D. Ensure that releasing authorities comprise experts who understand the value and appropriateness of supervised release and evidence-based decisions.

Policy Statement 4: Funding a Re-Entry Initiative

Maximize the value of discrete local, state, federal, and private sources of funding that target people released from corrections facilities, their families, and the communities to which they return.
(Reference: Report of the ReEntry Policy Council, pgs. 53-73)

Recommendations:

A. Focus resources on programs that have an evidence base and concentrate whatever limited funding is available on periods immediately preceding and following a person's release from prison or jail.
B. Determine how sources of funding intended for the same populations and communities can be coordinated and leveraged effectively.
C. Manage the growth of the corrections population by making smart use of release decision policies and graduated sanctions for violators of probation and parole and then reinvesting the savings generated through such measures in the communities to which people return after prison.
D. Cultivate volunteers from community and faith-based groups to increase staffing and program capacity.

Policy Statement 5: Promoting System Integration and Coordination

Promote the integration of systems sufficient to ensure continuity of care, supervision, and effective service delivery. (Reference: Report of the ReEntry Policy Council, pgs. 74-86)

Recommendations:

A. Create and maintain forums for project oversight, information sharing, communication, and problem-solving across agencies and organizations.
B. Expand opportunities for intersystem and interdisciplinary education and training.
C. Link information systems so data for criminal justice, health, labor, and social services populations can be effectively shared and analyzed as appropriate.

D. Assign staff to be responsible for boundary spanning among organizations serving people during—and following—their incarceration.
E. Prepare contracts or memoranda of understanding defining the terms of the partnership, including how shared resources will be managed and accountability will span agencies involved in the initiative.
F. Establish policy goals and benchmarks common to all parties and agencies involved in re-entry and devise methods for system-wide evaluation.

Policy Statement 6: Measuring Outcomes and Evaluating the Impact of a Re-Entry Initiative

Employ process and outcome evaluation methods to bring clarity to a program's mission, goals, and public value, as well as to assess and improve program implementation, efficiency, and effectiveness.
(Reference: Report of the ReEntry Policy Council, pgs. 87-94)

Recommendations:
A. Develop a sound logic model in order to build a shared understanding of a program's objectives, strategy, activities, and the relationships between program components and partners.
B. Develop performance measures so that program administrators can continuously monitor staff performance, program components, and overall program progress.
C. Conduct process evaluations to identify problems with program implementation, strategy, and service delivery.
D. Conduct impact evaluations to determine whether and to what extent a program had its intended effect.
E. Employ a cost-benefit analysis to quantify whether a program is operating efficiently.

Policy Statement 7: Educating the Public about the Re-Entry Population

Educate the public about the risks posed by, and the needs of, the re-entry population, and the benefits of successful initiatives to public safety and the community in general. (Reference: Report of the ReEntry Policy Council, pgs. 95-102)

Recommendations:
A. Reassure the public that people who present a risk to the community are supervised upon their release, and re-incarcerated when appropriate for failures to comply with their conditions of release.
B. Make clear that prolonging the incarceration of every prisoner or returning every violator of probation or parole to prison or jail is neither good policy nor fiscally responsible.
C. Inform the public about the large and growing number of people with criminal records in the community.
D. Help the public appreciate that preparing people in prison or jail for their release and providing support to them upon their return makes families and communities stronger, safer, and healthier.

THE MPRI MODEL
DESIGN AND IMPLEMENTATION GUIDELINES

Services Systems Development

Policy Statement 30: Rehousing Systems

Facilitate the development of affordable rental housing, maximize the use of existing housing resources, and identify and eliminate barriers to the development, distribution, and preservation of affordable housing. (Reference: Report of the ReEntry Policy Council, pgs. 412-422)

Recommendations:

A. Educate policymakers regarding the lack of affordable and supportive housing, and promote legislative options to improve access to affordable housing.
B. Facilitate coordination and collaboration among the various areas of government and private entities to develop and manage affordable housing.
C. Leverage resources not traditionally used for the expansion of affordable and supportive housing opportunities.
D. Site housing facilities appropriate to the needs of communities, educate communities about the need for affordable housing, and build community support for increasing affordable housing.
E. Increase the range of affordable and supportive housing models offered by community-based providers.

Policy Statement 31: Workforce Development Systems

Equip all jobseekers with the skills to find and maintain employment that will make them self-sufficient and will meet the needs of the business community. (Reference: Report of the ReEntry Policy Council, pgs. 423-433)

Recommendations:

A. Increase system collaboration through local Workforce Investment Boards and One-Stop Career Centers.
B. Let the market drive the workforce development system.
C. Ensure that workforce development providers address the full spectrum of needs of individuals seeking employment or career services.
D. Locate employment services in neighborhoods where the need for them is highest, and provide continuity of services from one One-Stop or provider to another.
E. Develop measures to monitor and evaluate the performance of workforce development programs.

Policy Statement 32: Substance Abuse Treatment Systems

Ensure that individualized, accessible, coordinated, and effective community-based substance abuse treatment services are available. (Reference: Report of the ReEntry Policy Council, pgs. 434-444)

Recommendations:

A. Improve outcomes by delivering effective, evidence-based substance abuse treatment services.
B. Track treatment outcomes and reward performance.
C. Maximize flexibility in funding and improve coordination between federal and state AOD agencies—as well as among federal agencies and among state agencies—with a stake in substance abuse treatment.
D. Support the development of the substance abuse treatment workforce.
E. Promote public understanding that addiction is a preventable and treatable disease.

Policy Statement 33: Mental Health Care Systems

Ensure that individualized, accessible, coordinated, and effective community-based mental health treatment services are available. (Reference: Report of the ReEntry Policy Council, pgs. 445-455)

Recommendations:

A. Initiate and maintain partnerships between state mental health and other agencies to reduce fragmentation and ensure a full spectrum of care.
B. Maximize the use of all available resources to provide mental health care and supportive services to people with mental illnesses.
C. Promote access to evidence-based practices, and measure outcomes.
D. Involve consumers and families in mental health planning and service delivery.
E. Plan for, support, and train a skilled, culturally competent mental health workforce.
F. Educate the public to destigmatize mental illness and build support for people with mental illnesses.

Policy Statement 34: Children and Family Systems

Promote interagency efforts to enhance human services programs that support children and families, and ensure the availability of effective community-based programs to serve that population.
(Reference: Report of the ReEntry Policy Council, pgs. 456-470)

Recommendations:

A. Promote access to appropriate health and human services for low-income families.

B. Conduct family assessments of individuals receiving human services, and improve service delivery program compliance through a family-centered approach.
C. Strengthen access and service delivery for families in the child welfare program.
D. Increase coordination across programs for children and families and among service systems.
E. Partner with community-based organizations to improve service access and delivery.

Policy Statement 35: Physical Health Care Systems

Increase positive health outcomes, reduce cost, and reduce transmission of communicable diseases by improving access to and raising the quality of existing public and private health care.
(Reference: Report of the ReEntry Policy Council, pgs. 471-482)

Recommendations:
A. Improve access to health care services for the working poor by increasing cost-containment strategies and maximizing insurance coverage.
B. Encourage community-based health care providers to offer comprehensive primary care.
C. Coordinate primary medical care with mental health care and substance abuse services, where appropriate, for patients diagnosed with co-occurring disorders.
D. Promote program evaluation and provide incentives for programs which demonstrate measurable improvement.
E. Providers of personal health care services should collaborate with public health departments to treat patients with and prevent the spread of communicable diseases.

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

THE MPRI MODEL

Policy Statements and Recommendations

TABLE OF CONTENTS

The Michigan Prisoner ReEntry Initiative Model: Vision, Mission, Goals 2
Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach 3
The Three-Phase, Seven-Decision-Point MPRI Model 4
Case Management and Transition Accountability Plans 5
The Transition Accountability Plan (TAP) 5
The TAP Process Principles 6
Transition Accountability Plan: MPRI Process Flowchart 7
MPRI Model Summary 8
Phase One: Getting Ready; The Institutional Phase 9
Phase Two: Going Home; The ReEntry Planning Phase 11
Phase Three: Staying Home; The Community & Parole Discharge Phase 13
Endnotes 14

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

The Michigan Prisoner ReEntry Initiative Model

The **VISION** of the Michigan Prisoner ReEntry Initiative is that every inmate released from prison will have the tools needed to succeed in the community.

The **MISSION** 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.

The **GOALS** of the Michigan Prisoner ReEntry Initiative 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.

Building Safer Neighborhoods & Better Citizens: A Comprehensive Approach

Michigan is a leader in prisoner re-entry and is the first state in the nation to converge the three major schools of thought on prisoner re-entry to develop and fully implement a comprehensive model of inmate transition planning. The MPRI Model:

- Begins with the three-phase re-entry approach of the Department of Justice's Serious and Violent Offender ReEntry Initiative (SVORI).
- Further delineates the transition process by adding the seven decision points of the National Institute of Corrections' Transition from Prison to Community Initiative (TPCI) model.
- Incorporated into its approach the policy statements and recommendations from the Report of the ReEntry Policy Council that is coordinated by the Council of State Governments.

In this way, the MPRI represents a synergistic model for prisoner re-entry that is deeply influenced by the nation's best thinkers on how to improve parolee success.

To develop the MPRI Model, Michigan had the tremendous benefit of technical assistance grants from the National Governors Association (NGA) and the National Institute of Corrections (NIC) that provide substantial resources for consultation, research, training, and technical assistance. As a result of the grant from NGA, the MPRI is also utilizing zip-code level parolee mapping of Michigan conducted by the Urban Institute as part of our intensive strategic-planning process. As a result, the knowledge base created by the MPRI is unprecedented.

Michigan is poised for success combining a strong mandate from the Governor, a powerful policy framework, and strong community buy in. The challenge now is statewide implementation on a scale of 10,000 inmates per year transitioning successfully from prison.

The Three-Phase, Seven-Decision-Point MPRI Model

The MPRI Model involves improved decision making at seven critical decision points in the three phases of the custody, release, and community supervision/discharge process.

PHASE ONE—GETTING READY

The **institutional phase** describes the details of events and responsibilities which occur during the offender's imprisonment from admission until the point of the parole decision and involves the first two major decision points:

1. ***Assessment and classification*:** Measuring the offender's risks, needs, and strengths.
2. ***Inmate programming*:** Assignments to reduce risk, address need, and build on strengths.

PHASE TWO—GOING HOME

The **transition to the community or re-entry phase** begins approximately six months before the offender's target release date. In this phase, highly specific re-entry plans are organized that address housing, employment, and services to address addiction and mental illness. Phase Two involves the next two major decision points:

3. ***Inmate release preparation*:** Developing a strong, public-safety-conscious parole plan.
4. ***Release decision making*:** Improving parole release guidelines.

PHASE THREE—STAYING HOME

The **community and discharge phase** begins when the inmate is released from prison and continues until discharge from community parole supervision. In this phase, it is the responsibility of the former inmate, human services providers, and the offender's network of community supports and mentors to assure continued success. Phase Three involves the final three major decision points of the transition process:

5. ***Supervision and services*:** Providing flexible and firm supervision and services.
6. ***Revocation decision making*:** Using graduated sanctions to respond to behavior.
7. ***Discharge and aftercare*:** Determining community responsibility to "take over" the case.

Case Management and Transition Accountability Plans

The lynchpin of the MPRI Model is the development and use of Transition Accountability Plans (TAPs) at four critical points in the offender transition process that succinctly describe for the offender, the staff, and the community exactly what is expected for offender success. The TAPs, which consist of summaries of the offender's Case Management Plan at critical junctures in the transition process, are prepared with each inmate at prison intake, at the point of the parole decision, when the offender returns to the community, and when the offender is to be discharged from parole supervision. TAPs are concise guides for the inmates and staff:

- ***TAP1*:** The expectations for the prison term that will help inmates prepare for release.
- ***TAP2*:** The terms and conditions of offender release to communities.
- ***TAP3*:** The supervision and services offenders will experience in the community.
- ***TAP4*:** The elements of the Case Management Plan for eventual discharge from parole.

The Transition Accountability Plan (TAP) integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. 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. 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 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 TAP is administered by a Transition 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.

TAP reduces uncertainty in terms of release dates and actions (and timing of actions) that need to be taken by inmates, prison staff, the releasing authority, community supervision staff, and partnering agencies. Increased certainty will motivate inmates to participate in the TAP process and to become engaged in fulfilling their responsibilities and will ensure that all parties are held accountable for timely performance of their respective responsibilities.

The TAP process is built on the following principles:

1. The TAP process starts during an offender's classification soon after their admission to prison and continues through their ultimate discharge from community supervision.

2. TAPs define programs or interventions to modify individual offender's dynamic risk factors that were identified in a systematic assessment process.

3. TAPs are sensitive to the requirements of public safety, and to the rational timing and availability of services. In an ideal system, every inmate would have access to programs and services to modify dynamic risk factors. In a system constrained by finite resources, officials need to rationally allocate access to services and resources, using risk management strategies as the basis for that allocation.

4. **Appropriate partners should participate in the planning and implementation of individual offender's TAPs. These include the offender, prison staff, releasing authorities, supervision authorities, victims, offenders' families and significant others, human service agencies, and volunteer and faith-based organizations.**

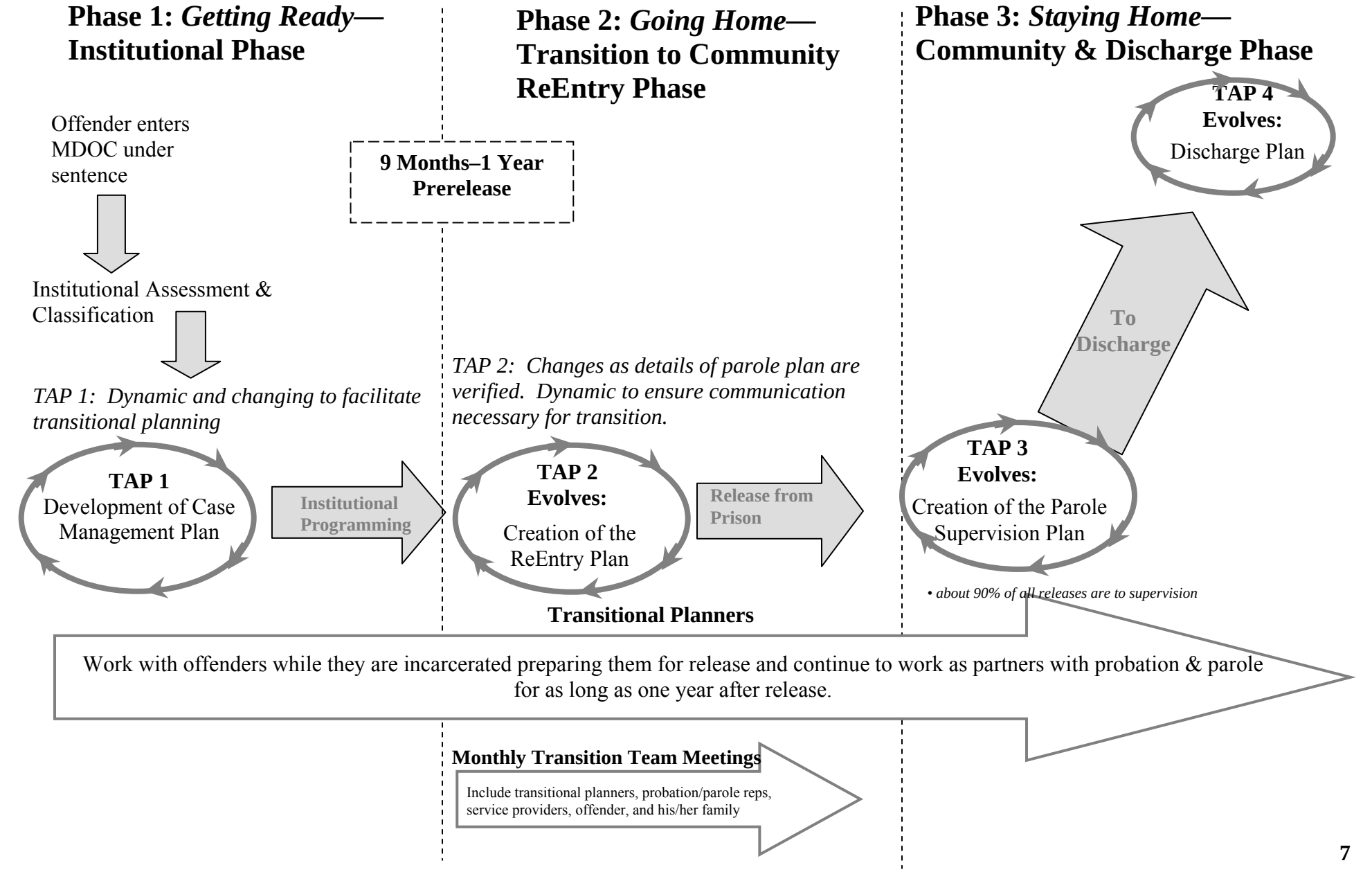
5. **Individual TAPs delineate the responsibilities of offenders, correctional agencies and system partners in the creation, modification, and effective application of the plans, and holds them accountable for performance of those responsibilities.**

6. **TAPs provide a long-term road map to achieve continuity in the delivery of treatments and services, and in the sharing of requisite information, both over time and across and between agencies.**

7. **A case management process is used to arrange, advocate, coordinate, and monitor the delivery of a package of services needed to meet the specific offender's needs.** During the prison portion of TAP, prison staff function as case managers. As offenders prepare for release and adjust to community supervision, their parole officer will become the case manager. When they are successfully discharged from supervision, a staff member from a human service agency may assume case management responsibilities for former offenders who choose to seek services or support.

Transition Accountability Plan

MPRI Process Flowchart



Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

SUMMARY

THE MPRI MODEL

POLICY STATEMENTS AND WORKGROUP RECOMMENDATIONS

(AS APPROVED BY THE MPRI STATE POLICY TEAM 8-25-05)

The National ReEntry Policy Council (www.reentrypolicy.org) developed a guide for states and other jurisdictions interested in pursuing improvements for prisoner re-entry. The 2003 ReEntry Policy Council Report includes a series of policy statements and recommendations to guide the re-entry planning and development process and to improve prisoner re-entry services. The Report has been used extensively in Michigan, alongside the Transition from Prison to Community Initiative (TPCI) Model, and the Serious and Violent Offender ReEntry Initiative (SVORI) Model, to develop our approach. Specifically, the ReEntry Policy Council Report was adapted to create two types of documents to assist Michigan's efforts in designing and implementing the Michigan Prisoner ReEntry Initiative (MPRI) Model: First, a set of guidelines on design and implementation issues and, secondly, a set of workbooks - one for each of the three MPRI Model phases (Getting Ready, Going Home, Staying Home) - that have been used to determine the policy statements, recommendations and implementation strategies for the MPRI Model.

This document provides a summary of the MPRI Model, a series of 22 Policy Statements and 150 recommendations that the State Policy Team has approved for implementation. The 22 Policy Statements are categorized by the Three MPRI Phases and delineated by the 7 primary decision points that comprise the Model. The 150 recommendations on how to implement the Policy Statements are found in the back of the document, under Endnotes. Not surprisingly, the Workgroups recommendations closely track those of the Policy Council. References to the ReEntry Policy Council Report are included. Our thanks to the ReEntry Policy Council for their excellent advice and assistance.

Getting Ready: The Institutional Phase
Going Home: The Transition to the Community – ReEntry Phase
Staying Home: The Community and Parole Discharge Phase

Phase I: Getting Ready; The Institutional Phase

DECISION POINT #1: ASSESSMENT AND CLASSIFICATION

Policy Statement 8: Development of Intake Procedure

Establish a comprehensive, standardized, objective, and validated intake procedure that, upon the admission of the inmate to the corrections facility, can be used to assess the individual's strengths, risks, and needs. *(Reference: Report of the ReEntry Policy Council, Pgs. 110-140)*

DECISION POINT #2: INMATE BEHAVIOR AND PROGRAMMING

Policy Statement 9: Development of Programming Plan

Develop, for each person incarcerated, an individualized plan that, based upon information obtained from assessments, explains what programming should be provided during the period of incarceration to ensure that his or her return to the community is safe and successful. *(Reference: Report of the ReEntry Policy Council, Pgs. 141-153)*

Policy Statement 10: Physical Health Care

Facilitate community-based health care providers' access to prisons and jails and promote delivery of services consistent with community standards and the need to maintain public health. *(Reference: Report of the ReEntry Policy Council, Pgs. 156-166)*

Policy Statement 11: Mental Health Care

Facilitate community-based mental health care providers' access to prisons and jails and promote delivery of services consistent with community standards and the need to maintain public mental health. *(Reference: Report of the ReEntry Policy Council, Pgs. 167-178)*

Policy Statement 12: Substance Abuse Treatment

Provide effective substance abuse treatment to anyone prison or jail who is chemically dependent. *(Reference: Report of the ReEntry Policy Council, Pgs. 179-178)*

Policy Statement 13: Children and Families

Make available services and supports for family members and children of prisoners, and, when appropriate, help to establish, re-establish, expand, and strengthen relationships between prisoners and their families. *(Reference: Report of the ReEntry Policy Council, Pgs. 190-200)*

Policy Statement 14: Behaviors and Attitudes

Provide cognitive behavioral therapy, peer support, mentoring, and basic living skills programs that improve offenders' behaviors, attitudes, motivation, and ability to live independently, succeed in the community, and maintain a crime-free life. *(Reference: Report of the ReEntry Policy Council, pgs. 201-210)*

Policy Statement 15: Education and Vocational Training

Teach inmates functional, educational, and vocational competencies based on employment market demand and public safety requirements. *(Reference: Report of the ReEntry Policy Council, pgs. 211-220)*

Phase Two: Going Home; The ReEntry Planning Phase

DECISION POINT #3: INMATE RELEASE PREPARATION

Policy Statement 16: Work Experience

Provide inmates with opportunities to participate in work assignments and skill-building programs that build toward successful careers in the community. (Reference: Report of the ReEntry Policy Council, pgs. 221-226)

Policy Statement 19: Housing

Facilitate a person's access to stable housing upon his or her re-entry into the community. *(Reference: Report of the ReEntry Policy Council, Pgs. 256-281)*

Policy Statement 20: Planning Continuity of Care

Prepare community-based health and treatment providers, prior to the release of an individual, to receive that person and to ensure that he or she receives uninterrupted services and supports upon his or her return community. *(Reference: Report of the ReEntry Policy Council, pgs. 282-292)*

Policy Statement 21: Creation of Employment Opportunities

Promote, where appropriate, the employment of people released from prison and jail, and facilitate the creation of job opportunities for this population that will benefit communities. *(Reference: Report of the ReEntry Policy Council, pgs. 293-305)*

Policy Statement 22: Workforce development and the transition plan

Connect inmates to employment, including supportive employment and employment services, before their release the community. *(Reference: Report of the ReEntry Policy Council, pgs. 306-316)*

Policy Statement 23: Victims, Families, and Communities

Prepare family members, victims, and relevant community members for the released individual's return to the community, and provide them with protection, counseling, services and support, as needed and appropriate. *(Reference: Report of the ReEntry Policy Council, pgs. 317-330)*

Policy Statement 24: Identification and Benefits

Ensure that individuals exit prison or jail with appropriate forms of identification and that those eligible for public benefits receive those benefits immediately upon their release from prison or jail. *(Reference: Report of the ReEntry Policy Council, Pgs. 331-342)*

DECISION POINT #4: RELEASE DECISION MAKING

Policy Statement 17: Advising the Releasing Authority

Inform the releasing authority about the extent to which the prisoner is prepared to return to the community (and the community is prepared to receive the individual). *(Reference: Report of the ReEntry Policy Council, pgs. 230-242)*

Policy Statement 18: Release Decision

Ensure that people exiting prison or jail who it is determined pose a threat to public safety are released to some form of community supervision; use the results generated by a validated risk-assessment instrument, in addition to other information, to inform the level and duration of supervision, and, for those states that have maintained some discretion in the release process, to determine when release would be most appropriate. *(Reference: Report of the ReEntry Policy Council, pgs. 243-253)*

Phase Three: Staying Home; The Community & Parole Discharge Phase

DECISION POINT #5: SUPERVISION & SERVICES

Policy Statement 25: Design of Supervision Strategy

Review and prioritize what the releasing authority has established as terms and conditions of release and develop a supervision strategy that corresponds to the resources available to the supervising agency, reflects the likelihood of recidivism, and employs incentives to encourage compliance with the conditions of release. *(Reference: Report of the ReEntry Policy Council, pgs. 343-355)*

Policy Statement 26: Implementation of Supervision Strategy

Concentrate community supervision resources on the period immediately following the person's release from prison or jail, and adjust supervision strategies as the needs of the person released, the victim, the community, and the family change. *(Reference: Report of the ReEntry Policy Council, pgs. 358-369)*

Policy Statement 27: Maintaining Continuity of Care

Facilitate releasees' sustained engagement in treatment, mental health and supportive health services, and stable housing. *(Reference: Report of the ReEntry Policy Council, pgs. 370-382)*

Policy Statement 28: Job Development and Supportive Employment

Recognize and address the obstacles that make it difficult for an ex-offender to obtain and retain viable employment while under community supervision. *(Reference: Report of the ReEntry Policy Council, pgs. 383-389)*

DECISION POINT #6: REVOCATION DECISION MAKING

Policy Statement 29: Graduated Responses

Ensure that community corrections officers have a range of options available to them to reinforce positive behavior and to address, swiftly and certainly, failures to comply with conditions of release. *(Reference: Report of the ReEntry Policy Council, Pgs. 390-405)*

ENDNOTES

Policy Statement 8: Development of Intake Procedure - *Establish a comprehensive, standardized, objective, and validated intake procedure that, upon the admission of the inmate to the corrections facility, can be used to assess the individual's strengths, risks, and needs.*

Recommendations:

- **A.** Review intake procedures to determine the range and validity of screening and assessment practices.
- **B.** Ensure that the screening and assessment process is appropriately prioritized, and that the overall intake procedure is streamlined and efficient.
- **C.** Develop an intake procedure appropriate to a short-term jail setting. NOT APPLICABLE
- **D.** Employ a risk-assessment instrument for classification and integrate other available public safety information.
- **E.** Screen all offenders for psychological and mental health issues, physical health problems, or substance abuse and dependency, in order to identify inmates who require further assessment.
- **F.** Ensure that the unattended dependents, if any, of each individual admitted to the facility are placed with a caretaker.
- **G.** Assess long-term and dynamic risks associated with each individual admitted to prison or jail.
- **H.** Conduct comprehensive assessments for each individual whose screening identifies psychological and mental health issues, physical health problems, and substance abuse and dependency.
- **I.** Assess interpersonal skills and basic literacy.
- **J.** Determine the vocational aptitudes, education levels, and employment histories of all sentenced individuals.
- **K.** Review the individual's current benefits and entitlements and determine what steps will be needed to transition the individual back to those programs upon release.
- **L.** Assess all assets and debts and work with inmates to prevent the build-up of child support arrears upon their admission to a correctional facility.
- **M.** Chart the inmate's family life, including such factors as domestic violence, the impact of incarceration on relationships, and the involvement of children.
- **N.** Encourage the use of only validated screening and assessment instruments in the intake procedure.
- **O.** Encourage the use of instruments that can be modified for use beyond the initial assessment.
- **P.** Ensure that intake staff are properly trained to administer screening and assessment instruments.
- **Q.** Engage community-based service providers to inform assessments and to administer screening and assessment instruments.
- **R.** Address issues of cultural competency through staff training and the engagement of community-based providers.
- **S.** Assess the special needs of female offenders.
- **T.** Develop protocols to ensure the accuracy and availability of information while adhering to laws and regulations that govern the confidentiality of this data.
- **U.** Explain to prisoners the purpose and function of the screening and assessment process and the extent to which the information will be shared.

Policy Statement 9: Development of Programming Plan - ***Develop, for each person incarcerated, an individualized plan that, based upon information obtained from assessments, explains what programming should be provided during the period of incarceration to ensure that his or her return to the community is safe and successful.***

Recommendations:

- **A.** Charge new or existing positions with the responsibility of reviewing information obtained through assessments and of developing a plan that provides for the coordinated delivery of targeted services for each person admitted.
- **B.** Consider the primary needs, strengths and background of the individual in developing the programming plan.
- **C.** Ensure that all program planning incorporates the principles of cultural and gender competency.
- **D.** Provide opportunities for crime victims, victim advocates, family members, and community members to inform the inmate's programming plan.
- **E.** Engage community-based providers in the development of a programming plan.
- **F.** Include in the programming plan provisions for periodic reassessments to be conducted during the inmate's incarceration and for changes to be made in the plan accordingly.
- **G.** Establish and maintain a centralized record-keeping system as well as a system for regular communication among program planners and other prison-based staff and service providers.
- **H.** Creatively adapt the program planning model for shorter-term jail stays.

Policy Statement 10: Physical Health Care - *Facilitate community-based health care providers' access to prisons and jails and promote delivery of services consistent with community standards and the need to maintain public health.*

Recommendations:

- **A.** Engage community-based organizations to provide health care services for inmate populations prior to discharge.
- **B.** Use telemedicine to deliver effective and cost-efficient health services.
- **C.** Integrate prevention, education, and good health promotion into correctional health care services and partner with community-based organizations to supplement this information.
- **D.** Maintain medical records so that they provide up-to-date information regarding a prisoner's condition and treatment, and ensure that a summary of the records follows the person as he or she transfers between providers.
- **E.** Promote comprehensive, integrated medical, mental health and substance abuse treatment services, both within correctional facilities and as a central component of corrections-community linkages.
- **F.** Ensure that even short-term inmates receive basic medical care and transition planning services.

Policy Statement 11: Mental Health Care - Facilitate community-based mental health care providers' access to prisons and jails and promote delivery of services consistent with community standards and the need to maintain public mental health.

Recommendations:

- **A.** Engage the community-based mental health care system in providing pre- and post-release services to inmates with mental health needs.
- **B.** Ensure that prison and jail formularies provide access to the most appropriate medications.
- **C.** Provide appropriate psychosocial supports and services.
- **D.** Employ telecommunications technology to deliver effective and cost-effective services.
- **E.** Establish protocols to address co-occurring substance abuse and mental health disorders.

Policy Statement 12: Substance Abuse Treatment - Provide effective substance abuse treatment to anyone prison or jail who is chemically dependent.

Recommendations:

- **A.** Determine the extent to which existing services are effective and sufficient to meet the demand for substance abuse treatment.
- **B.** Assess candidates for program participation carefully, and prioritize treatment for drug-dependent prisoners and those approaching release.
- **C.** Implement evidence-based treatment services that make the best use of available resources.
- **D.** Engage the community-based substance abuse system to provide effective, culturally competent services to people in correctional facilities who are in need of treatment.

Policy Statement 13: Children and Families - Make available services and supports for family members and children of prisoners, and, when appropriate, help to establish, re-establish, expand, and strengthen relationships between prisoners and their families.

Recommendations:

- **A.** Provide parenting and other programs to address a range of family needs and responsibilities of people in prison or jail.
- **B.** Facilitate contact between inmates and their children and other family members during the period of incarceration, when appropriate.
- **C.** Increase collaboration between departments of corrections and child-support agencies to promote information about and access to the child-support process by incarcerated parents and their families.

Policy Statement 14: Behaviors and Attitudes - Provide cognitive behavioral therapy, peer support, mentoring, and basic living skills programs that improve offenders' behaviors, attitudes, motivation, and ability to live independently, succeed in the community, and maintain a crime-free life.

Recommendations:

- **A.** Provide inmates with programs that include evidence-based cognitive-behavioral treatments.
- **B.** Facilitate efforts of community and faith-based institutions, peer support groups, and other service providers to engage and mentor prisoners, and to foster relationships that improve trust and confidence in treatment and services.
- **C.** Provide inmates with services that address their need for basic life skills, including relationship skills.
- **D.** Compel unwilling and high-risk inmates to participate in behavioral and other related treatment services, and ensure that services for those who appear unresponsive to programs continue when those individuals return to the community.
- **E.** Provide (and encourage inmates to attend) victim impact panels, impact of crime classes, and other educational programs involving victims and/or victim advocates designed to convey the harm resulting from crime.

Policy Statement 15: Education and Vocational Training - *Teach inmates functional, educational and vocational competencies based on employment market demand and public safety requirements.*

Recommendations:

- **A.** Develop programs that will enable inmates to be functionally literate and capable of receiving high school or postsecondary credentials.
- **B.** Analyze the job market in the area to which people in prison or jail will be returning.
- **C.** Ensure that vocational and education classes target the needs of the job market.
- **D.** Encourage inmates to participate in educational and job training programs.
- **E.** Engage community-based agencies, such as volunteer and faith-based organizations, to provide institutional job-skills programs.
- **F.** When appropriate, provide prisoners with opportunities to gain occupational competence through postsecondary education.
- **G.** Prioritize the allocation of education and training resources when resources are limited.

Policy Statement 16: Work Experience - Provide inmates with opportunities to participate in work assignments and skill-building programs that build toward successful careers in the community.

Recommendations:

- **A.** Provide work assignments in prison or jail that correspond to the needs of the employment market.
- **B.** Develop pre-apprenticeship work assignments which provide a clear path into community-based apprenticeship programs in high demand occupations.
- **C.** Establish work programs that involve nonprofit, volunteer, and community service organizations so that participants can gain work experience without competing with other potential employees in the community.

Policy Statement 17: Advising the Releasing Authority - Inform the releasing authority about the extent to which the prisoner is prepared to return to the community (and the community is prepared to receive the individual).

Recommendations:

- **A.** Convene a transition planning team to review the inmate's progress in the implementation of the programming plan and collect other information to advise the releasing authority and initiate the transition planning process.
- **B.** Use a validated risk-assessment instrument and a comprehensive analysis of a person's criminal history and behavior in the institution to predict the risk he or she would present to the community if and when released.
- **C.** Consider information related to the individual's strengths and service needs insofar as these issues affect public safety and/ or the establishment of terms and conditions of release.
- **D.** Notify victims when the releasing authority is considering release of an offender and invite victims to provide input into the release decision and the terms and conditions of release.
- **E.** Gauge the willingness and capacity of family members to receive the person upon his or her release and ensure that they receive an opportunity to provide input into the terms of release.
- **F.** Capitalize on the familiarity of local leaders, including law enforcement, with the needs of their community to develop conditions of release that will enable the releasee to make meaningful contributions to the community.
- **G.** Gauge willingness and capacity of community-based service providers to receive the person upon his or her release from prison or jail.
- **H.** Present to the releasing authority a clear and concise analysis of all information deemed important to determining whether the inmate presents a risk to community safety.

Policy Statement 18: Release Decision - Ensure that people exiting prison or jail who it is determined pose a threat to public safety are released to some form of community supervision; use the results generated by a validated risk-assessment instrument, in addition to other information, to inform the level and duration of supervision, and, for those states that have maintained some discretion in the release process, to determine when release would be most appropriate.

Recommendations:

A. Train releasing authorities to use and analyze the information provided to them objectively and effectively.
B. Ensure that, where risk assessment, criminal history information, and other factors reflect a likelihood of the person re-offending, the person is assigned to a period of community supervision after his or her release from prison.
C. Ensure that proposed conditions of release are supported by research, recognize the particular strengths and needs of each individual and the resources of the community, and are consistent with the rules that the releasing authority is prepared to enforce.
D. Determine how various payments (*e.g.,* restitution, child support, fines) expected from the prisoner upon his or her release will be incorporated into the conditions of release.
E. Articulate in writing the reasons for the decision by the releasing authority whenever such decision is discretionary.
F. Ensure that a procedure exists to modify and revise, as appropriate, the conditions of release, including the possibility for early discharge from the authority of the court or supervising administrative agency.

Policy Statement 19: Housing - *Facilitate a person's access to stable housing upon his or her re-entry into the community.*
Recommendations:
A. Ensure that transition planners, working with community-based organizations, are familiar with the full range of housing options available in each community and maintain lists or inventories of available housing.
B. Determine on an individualized basis the particular housing needs for each person released from prison or jail.
C. Evaluate the feasibility, safety, and appropriateness of an individual living with family members after his or her release from prison or jail.
D. Ensure that family violence risks are recognized and addressed in the housing plan of any person whose return to the community may pose a risk to the individual or to his or her family or partner.
E. Identify the appropriate housing option for each incarcerated individual well in advance of release.
F. Educate prisoners about strategies for finding and maintaining housing in the community, and teach them about their legal rights as tenants in the private rental market.
G. Provide individuals who are entering the private rental market—and who demonstrate that they are without adequate resources to pay rent—with small stipends and/or housing assistance for the period immediately after release.
H. Develop "re-entry housing," to meet the specific and unique needs of people released from prison or jail.
I. Encourage private sector or nonprofit housing developers or community-based organizations to develop housing accessible to people leaving prison or jail.
J. Consider individuals leaving prison or jail who have histories of homelessness as part of the homeless priority population, to facilitate their access to supportive housing made available under the McKinney-Vento Act.

Policy Statement 20: Planning Continuity of Care - Prepare community-based health and treatment providers, prior to the release of an individual, to receive that person and to ensure that he or she receives uninterrupted services and supports upon his or her return community.
Recommendations:
A. Prepare a summary health record containing information about important medical problems, prior diagnostic studies, allergies, and medications for each person released from prison or jail prior to his or her release. **PENDING**
B. Connect prisoners to treatment and health care providers in the community prior to their release to prevent gaps in treatment and services.
C. Provide prisoners receiving medications with a sufficient interim supply of essential medications upon their discharge into the community.
D. Educate people in prison and jail about continuity of care and provide them with the summary health record and other important medical records prior to discharge.

Policy Statement 21: Creation of Employment Opportunities - Promote, where appropriate, the employment of people released from prison and jail, and facilitate the creation of job opportunities for this population that will benefit communities.
Recommendations:
A. Educate employers about financial incentives, such as the Federal Bonding Program, Work Opportunity Tax Credit, Welfare-to-Work programs, and first-source agreements, which make a person who was released from prison a more appealing prospective employee.
B. Determine which industries and employers are willing to hire people with criminal records and encourage job development and placement in those sectors.
C. Review employment laws that affect the employment of people based on criminal history, and eliminate those provisions that are not directly linked to improving public safety.
D. Promote individualized decisions about hiring instead of blanket bans and provide documented means for people with convictions to demonstrate rehabilitation.
E. Use community corrections officers and third-party intermediaries to assist employers with the supervision and management of people released from prison or jail.
F. Identify community service opportunities and internships for people released from prison or jail who cannot find work so that they can acquire real work experience and on-the-job training.

Policy Statement 22: Workforce development and the transition plan - *Connect inmates to employment, including supportive employment and employment services, before their release the community.*

Recommendations:

- **A.** Initiate job searches before people in prison or jail are released using community-based workforce development resources.
- **B.** Encourage employers to visit the correctional facility to meet with prospective employees before release.
- **C.** Engage community members and community-based services to act as intermediaries between employers and job-seeking individuals.
- **D.** Promote use of work-release programs as a transition between work inside a correctional facility and work after release into the community. **NOT APPLICABLE**
- **E.** Encourage community networks to support prisoners who participate in work release programs. **NOT APPLICABLE**
- **F.** Provide individuals, upon their release from prison or jail, with written information about their prospective employers or community employment service providers and official documentation of their skills and experience, including widely accepted credentials and/or letters of recommendation.

Policy Statement 23: Victims, Families, and Communities - Prepare family members, victims, and relevant community members for the released individual's return to the community, and provide them with protection, counseling, services and support, as needed and appropriate.

Recommendations:

- **A.** Provide notification and appropriate information to victims concerning the prisoner's release and re-entry process.
- **B.** Offer counseling and support to crime victims preparing for the return of an individual to the community.
- **C.** Ensure that family members receive adequate notification and information regarding the prisoner's impending release.
- **D.** Consider the needs and strengths of the individual's family and then build community networks to provide counseling, safety planning, and other services to help the family cope with the emotional, financial, and interpersonal issues surrounding the individual's return.
- **E.** Create policies for child-support debt management and collection that encourage payment and family stability, and engage family members in creating a viable support strategy.
- **F.** Ensure timely and appropriate notification of key representatives of the community.

Policy Statement 24: Identification and Benefits - *Ensure that individuals exit prison or jail with appropriate forms of identification and that those eligible for public benefits receive those benefits immediately upon their release from prison or jail.*

Recommendations:

- **A.** Ensure interagency collaboration to effectively screen inmates for eligibility for TANF, Medicaid, supplemental security income, food stamps, and other benefits, and to facilitate successful pre-release application for these benefits.
- **B.** Assess individuals in prison or jail for eligibility for veterans' benefits and services, and ensure access to those benefits for eligible individuals.
- **C.** Help inmates identify and apply for appropriate benefits and identification as part of their transition plan.
- **D.** Ensure that documents issued by departments of corrections are accepted as valid identification by other agencies.
- **E.** Improve collaboration among agencies serving individuals reentering the community.
- **F.** Ensure timely access to Medicaid after release for eligible individuals by suspending, instead of terminating, Medicaid benefits during incarceration.
- **G.** Facilitate access to "nonrecurrent" TANF benefits by individuals with criminal records who are re-entering the community.
- **H.** Adopt a narrow definition of "in violation of a condition of parole/probation" for the purposes of TANF, food stamps, SSI & public housing.
- **I.** Adopt balanced admission and eviction policies for public housing that consider individual circumstances.
- **J.** Ensure continued Medicaid coverage for TANF families with parents who are released from prison or jail.

Policy Statement 25: Design of Supervision Strategy - Review and prioritize what the releasing authority has established as terms and conditions of release and develop a supervision strategy that corresponds to the resources available to the supervising agency, reflects the likelihood of recidivism, and employs incentives to encourage compliance with the conditions of release.

Recommendations:

- **A.** Engage community members, including representatives from community corrections, law enforcement, and community-based organizations, to serve on a transition team with corrections staff, and charge the team with the development of a comprehensive supervision strategy.
- **B.** Apply the information from risk- and needs-assessment instruments administered prior to the release decision, and re-assess inmates if necessary to determine appropriate supervision strategies.
- **C.** Assign a supervision officer to each individual well before the date of his or her release and engage the officer on the transition planning team.
- **D.** Seek information from, and promote cooperation with, law enforcement in the jurisdiction to which an individual will return before his or her release.
- **E.** Transfer state prison inmates as the release date approaches (and as appropriate and feasible) to correctional facilities nearest to the community to which the individual will return.
- **F.** Provide each individual before release with a written copy of his or her terms and conditions of release and transition plan and explain them clearly, ensuring that he or she understands them.

Policy Statement 26: Implementation of Supervision Strategy - *Concentrate community supervision resources on the period immediately following the person's release from prison or jail, and adjust supervision strategies as the needs of the person released, the victim, the community, and the family change*.

Recommendations:

- **A.** Focus supervision resources on the period directly following release.
- **B.** Ensure contact between the supervision officer and probationer/parolee corresponds to level of risk presented.
- **C.** Supervise probationers or parolees in the community where they live.
- **D.** Coordinate the activities of local law enforcement and probation and parole agencies.
- **E.** Leverage community-based networks to assist with the implementation of the supervision strategy, and consult family and community members regularly to determine their assessment of the person's adjustment to the home and/or neighborhood.
- **F.** Assess periodically the extent to which the individual's transition into the community is proceeding successfully and modify the supervision plan accordingly.
- **G.** Facilitate compliance by recognizing that people under supervision will require an adjustment period, and address the issues that this period poses.

Policy Statement 27: Maintaining Continuity of Care - *Facilitate releasees' sustained engagement in treatment, mental health and supportive health services, and stable housing*.

Recommendations:

- **A.** Train community corrections officers to understand—and respond effectively to—the special needs of individuals with mental illness on probation or parole.
- **B.** Ensure that all community supervision officers know how to monitor people with substance abuse issues and how to engage probationers and parolees in treatment, where appropriate.
- **C.** Coordinate physical health services for individuals with special health needs.
- **D.** Implement policies and programs that prevent people leaving prison or jail from entering emergency shelters or otherwise becoming homeless.
- **E.** Foster stability in housing for individuals released to the community.

Policy Statement 28: Job Development and Supportive Employment - Recognize and address the obstacles that make it difficult for an ex-offender to obtain and retain viable employment while under community supervision.

Recommendations:

- **A.** Update community corrections policy so that it encourages, rather than discourages, employing people on probation or parole.
- **B.** Assist, to the extent appropriate, people with criminal records seeking to surmount legal and logistical obstacles to employment.
- **C.** Promote supportive transitional employment programs through community corrections.

Policy Statement 29: Graduated Responses - *Ensure that community corrections officers have a range of options available to them to reinforce positive behavior and to address, swiftly and certainly, failures to comply with conditions of release.*

Recommendations:

- **A.** Establish an organized structure to guide the imposition of sanctions.
- **B.** Consider revocation and re-incarceration as the most serious of many different options available for addressing violations.
- **C.** Assess individuals who violate conditions of release to gauge the level of response needed.
- **D.** Respond to technical violations of conditions of release by restructuring the conditions and expectations in a manner most likely to correct behavior and by imposing community-based responses. **PENDING**
- **E.** Ensure meaningful positive reinforcements exist to encourage compliance with the terms and conditions of release.
- **F.** Consider privacy and confidentiality issues when sharing information.
- **G.** Engage the community in the process of responding to parole and probation violations.
- **H.** Provide the victim with an opportunity to inform the imposition of graduated responses.
- **I.** Provide judges who play a role in the supervision process with adequate information and training on how to tailor sanctions to the individual and the violation. NOT APPLICABLE

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

MPRI Funding for Fiscal Year 2006

October 1, 2005

The Michigan Legislature has approved Governor Jennifer Granholm's recommendation for a total of $12 million for the Fiscal Year (FY) 2006 Michigan Department of Corrections' (MDOC) budget for implementation of the Michigan Prisoner ReEntry Initiative (MPRI). Moreover, due to the aggressive management approach for the MPRI, these funds will be used immediately for implementation of the MPRI Model. This funding is in addition to several million dollars that the MDOC has reinvested for implementation of several components of the Model.

$11 million dollars will be used for pilot sites and programs beginning in October of 2005:

- $5,000,000 for the first eight Pilot Sites for parolee services in the areas of housing and employment; alcohol, drug addiction, and mental health services; community coordination activities and management of local "Comprehensive Prisoner ReEntry Plans" for each community. In anticipation of approval by the Legislature of the Governor's recommendation for MPRI funding, the Policy and Strategic Planning Administration worked with the MPRI partners at Public Policy Associates and the Michigan Council on Crime and Delinquency to develop and promulgate an application for FY 2006 funds that requires the first draft of a local "comprehensive re-entry plan" for their community. These grant requests have already been reviewed and approved for funding for FY 2006 in the amount of $625,000 for each of the first eight Pilot Sites[1].

- $3,000,000 for Parolee Reintegration Services in the areas of residential, day reporting and other services. Again, in anticipation of this funding approval, several grants are already prepared for approval including residential, day reporting and employment services for women in Wayne County where the majority of our female offenders return. All of these services are already linked to the Intensive ReEntry Unit for female inmates at the Huron Valley Complex for Women in Ypsilanti where the MPRI process begins.

- $3,000,000 for a statewide Mentally Ill Inmate ReEntry Demonstration Project. This Request for Proposal required special creativity as the interaction between the prison system and the mental health system has historically been very difficult. We have approved a contract to demonstrate how to achieve success with this difficult population.

$1 million dollars will be used for planning and administration of the MPRI in FY 2006 within the MDOC:

- In order to manage the MPRI, the MDOC created in FY 2004 the Policy and Strategic Planning Administration which includes the Office of Offender ReEntry (OOR). In FY 2006, the OOR will be fully staffed with a manager, two community liaisons and a three-person Grants Management Unit.

[1] FY2006 First Round Pilot Sites (Berrien, Capital Area, Genesee, Kalamazoo, Kent, Macomb, 9-County Rural, Wayne)
FY2007 Second Round Pilot Sites (Muskegon, Calhoun, Jackson, Saginaw, Washtenaw, Oakland, St. Clair)

- In order to design, implement, and manage the performance and evaluative aspects of the MPRI, the Administration expanded the Office of Research and Planning with the reassignment or hiring of several dedicated employees. In FY 2006, this increased level of staffing will allow dedicated staff to assess, assist and monitor the increased use of Evidence-Based Practices in prisons and in the field as well as assist Public Policy Associates with the overall evaluation of the MPRI.

  The staff completed the reviews of 12 prisons in September of 2005 to determine their preparedness for the MPRI and to develop specific plans of action for their implementation. As a result, the first eight MPRI Prison Facilities will begin implementing the MPRI for their first 20 inmates. These eight prisons are associated with the first eight pilot sites and have greatly benefited from what has been learned at the Intensive ReEntry Units that have been operating for several months.

- In order to help manage the local implementation process, the MDOC Field Operations Administration created four positions to assist with the MPRI at the Intensive ReEntry Units that opened in FY 2005 in Ypsilanti (52 beds for women) and in Jackson (480 beds for men). Having parole agents on site at the prisons is a critical innovation that allows the ReEntry Model to become an operational reality. The team of prison staff, parole staff and community representatives which comprise the Pilot Site Transition Teams have been interacting for months on these inmates' Transition Accountability Plans and staff report great improvements in the progress of the inmates upon release.

  This funding augments the funding that has been made available for the operation of the Intensive ReEntry Units for FY 2005 and FY 2006 in the approximate amount of $3 million.

- Contract funds are available and will be used in FY 2006 to support the work of both Public Policy Associates (PPA) and the Michigan Council on Crime and Delinquency (MCCD) for services and costs associated with the organization, operations and training of the local pilot sites in areas not covered by a grant provide to PPA by the JEHT Foundation. The JEHT Foundation is providing $2 million to PPA for Community Coordinators, Public Outreach and Evaluation of the MPRI.

The $5 million recommended for FY 2006 pilot site implementation includes funds for community coordination and management. While the money for services is the primary objective of state funding, MDOC will allow up to $75,000 of the funds to be used for ongoing community coordination and management of the communities' Comprehensive ReEntry Plans. This allowance is sufficient to completely cover the costs of Community Coordinators who are expected to become "local employees" as early as November 1, 2005—two full months ahead of schedule. As a result, the funds from the JEHT Foundation will be available sooner than expected to begin the next round of Pilot Sites.

The MDOC/Office of Offender ReEntry, PPA and MCCD will work with the second round of pilot sites immediately so that Community Coordinators can be hired as early as possible in FY 2006 to begin the local community assessments of the assets, barriers and gaps for prisoner re-entry.

Michigan Prisoner ReEntry Initiative
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The MPRI Statewide Implementation Plan: A Three-Step Approach

The Michigan Prisoner ReEntry Initiative (MPRI) will be implemented statewide in a three-step approach with the goal of having the entire state involved in the MPRI Model by September 30, 2007.

The Implementation Plan describes:

- The three-step approach to implementation.
- The activities that will occur in each Pilot Site as part of MPRI and describes how JEHT Foundation funds will be blended with Michigan Department of Corrections (MDOC) funds to form a comprehensive and seamless funding strategy that will enable effective implementation.
- The roles and responsibilities of the three organizations involved in planning and coordinating the implementation of MPRI: Public Policy Associates (PPA), PPA's non-profit partner, the Michigan Council on Crime and Delinquency (MCCD), and the Michigan Department of Corrections (MDOC).

The first eight Pilot Sites were selected because those communities had begun community coordination and re-entry planning with their own resources. These first sites include 7 of the 14 urban counties that account for 75% of all prison releases each year. The remaining urban counties will be included in the second wave of Pilot Sites beginning in fiscal year (FY) 2006.

The goal is to ensure that all 14 urban counties are fully operational before the end of Fiscal Year 2006 with some evidence collected that demonstrates the effectiveness of the MPRI in reducing recidivism across a broad base of communities.

STEP ONE: Fiscal Year 2005

In FY2005, the MPRI implemented the Model in 8 pilot jurisdictions covering 16 counties. Eight Community Coordinators were hired—one Coordinator per site. These 16 counties have over 3,500 citizens in prison that will be reviewed for parole in the next 12 months. The first 8 Pilot Sites began implementation with varying degrees of readiness. The goal of our implementation plan was to have all of the first 8 sites operational before the end of FY2005. The following are the counties involved in the first 8 sites:

- Wayne County*
- Kent County*
- Genesee County*
- Macomb County*
- Kalamazoo County*
- Ingham County*
- Berrien County *
- 9-County Rural Region

STEP TWO: Fiscal Year 2006

In FY2006, an additional seven Pilot Sites will be targeted. One Coordinator per site is required to organize these sites. These seven sites will include the remaining seven urban counties. Fifteen total Community Coordinators will be employed in FY 2006. The first eight Community Coordinators will remain in their original sites. Beginning in January 2006, the costs for the first eight Community Coordinators will be fully funded by MDOC funds.

- Oakland County*
- Muskegon County*
- Jackson County*
- Saginaw County*[i]
- Washtenaw County*
- St. Clair County*
- Calhoun County*

STEP THREE: Fiscal Year 2007

In FY2007, the remaining rural counties will be added as the final step of statewide implementation. The numbers of prisoners returning to these jurisdictions are low and the existing capabilities in each jurisdiction are comparatively strong. Four Community Coordinators will be required to organize all remaining rural counties; thus, each will cover multiple jurisdictions. Beginning in October 2006 (the start of FY2007), MDOC will fully fund the costs of the 14 previously hired Community Coordinators. JEHT Foundation funds would be used beginning in January 2007 to fund the four remaining Community Coordinators. MDOC would cover the costs of all Community Coordinators (total of 18) beginning in October 2007. Funding for the Community Coordinators would continue indefinitely by MDOC or other funding sources.

A Pilot Site will be considered fully operational when it is involved in all three phases of the MPRI Model that includes all four types of Transition Accountability Plans (TAPs) for as many offenders as the Pilot Site can handle. Over time, increasing numbers of inmates will be identified in the MPRI Getting Ready Phase so that increasing numbers of inmates will be fully engaged in the MPRI Model. It is expected to take several years for all inmates to be fully engaged in the process.

At each step of the implementation process, each of the Pilot Sites will be involved in extensive training in Evidence-Based Practices, the development of specific performance measures for increased parolee success, and the development of Comprehensive ReEntry Plans.

As previously stated, the vehicle for permanent funding for local community coordination is the local Comprehensive ReEntry Plan that will specify each Pilot Site's plans to increase parolee success through improved policies, processes, and programs as a result of carefully planned use of the many assets already in the community, the identification and breaking of barriers that hinder parolee success, and the identification and funding of the gaps in services. These gaps in services will undoubtedly revolve around the issues of housing, employment, and services.

The Role of Public Policy Associates

Because of PPA's extensive experience facilitating systems change, its intimate knowledge of the MPRI, and direct affiliation with the National Institute of Corrections (NIC) as the site of the NIC Michigan State Coordinator, PPA is the project manager and operational administrator of the MPRI implementation process. PPA's five main responsibilities include:

- Strategic policy planning in collaboration with MPRI.
- Training, facilitation, oversight, and fiduciary responsibilities of statewide MPRI implementation.
- Provision of technical assistance as needed to avoid problems, overcome challenges, and ensure the knowledge necessary to learn from this historic process is captured for future utilization.
- Obtaining communications expertise and implementing the communications strategic plan.
- Coordinating the evaluation (to be funded separately).

The Role of the Michigan Council on Crime and Delinquency (MCCD)

MCCD has been involved in the MPRI since its inception and has proven to be a valuable planning partner. The agency's historic context for work in the justice arena is unmatched in the state and, with its long history of effective management, provides an essential resource to the implementation process. Their primary role, in addition to continued planning as a member of the Executive Management Team, is on the management and coordination of the Community Coordinators hired with JEHT Foundation funds until such time that State dollars are available to continue the essential and continual work of community coordination.

The Role of the Michigan Department of Corrections

MDOC is inextricably connected to every aspect of the MPRI. MDOC's Policy and Strategic Planning Administration has been charged with the operational success of the MPRI, and Dennis Schrantz, Deputy Director of the Administration, serves on the State Policy Team as the MPRI Manager and chairs the Executive Management Team. In order to support the efforts of implementing the MPRI Model and provide stewardship for the dramatic systems-change process involved with the Initiative, Patricia L. Caruso, MDOC Director, formed an Office of Offender ReEntry within the Administration and approved a staffing structure that includes Community Liaison positions to work closely with PPA and MCCD and the local Community Coordinators.

The purpose of the Office of Offender ReEntry is to manage and staff the MPRI. The three areas of responsibilities include establishing a systemwide, milieu shift within the MDOC, strategic planning for MPRI, and forming partnerships with other agencies to ensure effective collaboration on MPRI. The other offices under the Policy and Strategic Planning Administration are fully engaged in the MPRI. Both the Office of Research and Planning and the Office of Policy and Hearings have been completely re-structured to allow for not only maximum participation in MPRI planning but also to allow for the management and oversight of the evaluation of the Initiative and the development and implementation of new and adapted policies within the MDOC that will ensure that the elements of the MPRI that affect the Department are permanent.

[i] Funding has not yet been identified for the seventh Community Coordinator.

Michigan Prisoner ReEntry Initiative

MPRI

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The COMPAS: Risk & Needs Assessment in the MPRI Model

The variables and principles of the MPRI Assessment Instrument require that standardized, accurate and complete assessments of risk, needs and strengths be performed at prison intake and periodically thereafter (See Table 1). The assessments must identify the risk of failure for each offender and which programs, treatments and interventions will most effectively reduce each offender's risk of failure. Periodic reassessment must be done to ensure the degree to which each offender's risks and needs are being affected at each stage of the MPRI process from intake through discharge and aftercare. Further, assessment must be based on a measurement instrument that is accurate, affordable, understandable and useful for case planning and management. They must be simple. Offenders must completely understand and buy into the process for it to be effective. MPRI Pilot Sites will be using the COMPAS assessment tool.

Prisoner Assessment and Planning

The MPRI will be using the COMPAS risk assessment instrument that addresses certain variables and key principles that underlie the Initiative, based on research that shows what works to reduce recidivism. COMPAS is a statistically-based, risk assessment tool designed for assessment of risk and needs factors in correctional populations, and for providing decision support to justice professionals in assessing offenders for community placement. COMPAS is automated, theory-driven and designed to assist practitioners in designing case management support systems for offenders in community placement settings.

A unique aspect of the COMPAS design is that it addresses four separate risk assessment systems: Violence, Recidivism, Flight, Community Technical Violations. In addition, COMPAS has built multiple validity tests into the assessment instrument to improve reliability of the collected data. The COMPAS application is highly adaptable, with the ability to select all of the standard 22 risk and criminogenic scales, including Criminal Behavior, Needs and Social Factors, Personality, Cognition and Social Supports, Recidivism-related factors, and Validity scales.

Perhaps the most important aspect of the COMPAS, from an operational, service-delivery standpoint is that it addresses the principle of "responsivity" in that it is designed to build the Case Management Plan based on the unique needs, risks and strengths of the prisoner and leads to the successful match to programs during the pre-release phase of the MPRI.

Data Collection and Analysis for Future Efforts

The COMPAS system will provide the MDOC and the Oakland County Pilot Site the capacity to enable users to input data related to offender risk, needs and strengths, specifically in the areas of: Criminal Attitudes, Educational Achievement, Vocational Training and related abilities, Substance Abuse History, Criminal Associates/Family, Mental Health History, Housing/Neighborhood, and Employment History/Financial Stability. Northpointe, Inc., which developed the COMPAS and is under contract with the MDOC, will routinely assess the collected data and assessment scales for internal validity, and present the outcomes study to the MDOC. "Known-group" analysis will also be conducted on the MDOC data as an additional validity measure in testing the differentiation between selected offender risk groups. MDOC staff feedback and administrative requirements will also be employed to enhance operational revisions at the early stages of the COMPAS tool implementation, including the potential inclusion of additional risk or need scales into the instrument.

Table 1

Key Variables for the MPRI Assessment Instrument

- Identifies needs and strengths and measure risk of recidivism.
- Is valid and reliable.
- Is useful for TAP, Case Management, and structured decision making.
- Is appropriate for repeated measures of dynamic factors and risks.
- Is accessible for data and data systems.
- Meets several resource requirements:

1. *Be cost effective,*
2. *Not negatively impact number of staff required to process,*
3. *Have feasible training requirements,*
4. *Have feasible impacts on work processing time,*
5. *Be highly adaptable*

Key Principles for the MPRI Assessment Instrument

- **Risk**: It is possible to predict which offenders present a greater level of risk of failure.
- **Need**: Parole failure can be reduced if factors that cause new criminal behavior (dynamic needs) can be changed through treatment, programs and addressing other needs.
- **Responsivity:** Different offenders respond positively to various treatments and methods of delivery and the selection of programs, treatments and interventions should be based on case specific factors. The assessment leads to the proper match of programs.
- **Grounded in Evidence Based Practices:** Treatment and program assignments and resources be allocated according to which have shown to be effective at reducing parole failure rates for specific groups of offenders.

Michigan Prisoner ReEntry Initiative

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Transition Accountability Plans and the Importance of Prison In-Reach

The lynchpin of the MPRI Model is the development and use of Transition Accountability Plans (TAPs) at four critical points in the prisoner transition process. Each of the TAPs succinctly describe for the prisoner or former prisoner, the corrections and/or field staff and the community exactly what is expected for a successful re-entry process. Under the Michigan Prisoner ReEntry Initiative (MPRI) Model, the TAPs, which consist of summaries of the offender's Case Management Plan at critical junctures in the transition process, are prepared with each prisoner at reception as part of the prison intake process (Phase I), as part of the parole decision process when the prisoner is approaching his Earliest Release Date or ERD[1] (Phase II), when the prisoner re-enters the community, and when the former prisoner is to be discharged from parole supervision. So, TAPs serve as concise guides for prisoners, former prisoners, corrections and field staff and community service providers:

- **TAP1:** The expectations for the prison term that will help prisoners prepare for release.
- **TAP2:** The terms and conditions of prisoner release to communities.
- **TAP3:** The supervision and services former prisoners will experience in the community.
- **TAP4:** The elements of the Case Management Plan for eventual discharge from parole.

The TAP integrates offenders' transition from prisons to communities by spanning phases in the transition process and agency boundaries. The TAP is a collaborative product that at any given time may involve prison staff, the prisoner, the parole board, parole filed agents, human services providers (public and/or private), victims, and neighborhood and community organizations. The TAP describes actions that must occur to prepare individual prisoners for release to the community, defines terms and conditions of their parole supervision, specifies both the type and degree of supervision and the array of services they will experience in the community, and describes their eventual discharge to aftercare upon successful completion of supervision from parole. The objective of the TAP process 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 supervision as an evolving framework for aftercare provided by human service agencies or other means of self-help and support. The TAP1 is developed by prison and academic and education staff in the prisons that form the TAP1 Transition Team. Beginning with the TAP2, the TAPs are developed by a Transition Team that includes prison staff, parole supervision staff, and community agencies and service providers. Thus, the membership of the Transition Team and their respective roles and responsibilities change over time as the prisoner moves through the re-entry process. During the institutional phase (Phase I) prison staff lead the team. During the reentry and community supervision phases (Phase II and III) field supervision staff lead the team with both prison staff and community services providers as partners in the collaborative process. After former prisoners have successfully completed community supervision, their TAP will continue as needed and be managed by staff of human services agencies as the former prisoner continues to receive services and support. At each stage in the process Transition Team members will use a case management model to monitor progress in implementing the TAP.

The TAP reduces uncertainty in terms of release dates and actions (and timing of actions) that need to be taken by prisoners, prison staff, the parole board, field agents, and partnering community agencies. Increased certainty will

[1] The first model Michigan used to develop the MPRI, NIC's "Transition from Prison to Community Initiative" model, referred to the prisoner's "Targeted Release Date" as an important factor for re-entry process. In Michigan, the release date is subject to parole board approval and the earliest a prisoner can be released from prison is the ERD. Therefore, the ERD is the Targeted Release Date.

motivate prisoners and former prisoners to fully participate in the TAP process and to become engaged in fulfilling their responsibilities and will ensure that all parties are held accountable for timely performance of their respective responsibilities.

Principles that Guide the Transition Accountability Plan Development Process

1. The TAP process starts during an offender's classification soon after their admission to prison and continues through their ultimate discharge from community supervision.

2. TAPs define programs or interventions to modify individual offender's dynamic risk factors that were identified in a systematic assessment process; address the prisoner or former prisoner's needs and build on the identified strength of each individual. Thus, the prisoner is at the center of the TAP process.

3. TAPs are sensitive to the requirements of public safety, and to the rational timing and availability of services. In an ideal system, every prisoner would have access to programs and services to modify dynamic risk factors. In a system constrained by finite resources, officials need to rationally allocate access to services and resources, using risk management strategies as the basis for that allocation.

4. Appropriate partners should participate in the planning and implementation of individual offender's TAPs. These include the prisoner or former prisoner, prison staff, releasing authorities, supervision authorities, victims, offenders' families and significant others, human service agencies, and volunteer and faith-based organizations. While corrections staff lead the Transition Team, community representatives are vital partners in the process. The design of the TAP is a collaborative process.

5. Individual TAPs delineate the specific responsibilities of prisoners and former prisoners, correctional agencies and system partners in the creation, modification, and effective application of the plans. The TAPs hold both prisoners and service agencies accountable for performance of those responsibilities.

6. While all four TAPs should include the types of services that are needed to address identified needs, reduce identified risks and build on identified strengths, beginning with the TAP2, they should encompass the enrollment of the prisoner in the agencies responsible for the services. The TAP2 is the first TAP that is developed as a "prison in-reach" process that brings community representatives into the prisons to interact with the prisoners. **Prison In-Reach is a major distinction between the way business has been done in the past and the way it is improved and is one of the most important innovations of the MPRI Model**.

7. TAPs provide a long-term road map to achieve continuity in the delivery of treatments and services, and in the sharing of requisite information, both over time and across and between agencies. This is particularly essential during the re-entry phase (Phase II) when the boundaries between agencies are literally fences and brick walls. The TAP2 must serve as more than a plan – it must serve as a highly specific schedule of events beginning with the prisoner's Orientation Session with the field agent on the day of release, and must include the expectations of how the former prisoner will spend his or her time during at least the first month of release. Perhaps the most vulnerable time for former prisoners is their first month in the community.

8. A case management process is used to arrange, advocate, coordinate, and monitor the delivery of a package of services needed to meet the specific offender's needs. During the prison portion of the TAP process, prison staff will function as case managers who will engage in preparing prisoners for their eventual release through pre-release programming and Prison In-Reach services facilitated with experts from the community. Upon release, and as they adjust to community supervision, their field agent will become the case manager and work with the prisoner and community representatives on transition teams. When they are successfully discharged from supervision, a staff member from a human service agency may assume case management responsibilities for former prisoners who continue to need services and support.

As can be seen from these principles, perhaps the most pivotal activity that distinguishes the old way of doing business from the new way is the Prison In-Reach process that is the centerpiece of MPRI Phase II, the Re-Entry

Phase. When reviewing the Policy Statements and Recommendations that comprise the MPRI Model, the importance of the Prison In-Reach process becomes more focused.

The MPRI Model: Policy Statements Affecting Prison In-Reach

There are a series of Policy Statements in the MPRI Model that require an aggressive and productive Prison In-Reach process followed by an equally aggressive supervision strategy – especially during the pivotal first month of release. There are nine (9) Policy Statements that affect the manner in which the Prison In-Reach process is utilized to create strong Transition Accountability Plans during what is the most important phase of the MPRI Model (both TAP2 and TAP3). Each of these Policy Statements is discussed below in terms of how MPRI Phase II and specifically, the Prison In-Reach process should be utilized to meet the expectations of the Model. References to the information that should be included in the TAP2 are underlined for emphasis. When applicable, other actions that should be considered by the Steering Team are also mentioned.

Policy Statement 19 regarding Housing: Facilitate prisoner's access to stable housing upon re-entry.

Affordable and sustainable shelter is fundamental to the re-entry process. Many prisoners have a place to stay upon release but few have a place to live. It is critical, therefore, that during Phase II and the Prison In-Reach process that the Transition Team, as representatives of the local community-based organizations to which the prisoner will return, are familiar with the full range of housing options available in each community and maintain lists or inventories of available housing. This information must be matched to the specific needs of the prisoner as the Transition Team determines - on an individualized basis - the particular housing needs for each prisoner, taking into account the feasibility, safety, and appropriateness of an individual living with family members after his or her release. The linkage here with Family Reunification activities are critical as they can help identify and address family violence risks of any prisoner whose return to the community may pose a risk to the individual or to his or her family or partner. The TAP2 must clearly identify the appropriate housing option for each prisoner well in advance of release and complete the paperwork needed to ensure enrollment or placement.

As part of the education program during Phase II, efforts should be made to educate prisoners about strategies for finding and maintaining housing in the community, and teach them about their legal rights as tenants in the private rental market. Funding is available to each Pilot Site to provide former prisoners who are entering the private rental market—and who demonstrate that they are without adequate resources to pay rent—with small stipends and/or housing assistance for the period immediately after release. To the extent that a Pilot Site community is in need of it, local Steering Team should develop "re-entry housing," to meet the specific and unique needs of persons released from prison. Steering Teams need to encourage private sector or nonprofit housing developers or community-based organizations to develop housing accessible to former prisoners. Most of the Pilot Site communities have or are developing Community Plans to End Homelessness and local Steering Teams need to be involved in these efforts so former prisoners who have histories of homelessness as part of the homeless priority population, to facilitate their access to supportive housing made available under the McKinney-Vento Act.

Policy Statement 20 regarding Planning Continuity of Care: Prepare community-based health and treatment providers, prior to the release of an individual, to receive that person and to ensure that he or she receives uninterrupted services and supports upon his or her return community.

While this policy statement refers specifically to health care, it provides a guiding principle for the seamless delivery of all services, consistent with the Mission of MPRI. While specific action on the issue is still pending, the notion that prior to release prison staff prepare a summary health record containing information about important medical problems, prior diagnostic studies, allergies, and medications for each prisoner prior to his or her release is a significant recommendation within the MPRI Model. Connecting prisoners to treatment and health care providers in the community prior to their release from prison in order to prevent gaps in treatment and services is an essential component of the TAP2 and must be very specific including appointments with community health care professionals as soon as is appropriate. Pre-qualifications for Medicaid are now possible as a result of the Department of Community Health participating as a partner in the MPRI and this must be completed during Phase II. At the very least, the Transition Team must ensure that prisoners who are receiving medications are provided with a sufficient interim supply of essential medications upon their discharge into the community. As part of the education

programming during Phase II, prison staff should educate prisoners about the continuity of care that is available in their community and provide them with the summary health record and other medical records prior to discharge.

Policy Statement 21 regarding the Creation of Employment Opportunities: Promote, where appropriate, the employment of people released from prison and facilitate the creation of job opportunities for this population that will benefit communities.

While many of the recommendations needed to meet this policy statement are about community development, others are quite germane to the Phase II and Prison In-Reach process. To set the stage for developing the TAP2, local Steering Teams and their community coordinators need to be aggressive and clear about their plans to "soften" the labor market for returning prisoners. As the recommendations suggest, these four activities are critical:

- Educate employers about financial incentives, such as the Federal Bonding Program, Work Opportunity Tax Credit, Welfare-to-Work programs, and first-source agreements, which make a person who was released from prison a more appealing prospective employee.
- Determine which industries and employers are willing to hire people with criminal records and encourage job development and placement in those sectors.
- Review employment laws that affect the employment of people based on criminal history, and eliminate those provisions that are not directly linked to improving public safety.
- Promote individualized decisions about hiring instead of blanket bans and provide documented means for people with convictions to demonstrate rehabilitation.

More specific to the TAP2, this policy statement pushed communities to consider the use of mentors as third-party intermediaries to assist employers with the supervision and management of former prisoners is an idea that is on the front burner for many of the MPRI Pilot Sites. The development of "social enterprise" businesses is also being considered by the Office of Offender ReEntry (See the Concept Paper, *Project REHAB – Former Prisoners Housing and Building Project*). This concept includes the approach of developing temporary employment – especially through Michigan Works! Employment Readiness Programs for prisoners and former prisoners - who cannot find work so that they can acquire real work experience and on-the-job training. If "job mentors" are part of the supervision strategy, then the connection of the prisoner with the mentor prior to release is essential. If Michigan Works! agencies, their subcontractors or social enterprises are to be part of the TAP2, they must be identified and specified TAP2 with the necessary paperwork for enrollment and/or pre-qualification completed prior to release.

Policy Statement 22 regarding Workforce Development and the Transition Plan: Connect prisoners to employment, including supportive employment and employment services, before their release to the community.

If housing is one of the most essential ingredients of successful re-entry, employment is the most important. As stated above, the MPRI envisions prisoners having jobs waiting for them upon release as a result of a wide variety of activities but regardless of this capability, Transition Teams must initiate job searches before prisoners are released using community-based workforce development resources and indicate the results of these efforts in the TAP2. During Phase II and as part of the Prison In-Reach process, Transition Teams – with the fully engaged support from their Steering Teams – must encourage employers to visit the correctional facility to meet with prospective employees before release. In one sense, perhaps the most important aspect of the MPRI Phase II Prison In-Reach process is to engage community members and community-based services to act as intermediaries between employers and job-seeking prisoners. The transfer of prisoners to prisons closer to their community of release is intended to facilitate this process. As part of the TAP2, the Transition Team should work with prisoners to maintain written information in their "re-entry portfolio" about their prospective employers or community employment service providers and official documentation of their skills and experience, including widely accepted credentials and/or letters of recommendation.

Policy Statement 23 regarding Victims, Families, and Communities: Prepare family members, victims, and relevant community members for the released individual's return to the community, and provide them with protection, counseling, services and support, as needed and appropriate.

Many of the recommendations for implementation of this critical policy statement have to do with improved functioning with state and local criminal justice agencies and are the subject of implementation strategies being considered by the Executive Management and State Policy Teams as well as the department-based, Resource Implementation Teams (See Issue Brief on MPRI Organizational Structure). These recommendations form the backdrop for the more specific work that needs to be done as part of the TAP2 development process and should be on the "to do" list of every Pilot Site when the recommendations are under their control:

- Provide notification and information to victims concerning the prisoner's release and re-entry process.
- Offer counseling and support to crime victims preparing for the return of an individual to the community.
- Create policies for victim restitution and child-support debt management, including collection processes, that encourage payment and family stability, and engage family members in creating a viable support strategy.
- Ensure timely and appropriate notification of key community representatives of the prisoner's release.

As part of the Prison In-Reach process, the Transition Teams should be working with family members so that they not only receive adequate notification and information regarding the prisoner's impending release, but are engaged in family re-unification activities. To the extent family re-unification efforts must continue upon release, they need to be fully specified in the TAP2. These types of services, as part of the community supervision strategy must consider the needs and strengths of the prisoner's family and then build community networks to provide counseling, safety planning, and other services to help the family cope with the emotional, financial, and interpersonal issues surrounding the individual's return. These activities can be paid for using the MPRI funding from the MDOC.

Policy Statement 24 regarding Identification and Benefits: Ensure that prisoners re-enter their communities with appropriate forms of identification and that those eligible for public benefits receive those benefits immediately upon their release.

This policy statement is going to require a great degree of improved collaboration among agencies that are committed to the MPRI. To begin with, the Transition Teams will need to ensure that the process of applying for proper and fully acceptable forms of identification, including funding sources where prisoners lack adequate funds for obtaining identification, are put into motion at the earliest possible time during Phase II. Eventually, this process will begin during Phase I – as early as when the prisoner is admitted at the reception center – but until then, the process must take place during Phase II. The degree to which issuance of identification documents have been obtained or still need to be obtained – with specific steps in the process (phone calls, appointments and the individuals to whom the former prisoner will need to speak) must be documented in the TAP2 and contained in the prisoner's ReEntry Portfolio.

At the same time, the State Policy Team will be asked to work with the Michigan Secretary of State and other state agencies to allow prisoner's MDOC identification to be accepted as valid identification by other agencies. Having the chief deputies or directors of state agencies engaged in the MPRI through the State Policy Team is expected to pave the way for "system change". For example, timely access to Medicaid benefits has been greatly improved upon since the agreement from the Department of Community Health to suspend, instead of terminate, Medicaid benefits during incarceration. Other recommendations that support this policy statement need to be addressed at the state level by the Executive Management and State Policy Teams, at the local level by the Steering Teams and on a case-by-case basis with each prisoner as part of the Prison In-Reach and TAP2 development process. Helping prisoners identify and apply for appropriate benefits and identification as part of their TAP2 by directly engaging with the appropriate agencies is one of the many reasons that prisoners are being housed in facilities closer to their homes. The Prison In-Reach and TAP2 process should include a series of activities that need to be documented in the TAP2 and/or the prisoner ReEntry Portfolio:

- Ensure interagency collaboration to effectively screen prisoners for eligibility for Temporary Assistance for Needy Families (TANF), Medicaid, supplemental security income, food stamps, and other benefits, and to facilitate successful pre-release application for these benefits.
- Assess prisoners for eligibility for veterans' benefits and services, and ensure access to those benefits.
- Facilitate access to "non-recurrent" TANF benefits for former prisoners.
- Adopt a narrow definition of "in violation of a condition of parole/probation" for the purposes of TANF, food stamps, SSI & public housing.

- Adopt balanced admission and eviction policies for public housing that consider individual circumstances.
- Ensure continued Medicaid coverage for TANF families with parents who are released from prison.

Policy Statement 25 regarding the Design of the Supervision Strategy: Review and prioritize what the releasing authority has established as terms and conditions of release and develop a supervision strategy that corresponds to the resources available to the supervising agency, reflects the likelihood of recidivism, and employs incentives to encourage compliance with the conditions of release.

Several of the recommendations that support this policy statement are already in place and represent several of the fundamental components of the MPRI Model. These recommendations and the status of each are as follows:

- Engage community members, including representatives from community corrections, law enforcement, and community-based organizations, to serve on a transition team with corrections staff, and charge the team with the development of a comprehensive supervision strategy. *To date, however, the focus has been more on the TAP2, rather than a "comprehensive supervision strategy" which is what the TAP3 – still under design - should accomplish.*

- Transfer prisoners as the release date approaches (and as appropriate and feasible) to correctional facilities nearest to the community to which the individual will return. *These transfers have taken place but are currently only about 4 months prior to release. In the next "wave" of prisoner transfers, it is expected that they will be at the Phase II Prison Facility site for up to six months. Eventually, this will extend to nine months to a year as the MPRI process matures.*

- Assign a supervision field agent to each prisoner before the date of his or her release and engage the field agent on the transition planning team. *A different agent from the one who will actually supervise the former prisoner may be assigned to work with the prisoners at the MPRI Prison Facility.*

- Provide each individual before release with a written copy of his or her terms and conditions of release and their TAP2. Explain both documents to them clearly, ensuring that he/she understands them. *This happens at the facility prior to release and during orientation session at the parole office immediately after release.*

- Seek information from, and promote cooperation with, law enforcement in the jurisdiction to which an individual will return before his or her release. *If Steering Teams have engaged local law enforcement officials in the MPRI process, this should be the subject of discussion and planning.*

Finally, once the MDOC has developed it, during Phase II, MDOC staff will apply the information from risk, needs, and strengths assessment instrument administered prior to the release decision, and re-assess prisoners if necessary to determine appropriate supervision strategies. This is expected to be developed in the next six months to a year.

Policy Statement 26 regarding the Implementation of the Supervision Strategy: Concentrate community supervision resources on the period immediately following the prisoners release and adjust supervision strategies as the needs of the former prisoner, the victim, the community, and the family change.

The primary point of this policy statement is to focus supervision resources on the period directly following release and to ensure that contact between the field agent and former prisoner corresponds to the level of risk presented. To begin with, all re-entry former prisoners will be placed on maximum supervision to assure at least weekly contact for the first three months of release. The filed agents assigned to MPRI cases will eventually move toward more "community supervision" that allows them to supervise probationers or parolees in the community – and the neighborhoods - where they live. As parole agents become more familiar with the MPRI process and engage in dedicated training on improved "case management" as opposed to "case supervision", the agents will facilitate compliance by recognizing that people under supervision will require an adjustment period, and address the issues that this period poses.

One of the major "cultural changes" that needs to be managed within the parole supervision process is more effective leveraging of the community-based network to assist with the implementation of the supervision strategy, and the

periodic consultation with family and community members to determine their assessment of the person's adjustment to the home and/or neighborhood. This is critical as part of the process to assess periodically the extent to which the individual's transition into the community is proceeding successfully and the extent to which it may be necessary to modify the supervision plan accordingly. Explicit discussion by the Transition Team of the community supervision strategy – and the degree to which these points will be considered – is an essential step in the Prison In-Reach and TAP2 process. Finally, as a result of the local comprehensive planning process, greater coordination of the activities of local law enforcement and field staff is expected.

Policy Statement 27 regarding Maintaining Continuity of Care*: *Facilitate former prisoners' sustained engagement in treatment, mental health and supportive health services, and stable housing.

Special training is needed for field agents to understand—and respond effectively to—the special needs of former prisoners with mental illness. One of the recommendations under this policy statement that needs to be implemented is to ensure that all field agents know how to monitor people with substance abuse issues and how to engage former prisoners in treatment, where appropriate. In terms of health care, there needs to be improved coordination of physical health services for individuals with special health needs and these needs should be documented in the TAP2. At the state level, the State Policy Team will be determining the potential to implement policies and programs that prevent former prisoners from entering emergency shelters or otherwise becoming homeless upon release as they attempt to foster stability in housing.

Community Involvement in the MPRI Process and the Role of the Community Coordinator

It is clear then, that each of the major decision points for improved prisoner re-entry under the MPRI Model must involve community input and collaboration. Without local community involvement, the process would be viewed as "top down" and undoubtedly miss the opportunities for local expertise and experience at the ground level where service delivery must be focused. The primary role of the MPRI Community Coordinator is to be the "point person" to coordinate the community's input so that the key local stakeholders have enhanced capability to adjust their processes accordingly and have in place a communications system to make certain everyone is clear about the process and has a voice in its development. The primary tasks of the Community Coordinator include:

- *Task 1.* The Community Coordinator will be responsible for making certain the information from the first Transition Accountability Plan (TAP1) is in the hands of the local MPRI Steering Team. (Pending implementation of Phase I)

- *Task 2.* The Community Coordinator will be responsible for making certain that the Targeted or Earliest Release Date and status of the offender's movement to the facility nearest his or her city of return is communicated to the local Steering Team and the local Transition Team.

- *Task 3.* The Community Coordinator will be responsible for ensuring that the local field agent coordinates the logistics for the interaction of the Transition Team and the local prison and for the convening and facilitation of local Team meetings to develop the TAPs.

- *Task 4.* Since the Community Coordinators will be acting as staff for the local Steering Teams and their ReEntry Councils, one of their many responsibilities will be to coordinate the planning and implementation of the fourth and final TAP (TAP4: The Discharge TAP) that will be the "hand off" of the parolee's case to responsible parties in the community who will continue providing services and guidance to the ex-offender.

REPORT TO THE LEGISLATURE
Pursuant to P.A. 154 of 2005
Sections 1010 (1), 1010 (2), and 1011
Prison Academic and Vocational Programs Report
January 2006

Section 1010 (1) of P.A. 154 of 2005 requires that the Department of Corrections provide by February 1 of 2006, the percent of offenders included in the prison population intake for fiscal years 2003-2004 and 2004-2005 who have a high school diploma or a general educational development (G.E.D.) certificate. Section1010 (2) requires that the Department of Corrections provide by February 1 of 2006 statistical reports on the efficacy of department-provided academic and vocational programs for reducing offender recidivism rates. Section 1011 requires the Department to report GED certification rates and to present a plan to improve those rates. This report is the fulfillment of these requirements.

I. Introduction and Background

Prison academic and vocational programs are only two of many programs, interventions and strategies targeted at improving offender's skills and abilities to enhance their prospects for parole success and satisfactory reintegration into society. Education, both academic and vocational, is a critical component of preparing offenders to successfully reintegrate into society following completion of their prison term. Prisoner education can provide prisoners with necessary skills to obtain employment upon release, and rapid connection to employment is known to play a significant role in successful parole. Because educational and vocational programs lead to skills that, in turn, work in concert with other programs and treatments to make offenders more likely to succeed upon parole, they are central to MDOC's efforts to better protect the public through increasing parolee success. Those efforts are centered on the implementation of the Michigan Prisoner Reentry Initiative (MPRI).

MPRI is a holistic approach for reducing crime, creating safer neighborhoods, and helping prisoners to leave and stay out of prison. The overall goal of MPRI is 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. As a holistic approach, MPRI aims to improve the success rates of prisoners who transition from prison by fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

The major barriers and gaps preventing increased parolee success – and the specific outcomes that Michigan wants to achieve – are in the areas of alcohol and substance abuse treatment, employment, education**,** housing, welfare, and health care services. Removing these barriers and filling these gaps will increase the potential for long-lasting family reunification and community success. We are better preparing inmates for release, improving the parole process, and revitalizing the supervision of parolees in the community upon their release to address the issue of relapse prevention. But in order for

parolee success to be sustained beyond the period of parole supervision, a new partnership inside and outside of state government is underway via the MPRI – a partnership built on a common vision and a shared understanding of what really works to help offenders who get out of prison stay out of prison.
The vision of the MPRI is that every prisoner released to the community will have the tools needed to succeed.

The mission of the 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 MPRI has two complementary goals:

- ***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.*

These goals will be achieved by implementing an MPRI Model that includes the following reentry strategies:

- State-of-the-art prisoner assessment and classification.
- Prison-based planning and programming aimed at sharply reducing risk of recidivism.
- Linkage between the prisons and the community that prepares inmates for release.
- Effective coordination and collaboration among community agencies to deliver supervision and services that reduce recidivism.
- Interagency information sharing.
- Performance-based management.
- System reforms based on evidence-based practices.

Assessment and Case Planning

Improved assessment and case planning are at the core of the MPRI initiative. Improved assessment practices and information sharing will enable correctional staff to decrease the likelihood of recidivism, improve offender success, decrease victimization and enhance public safety by informing decisions pertaining to the following:

- Classification and reclassification,
- Reentry Plans (TAPs),
- Release decision making,
- Community supervision and services,
- Revocation decision making,
- Discharge from supervision or sentence.

Assessment of offender's Risk, Needs and Strengths, while an ongoing, dynamic process, begins at Reception into prison. During an offender's stay in reception, they are assessed for physical health, mental health, **educational capabilities and achievement**, substance abuse and numerous other areas. The end product of these assessments is the development of a series of recommendations for programs and interventions to address issues and deficiencies identified by one or more of the assessments.

Under MPRI, the assessment and case planning process will be more unified and much of it will be structured around the implementation of a new objective, validated, comprehensive Risk, Needs and Strengths assessment instrument and the completion of a series of Transition Accountability Plans (TAPs) that correspond to the stages of an offender's passage through the criminal justice system (institutional, release, transition, discharge).

Risk, Needs and Strengths Assessment

MDOC is entering into a contract with Northpointe Institute for Public Management, the developer of COMPAS for offender risk assessments. The COMPAS (Correctional Offender Management Profiling for Alternative Sanctions) system is a risk and needs assessment system for placement and treatment decisions and case management planning. COMPAS designs include four major risk assessment scales (Violence, Recidivism, Flight, and Community Non-Compliance), which can be used for decisions regarding release and case management supervision. COMPAS risk assessments are based on a comprehensive set of well validated criminogenic risk and needs factors which include the following:

- Criminal history
- Violence history
- Early onset of delinquency
- Substance abuse
- Vocational/Educational needs
- Financial problem/poverty
- Family criminality
- Problems with constructive use of free time
- Residential instability
- Criminal associates
- Criminal attitudes
- Criminal personality
- Criminal opportunity

COMPAS computes combinations of these and other factors to summarize each offender's unique pattern of risk, needs and strengths and calculate their risk of four distinct types of parole problems: Violence, Other Recidivism, Failure Appear and Non-Compliance with Rules.

As part of the case summary, COMPAS calculates a weight for each factor which facilitates the identification of those factors that are most associated with the offender's

criminal behavior and risk of unsuccessful community reintegration. This weighting of risk factors and needs feeds directly into the Case Planning function which is integrated into the COMPAS process.

Transition Accountability Plans

The TAP process starts during a prisoner's classification and assessment at reception and continues through their ultimate discharge from community supervision. TAPs define programs or interventions to modify offender's dynamic risk factors that were identified from risk assessments. The TAP is an individual plan which is unique to each offender and takes into account their specific combinations of risk factors, needs, and strengths. Thus, the plan and the combination of treatments, programs, and interventions that follow from it is not, "one size fits all". Instead, optimal results will be obtained not by any individual program or treatment, but by a combination that targets the offender as a unique package of factors that cumulatively affect their prospects for successful community reintegration. In the case of education, the abilities to read, write and do basic mathematics are foundation stones that enhance offender's employability and ability to cope in the community, which, in turn increases their chances of successful adjustment to life outside prison. In some cases, the ability to read and write significantly enhances other programs, whose optimal delivery strategy involves participant's abilities to read and comprehend written material.

During the MPRI program, specific plans (TAPs) are developed for integrating prisoners' transitions from prison to communities by spanning phases in the transition process and agency boundaries. Thus a TAP is a collaborative product which involves prison staff, the prisoner, the releasing authority, community supervision officers, human services providers, victims, and neighborhood and community organizations. TAPs are formal agreements based on negotiations between and signed by the prisoner, the MDOC, the Parole Board, and relevant partners that define roles and responsibilities of everyone involved. The following is the principal TAP frame work for eventual release:

- Starts during classification and continues through discharge from community supervision.
- Defines the offender's risk, needs, and strengths identified in assessment.
- Allocates resources to services based on risk management strategies.
- Appropriate partner principles
- Defines the responsibilities of the offender, corrections, and partners throughout the process.
- Long-term road map
- Case management

TAPS are structured around targeted release dates. These targeted release dates are established either by law or by discretionary action of the Parole Board. These targeted release dates connote strong expectations that all parties (facilities, releasing authority, and prisoners) will abide by terms of the plans. From these TAPs, prisoners who are eligible for parole may have reasonable expectations that if they complete the requirements described in their TAPs and they maintain good behavior while confined

then they will be released on their targeted release dates. However, it is important to remember that TAPs are not contracts which guarantee parole or early release. The ultimate decision to grant or deny parole still rests with the Parole Board.

II. Academic Education Programs

Many parolees tend to have difficulties finding work that will adequately provide for their basic needs (and often dependents) due in part to their deficiencies in marketable skills and their stigma of being felons. This problem is even more pronounced in states such as Michigan with higher than average unemployment rates. The guiding premise of adult basic education is that if offenders' deficiencies in basic skills for reading, math, writing, science, and social studies are improved then these offenders will have improved chances of being employed and avoiding criminal behavior upon their community re-entry.

The level of need for academic educational programs is summarized by a review of educational levels of offenders entering prison.

Table 1
Percent of Prison Intake with a GED or Diploma: 2004 and 2005
Section 1010 (1)

	Percent with GED or Diploma at Intake* (Self Reported Prisoner Information from PSI)
2004	47.2%
2005	50.6%

*National Average 51% - 1992 National Literacy Study

It is important to note that, according to P.A 320, prisoners committed after December 15, 1998 who do not already have a diploma or GED must obtain one in order to be parole eligible, unless determined to be exempt. A prisoner may be exempted for one or more of the following reasons.

1. 65 years of age or older
2. Were gainfully employed immediately before committing the crime for which the prisoner is incarcerated as reflected in the pre-sentence investigation report prepared pursuant to PD 06.1.140 "Pre-sentence investigation and Report". This does not include employment in an illegal activity.
3. Do not have the necessary proficiency in English to attain a GED certificate.
4. Have learning impairments. A learning impairment is defined as a chronic condition hindering the ability to improve academic learning as evidenced by:
    a. The inability to attain a measurable advancement (i.e., at least a .5 grade level) for reading or math as determined by the TABE in a one year period of continuing classroom time; and ,
    b. A minimum of three documented teacher interventions to improve academic skill development in reading or math.
5. Are special education students and they are progressing toward the goals set forth in the prisoner's Individual Education Plan (IEP) developed pursuant to PD 05.02.11 "Special Education Services for Prisoners".

6. Have documented medical problems which preclude their participation in the education program.
7. Are unable to successfully complete the requirements for a GED certificate at no fault of the prisoner's own.

In order for a prisoner to receive a GED completion exemption pursuant to Paragraph P, education staff must complete a GED Completion Exemption form (CAJ-789) and forward it to the Warden for approval. An approved exemption shall remain in effect until the basis for the exemption is no longer valid, as determined by the Warden where the prisoner is housed.

MDOC correctional educators instruct a unique and difficult population. For these prisoner students, the following barriers have been identified:

- Prisoners begin their correctional education with low grade level test scores, and require basic academic instruction before they can begin GED preparation.
- The vast majority of these students have a history of polysubstance abuse which is known to result in memory loss and learning difficulties.
- Many students, that are too old to currently qualify for services, report a previous special education history (which is an indicator of learning difficulties).
- Prisoner students (whose average age is approximately 35) are mandated to school, which combines with their previous negative educational experiences to create a poor attitude in the classroom.
- The majority of these students have not developed study habits, work ethics, or testing strategies, all of which must be taught in addition to the core curricula.
- High prisoner transfer rates impede continuity of studies through enrollment, removal, and re-enrollment in numerous schools on the path to GED completion.
- Approval for educational software has yet to be received, which impedes the use of computer assisted instruction.
- There is a need for improved support to maintain educational delivery and data collection systems.

MDOC educators work to overcome these barriers, and consistently create success as evidenced by the following statistics:

- MDOC prisoner education is responsible for more completed GEDs than all of the other Adult Education programs in the state combined. In 2005, 2,205 GEDs were completed by MDOC prisoners
- *Section 1011* For the five year period from 2000 through 2005 an average of 2,180 GEDs were completed per year. Year by year results are presented in Table 2

Table 2
Number of GEDs Completed: 2000-2005
Section 1011
Source: MDOC School Reports 2001 - 2005

2001	2002	2003	2004	2005	Five Year Average
2,613	2,130	1,999	1,951	2,205	2,180

While public schools measure success by student advancement of one grade level in a year, prisoner students regularly advanced by two or more grade levels in a year, and the expectation is that in the average two-three year sentence, teachers will advance these students by half a dozen years, to attain their GED. Thousands of these students are made into GED graduates in a year. The teachers of MDOC meet the challenge, and prepare prisoners for return to their communities.

The GED Testing Service in Washington, D.C. is the definitive source for GED test results because the agency develops, distributes, and scores the tests and issues GED certificates once the complete battery of five tests is passed. Tables 3 and 4 demonstrate that MDOC's result compare favorably to most others across the country.

Table 3
(Section 1011) 2002 GED Pass Rate: MDOC and U.S. Prisons*
Source: GED Testing Service 2003 Statistical Report

	Percentage of GED tests passed
U.S. Correctional Institutions:	64%
Michigan Prisons:	72%

* Federal Correctional Institutions and MDOC are the only two prison systems that report GED results separately from public school systems. Thus, comparisons to prison systems other than U.S. BOP cannot be made from available data.

Table 4
(Section 1011) GED Pass Rate: MDOC and Selected Public School Systems*
Source: GED Testing Service 2003 Statistical Report

	Percentage of GED tests passed
District of Columbia general public:	52%
New Jersey general public:	52%
New York general pubic:	54%
Illinois general public:	64%
Texas general public:	65%
California general public	67%
Massachusetts general public:	68%
Pennsylvania general public:	69%
Michigan general public:	71%
Average for all jurisdictions tested:	71%

* Provided for comparative purposes, since comparison to other prison systems cannot be made for reasons explained in the note to Table 3.

III. Plan to Improve GED Success Rates *(Section 1011)*

Even in light of the favorable certification rates relative to other jurisdictions and school systems, MDOC has developed a detailed plan to improve the rate and increase the number of GEDs granted to prisoners. The plan addresses several areas which, taken together should substantially enhance our ability to identify appropriate candidates, prepare them for GED testing and improve the testing process. The specifics of the plan are outlined below.

Data Collection and Reporting

- Improve data input and output collection.
- Optimize the ability to establish and measure outcomes.
- Monitor and review programs for consistency through mandated data reporting.
- Complete annual prisoner educational surveys, in compliance with DLEG adult education program recommendations.
- Compile data on prisoner annual education program surveys to identify potential areas for review.

Administration

- Monitor and review programs for consistency through school audits.
- Maintain curriculum committees to review/recommend program improvements.
- Focus teaching resources on effective GED preparation.
- Ensure program standardization to provide minimal disruption when prisoners are transferred.
- Revise the Education Program Plan (EPP) instrument.
- Develop a "Fast Track" GED process where prisoners identified as high functioning are GED tested without delay.
- Monitor Fast-Track GED prisoner student achievement and refine the program as needed.
- Establish tester positions by geographic locations to increase efficiency of testing operations.
- Maintain liaison with GED and state Adult Education offices.
- Establish a goal for increased GED completions, based on school enrollment and staffing.
- Establish a goal of a 70 percent GED passing rate to optimize testing economics and opportunities.
- Prioritize work of the four School Psychologists: first, special education evaluations; and second, GED testing accommodations to improve GED passing rates.
- Recommend a plan to place prisoners at facilities whose schools can accommodate them, thus minimizing wait lists.
- Support the Michigan Prisoner Re-entry Initiative in all plans and provide resources to best ensure those entering the community through participation in the initiative have their GED.
- Revise RGC academic testing to provide more accurate data for the determination of students' academic achievement level and program placement.
-

Curriculum

- Develop a standard, individualized, and performance-based progress plotter for academic programming to further continuity, consistency, and efficiency.
- Identify additional math/writing materials for increasing competencies, leading to a greater percentage of successful GED subtest completion.

- Identify additional math/writing strategies for increasing competencies, leading to a greater percentage of successful GED math/writing subtest completion.
- Implement curriculum improvement as resources allow.

Training

- Disseminate information on current trends and mandates.
- Provide training to those responsible for data entry.
- Provide additional training and materials for English as a Second Language (ESL) teachers.
- Provide professional development to further improve teaching techniques, best practices, and instructional strategies.
- Provide teachers with training in proper EPP completion.
- Provide teachers with enhanced training in the writing of clear, measurable, and effective education objectives.

Testing Mandates

- Mandate schools to give the full battery of GED tests to prisoners testing for the first time.
- Increase frequency of testing to ensure that schools test on a regular schedule. Increased frequency of testing positively impacts results.
- Develop a statewide, standardized testing (Test of Adult Basic Education, TABE) schedule to improve the capture and quality of achievement data in the state in order to compare with other Adult Education Programs.
- Ensure the statewide GED operating procedure provides guidelines to optimize testing.
-

IV. Prison Vocational Training

A majority of MDOC's prisoners enter prison with poor job market skills and employment records. The intent of MDOC's vocational training is to improve their chances of community employment and thereby decrease their chances of subsequent criminal activity.

Some key findings regarding vocational programming in the Michigan Department of Corrections:

- At any given point in time, there are over 9,000 prisoners enrolled in prison educational programming.
- In 2002, approximately 15.8% (Voc Report N = 281, 12 month estimate =1,686) of all parole/discharges completed at least one vocational program during their most recent incarceration.
- In 2005, 2,720 Vocational programs were completed.
- The estimated annual participation in Vocational programs is between 6,000 to 8,000 depending on the amount of participant turn over in these programs.

Summary of Vocational Programs in the MDOC

Vocational programming is offered based on prison operation needs and the current labor market. MDOC's Vocational programs currently include the following:

1. Auto Body Repair- Prisoners learn the basics of auto body restoration and repair, including bumping, painting, disassembly and reassembly of fenders, doors, and hoods with emphasis on safe-related work skills. Instruction leads to state certification in collision repair.
   - Prison/community Benefit- Trained prisoners upon release will be skilled to perform functions associated with auto body shops.
   - Labor Market Options- Employment options include working for car dealerships

2. Auto Mechanics- Prisoners learn basic shop safety, automotive construction and skills for state certification in engine repair, brakes, electrical systems, and tune-up and engine performance.
   - Prison/Community Benefit- Trained prisoners upon release will be state certified in at least two areas and skilled to perform various functions associated with auto mechanics.
   - Labor Market Options- Employment options include working for car dealerships, auto repair shops, or retail businesses related to the automotive industry.

3. Building Trades- Prisoners learn basic construction trades skills and carpentry skills using National Center for Construction Education Research (NCCER) curriculum. Completion of skill requirements includes national certification and placement in National registry.
   - Prison/Community Benefit- Trained prisoners work with staff in maintaining the prison's physical plant and building housing components for the Prison Build Program.
   - Labor Market Options- Employment options include working as a handyman, in a lumber yard, for a general contractor, in a building supply store or in other construction trade positions.

4. Business Education Technology- Prisoners learn basic computer skills, including keyboarding, thorough preparation for Microsoft Office User certification
   - Prison/Community Benefit- Trained prisoners provide services as school tutors, clerks and library aides and may work on service learning projects for the prison and community.
   - Labor Market Options- include jobs that require computer operation or basic computer knowledge, e.g. shipping/receiving, stock, clerical, document/database/spreadsheet development.

5. Custodial Maintenance- Prisoners learn basic skills in restroom care, floor care, cleaning chemicals, carpet and upholstery care, safety and health, as well as hands-on experience with cleaning equipment.

- Prison/Community Benefit- Trained prisoners provide cleaning services throughout the facilities.
- Labor Market Options- Employment options include working for a cleaning company or self-employment in the cleaning services business.

6. Electronics- Prisoners learn skills in the electronics field leading to certification in various areas.
   - Prison/Community Benefit- Trained prisoners upon release will be skilled in digital and microprocessor electronics and may earn certification in robotics and computer repair.
   - Labor Market Options- Employment options include working for a repair service or self-employment in areas of certification.

7. Food Service/Hospitality Management- Prisoners learn safety and sanitation in food handling as well as other areas of food service operations which are integrated with information related to the hospitality industry in areas such as lodging, nutrition, and catering; skills lead to certification with the National Restaurant Association.
   - Prison/Community Benefit- Trained prisoners work in the MDOC's food service program which helps to ensure the efficiency, cleanliness and cost-effectiveness of the program.
   - Labor Market Options- Employment options include the food service or hospitality industry.

8. Horticulture- Prisoners learn skills in greenhouse management, plant science, landscaping, fruit and vegetable gardening, and turf management and may include testing in nurseryman certification.
   - Prison/Community Benefit- Trained prisoners provide services to prison grounds and products are grown for the Prison Build Program. The MDOC's food services program receives thousands of pounds of vegetables annually from horticulture programs. Various non-profit organizations and agencies also receive vegetables, plants and flowers grown in MDOC horticulture programs.
   - Labor Market Options- Employment options include greenhouse management, landscaping, plant center care (i.e., Lowes), or self-employment.

9. Machine Tool Operations- Prisoners learn to use various grinders, mills, lathes and saws including computer assisted machines that are required in the machine tool field.
   - Prison/Community Benefit- Trained prisoners provide services to the prison maintenance department.
   - Labor Market Options- Employment options include entry-level employment in a machine tool shop.

10. Optical Technology and Dispensing Programs- Prisoners learn to read and adjust prescriptions, repair eyeglasses for donation to the needy, and make glasses for the prisoners through affiliation with Michigan State industries. Students may earn national certification as an optical dispenser.
    - Prison/Community Benefit- Skilled prisoners prepare glasses for contribution worldwide, underprivileged populations as well as making glasses for prisoners.
    - Labor Market Options- Employment options include working for an eyeglass repair distribution business.

11. Visual Graphic Technology- Prisoners learn skills in desk top publishing, mass production of print materials, and skills on equipment such as digital duplicators or off set presses.
    - Prison/Community Benefit- Prisoners work on projects for the institution or community.
    - Labor Market Options- Employment options include newspapers, publishers, specialty print shops, ad agencies, or marketing departments.

12. Welding- Prisoners receive training in a wide variety of welding areas such as oxyacetylene safety, brazing, cutting, T.I.G and M.I.G. and welding plasma arc cutting. They also receive hands-on instruction on welding various materials such as steel, stainless steel, and aluminum.
    - Prison/Community Benefit- Trained prisoners provide assistance with maintenance and repairs needed in the facility and work on service learning projects for community agencies as needed.
    - Labor Market Options- Employment options include working in a welding shop, factory, or related fabrication industries.

To maximize the benefits while on parole from educational programs and vocational training, prisoners must be provided with opportunities to participate in work assignments, skill building programs, and they should ideally be connected to community employment before their transitions from prison.

V. Relationship Between GED, Vocational Training and Recidivism

National Research Findings (full citations are found at the end of this Addendum)

Research in other jurisdictions substantiates that, while education and employment programs can impact recidivism, the relationship is complex and must be studied in the broader context of offender needs and causes of their criminality. An Urban Institute report (Solomon, et al, 2004) notes that "(b)ecause the link between employment and crime is complicated by other factors, including housing, health care and drug treatment, employment is only one component of a multifaceted approach to assist returning prisoners." The study continues on to note "Programs ... that are multi-modal in nature are, in general, more likely to be effective than those that are not. Thus, if an inmate has vocational needs as well as substance abuse and life skills (including educational) needs,

the efficacy of any one of these interventions is enhanced even more if treatment and services are well integrated ...." Put simply, studying one program in isolation is unlikely to produce evidence of a strong relationship with outcomes.

Even in light of those observations, there are encouraging results to be found in credible research studies produced in many venues.

- A frequently cited study by Wilson, Gallagher and MacKenzie (Journal of Research in Crime and Delinquency, 2000) found that "(analyzing) the recidivism outcomes of 33 independent experimental and quasi-experimental evaluations of education, vocation and work programs ... found that program participants recidivate at a lower rate than nonparticipants."
- The 2004 Urban Institute research summary (Solomon, et al, 2004) concluded that "In general, participants in prison-based educational, vocational, and work-related programs are more successful – that is, they commit fewer crimes and are employed more often and for longer periods of time after release – than are nonparticipants."
- A study from the Washington State Institute for Public Policy (Aos, et al, 2001) assessed the cost benefit of educational programs in prisons and determined that there is a benefit to cost ratio of $5.65 from reduced crime for each dollar spent on educational programs. This savings is the result of "... a significant effect size of about -.11 for recidivism."
- The Washington study also looked at the benefits of vocational programs. Their findings indicate that there is "... a significant effect of about -.13 for recidivism." Their analysis translates that effect in "... a combined taxpayer and crime victim benefit of $7.13 for every dollar spent."
- A Texas study (Gerber and Fritsch, 1994) found that "research shows a fair amount of support for the hypothesis that adult academic and vocational programs lead to ... reductions in recidivism and increases in employment opportunities."
- A research summary from the New York University Law School (Bushway, 2003) notes the importance of programs considered together. "The effects of work programs and training programs are roughly equivalent." The summary goes on to note "... the studies with the largest employment effect tended also to have the largest reduction in recidivism." Regarding the importance of programs targeted at offender attitudes, motivation and thinking patterns, the study states "Any program that hopes to cause large scale change must focus on changing an individual's preferences or fundamental orientation changes."

<u>Michigan Findings</u>

The following information relates only to the relationship between academic and vocational programs and recidivism. For reasons, outlined above, these simple associations between single programs and ultimate outcomes should be viewed with considerable caution because they fail to capture the true complexity of factors that determine success of failure on parole. Also, it is crucial to remember that the first MPRI prisoners were paroled in December 2005, so the combined effects of education and

MPRI cannot yet be measured. In addition, current MPRI participants have had the benefit of only Phase II ("Going Home") of the overall MPRI program. As MPRI implementation expands and Phase I ("Getting Ready") is implemented beginning at prison intake, prisoners will be exposed to a much broader range of programs, treatments and interventions provided according to their unique Risk, Needs and Strengths profile. Thus, subsequent reports will report on recidivism outcomes that capture significant parole periods and, in subsequent years, incorporate a true picture of the overall impact of MPRI, of which academic and vocational education are just a part.

Design and Methodology

Included in this report are 547 Prisoners who paroled in September and October 2002. Half the sample consists of all parolees during those two months that had a completed vocational program. The remainder of the sample is comprised of an equal sized random sample of parolees from the same period who had no vocational program completions. Educational and Vocational data was obtained from OMNI, OETS, and prisoner files for all prisoners paroled during this period and matched to cases in this report to determine their educational and program completions. Then vocational program completions were reviewed. A review of OETS vocational data showed that there was a need to supplement and check the OETS data by the review of physical files. Recidivism was measured over a standard two year follow up period.

Limitations

This report was limited to reviews of academic and vocation programs and does not consider other barriers to community transitions such as substance abuse, mental illness, and other confounding factors. For example, over half of the parolees in this report had indicators for substance abuse dependence. Because the offender Education Tracking System (OETS) was not implemented until July 2004, data on GED and vocational programs was in large part collected from paper files. In addition, standards for program completion were not clear during the entire period reviewed. These standards are being refined and clarified on an ongoing basis as OETS usage expands. Also, the effectiveness of OETS is dependent on the roll out of the Offender Callout Management System (OCMS) data base. The Department of Information Technology (DIT) developed OCMS and OETS to run complementarily. Thus, OETS will run more efficiently and accurately upon the complete implementation of OETS statewide.

Findings

Table 5 shows comparative recidivism rates for parolees that completed GEDs while in prison, those that completed at least one vocational program during their incarceration and parolees that completed both a GED and vocational programming.
Findings indicate that offenders that completed a GED during their incarceration had a lower recidivism rate (48.3% vs. 48.7%) than the overall baseline rate. Similarly, offenders that completed a vocational program showed improvement over the baseline rate. Perhaps most significantly, offenders that completed BOTH a GED and a Vocational program showed the greatest improvement over the baseline. This result is

consistent with the discussion earlier regarding the complexity and interrelationship between offenders' needs. In this case, the combined effect of two programs exceeds the benefit from either program alone. As MPRI implementation moves forward and more of offenders higher level needs (e.g. housing, Substance Abuse treatment) are addressed along with educational requirements, these results are almost certain to show marked improvement.

Table 5
Comparison of Recidivism Rates for GED, Vocational, and Baseline
Section 1010 (2)

	GED Completed During Current Term	**Vocational Program Completed during current term**	**Both GED and Voc Program completed during current term**	**Overall Baseline Recidivism Rate**
No Recidivism	51.7%	53.9%	54.4%	51.3%
Recidivism	48.3%	46.1%	45.6%	48.7%
Total	100%	100%	100%	100%

VI. Educational and Vocational Status of MPRI Participants

For reasons discussed above, this report cannot assess the combined effects of academic and vocational education and MPRI. As noted, only a very small number (fifteen) MPRI participants had been released on parole as of December 31 and the longest that any MPRI case had been on parole at that time was approximately six weeks. However, it is of benefit to look at what current MPRI participants look like in terms of academic and vocational background.

Results summarized in Table 6 indicate that there are significant numbers of current MPRI participants that lack academic or vocational training, or both. It is expected that the percent falling into those categories will fall substantially in the future, as MPRI Phase I implementation occurs and planning and programming to prepare offenders for release begins at the point of prison intake.

Table 6
Vocational Training and GED for 158 MPRI participants

	No GED	**GED or Diploma Prior to Commitment**	**GED During Current Commitment**	**Total**
No Vocational Training	43	19	66	128
Vocational Training	0	6	24	30
Total	43	25	90	158

VII. Summary

Results of research in Michigan and elsewhere in the country suggest that academic and vocational programs can positively impact offender reintegration and, as a consequence, reduce recidivism. Equally important are the consistent findings that considering academic and vocational programs in isolation can result in misleading and incomplete conclusions about their impact. These results strongly indicate that recidivism is a very complex phenomenon, influenced by a variety of factors working in combination. Thus, any strategy to reduce recidivism must address the issue with an equally complex and integrated approach. It is precisely that approach which provides the underpinnings of MPRI, which takes a holistic view of offenders' risk, needs and strengths and targets a coordinated package of services, programs and interventions to improve their chances of making a successful transition back into society.

Citations: National Research Findings

Solomon, Amy L., Kelly Dedel Johnson, Jeremy Travis and Elizabeth C. McBride. October 2004. *From Prison to Work: The Employment Dimensions of Prisoner ReEntry*. Washington D.C. The Urban Institute (www.urban.org)

Wilson, David B., Catherine A. Gallagher and Doris L. MacKenzie. 2000. *"A Meta-Analysis of Corrections-Based Education, Vocation and Work Programs for Adult Offenders." Journal of Research in Crime and Delinquency*, 37 (4), pp. 347-368

Aos, Steve, Polly Phipps, Robert Bornoski, Roxanne Lieb. 2001. *The Comparative Costs and Benefits of Programs to Reduce Crime, Version 4.0*. Washington State Institute for Public Policy. Olympia, WA (www.wa.gov/wsipp)

Gerber, J. and E. Fritsch. 1994. *"The Effects of Academic and Vocational Program Participation in Inmate Misconduct and Re-incarceration." Prison Education Research Project: Final Report.* Huntsville TX: Sam Houston University.

Bushway, Shawn. 2003. *"Reentry and Prison Work Programs." Paper prepared for the Reentry Roundtable. The Employment Dimensions of Prisoner Reentry.* New York, NY. New York University Law School.

Safer Neighborhoods, Better Citizens: The Michigan Prisoner ReEntry Initiative

A Collaborative Effort of the Governor's Office and the Departments of Corrections, Community Health, Labor and Economic Growth, and Human Services

Community Assessment for Pilot Site Development

The purpose of this Community Assessment is to begin the work of developing a Comprehensive Community ReEntry Plan for your community by focusing on your community's assets, gaps, barriers, proposed solutions, case management strategy, and plans to follow evidence-based practices for parolee services. In order to have a consistent frame of reference across sites, please use the following definitions:

- **Assets** are those strengths present in communities and may consist of programs, services, delivery systems, organizational capacities and networks.

- **Barriers** consist of those challenges that impede the effective coordination and delivery of services to meet a recognized need.

- **Gaps** refer to the absence of a specific element or component within a community that renders the service delivery network less effective than it might otherwise be. It may be something that could be addressed through policy change, organizational structural change or funding assistance, or some combination of these.

- **Proposed solutions** should describe your plan to effectively use your assets, fill your gaps, and overcome your barriers for each service area.

- **Case management** describes *how* the services provided to a returning prisoner are coordinated and effectively delivered.

- **Evidence-based practices** refer to those practiced that are founded on research which demonstrates a correlation between those practices and recidivism reduction.

If you have any questions regarding this survey, please call
Yolanda Perez at (517) 241- 6493
or
Write her at email address: perezy@michigan.gov

Community Contact Information

Please complete the following information table.

Community:

- ☐ 9-County Rural Region
- ☐ Berrien County
- ☐ Genesee County
- ☐ Kalamazoo County
- ☐ Kent County
- ☐ Capital Area
- ☐ Macomb County
- ☐ Wayne County

Describe the process for completing this assessment:

Contact Person for Assessment; Name & Title:

Organization:

Address: **City:** **State:** **Zip:**

E-Mail:

Telephone: **Fax:**

Please enter information on your Steering Team membership below and indicate with an asterisk who assisted in completing the assessment.

Name	Title	Organization	Address, City, Zip	Telephone	E-Mail

Please respond to the survey questions by placing an X in the box next to your selection or by writing in the spaces provided.

I. After completing this survey, summarize below a description of your local MPRI Pilot Site in terms of:

1. The MPRI Model process: How prepared are you to more effectively handle prisoners returning to your community in terms of the assets, barriers and gaps in your community?

2. Financial resources: What is your best estimate of your community's **total** financial resources available for re-entry services? (*Please place an X in the box next to your selection.)*

- ☐ $0 - $50,000
- ☐ $50,000 - $250,000
- ☐ $250,000 - $500,000
- ☐ $500,000 - $1,000,000
- ☐ Over $1,000,000

Describe how you determined this estimate:

II. The purpose of the Community Assessment is to evaluate what resources you have and what resources you need to meet the needs of returning prisoners. To begin with, you'll need to review the data on returning prisoners provided to you by the MDOC. The Community Assessment is organized by service area and should facilitate your community's Comprehensive Community ReEntry Plan and the completion of funding applications. Please complete the questions for each service area utilizing input from your Steering Team and Advisory Council to complete the questions. You may use as much space as you need to complete these questions.

Safe, Affordable Housing

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Employment Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Workforce Development Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Transportation

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Substance Abuse Treatment

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Mental Health Treatment

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Health Care Services (medical centers, health care clinics, free or low cost prescription coverage)

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Family Support Services (family reunification programs, mentoring, emergency services)

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Life Skills Programs (financial management, cognitive skills, anger management)

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Adult Education

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining addition funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Domestic Violence Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Support From Faith-Based Organizations

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Sex Offender Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Victim Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Entitlement Programs (Veteran benefits, Medicaid services, Social Security, etc.)

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Law Enforcement Services

Assets.

Please describe the assets available in your community for this service area. List programs from all sources of funding (public and private) available in your community.

Barriers.

Please describe the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps.

Please describe the gaps in funding for this service area in your community.

Proposed Solutions.

Please describe your community's plan for addressing the gaps and barriers described above. Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.

Section III. *Case Management Strategy*. **Please describe how you plan to manage services provided to returning prisoners among your Advisory Council, Steering Team, Parole Office Representatives, Transition Team and Community Coordinator. In addition, also describe your plan for providing services to the two Intensive ReEntry Units.**

Case Management Strategy

Part 1.

Advisory Council.

Steering Team.

Parole Office Representatives.

Transition Team.

Community Coordinator.

Part 2.

Intensive ReEntry Units. Service Strategy

Section IV. Evidence-Based Practices. Please describe how you plan to incorporate Evidence-Based Practices into your Comprehensive Community ReEntry Plan.

Evidence-Based Practices

Please describe your community's definition of Evidence-Based Practices.

Please describe how you will incorporate Evidence-Based Practices into the implementation of the MPRI Model.

Please describe your community's need for training of Evidence-Based Practices to effectively incorporate its principles into your Comprehensive Community ReEntry Plan.

Thank you for completing this community assessment.

Please return to Yolanda Perez at:

E-mail:
perezy@michigan.gov

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

The Skills, Responsibilities and Tasks of Community Coordinators

It is through the Community Coordinator that the support from the JEHT Foundation will have tremendous and long-lasting impact on the MPRI. Local community-development efforts to implement the MPRI Model throughout the state will require a precise and extensive set of skills, responsibilities and tasks that will be the hallmarks of the Community Coordinators who will staff the local development process. The four key ingredients for successful community organizing[1] that the Community Coordinator will assist with are:

- ***Capacity.*** Each Community Coordinator must have the capacity to work on prisoner re-entry. Indicators of adequate capacity include experience, staff capacity, resources to apply to the work, and relationships with key stakeholders.

- ***Commitment.*** Each Community Coordinator must demonstrate a dedicated commitment to prisoner re-entry. Additionally, the community must develop a commitment to prisoner re-entry. The development of community commitment may be fostered by the Community Coordinator. How is this level of interest perceived by other key community stakeholders?

- ***Credibility.*** The Community Coordinator must demonstrate credibility within the community. What is the demonstrated historic experience and credibility of the Community Coordinator in playing a catalytic role?

- ***Knowledge.*** What is the Community Coordinator's understanding of prisoner re-entry and its implications?

SKILLS

- ***Communication.*** The Community Coordinators must have excellent communications (both written and verbal) skills to facilitate connectedness among all implementation stakeholders. Communications must be facilitated both from the local communities to the statewide MPRI managers and from MPRI to the local communities.

[1] Adapted from The James Irvine Foundation, Community Catalyst.

- ***Community convening.*** The Community Coordinators must possess the skills to bring diverse stakeholders together, build consensus around prisoner re-entry issues, and catalyze action and leadership within communities toward transition planning.

- ***Community organizing.*** Organizing within pilot communities involves training Steering Team members and Transition Team members, facilitating ReEntry Advisory Council meetings, and building partnerships among key stakeholder groups.

- ***Brokering.*** When acting as a broker within communities, the Community Coordinator can benefit from maintaining a degree of neutrality to negotiate effectively through community conflict. Extensive skills in brokering and fostering neutrality will be a central requirement of a Community Coordinator.

- ***Coordinating.*** The implementation planning associated with MPRI is challenging to coordinate. Maintaining connectedness to community activities will require extensive coordinating by the Community Coordinator.

- ***Systems building.*** Building systems and sheparding cross-systems change requires a complex set of skills. The Community Coordinator must have experience in building and managing system-wide change.

RESPONSIBILITIES AND TASKS

The involvement of Michigan's communities in the MPRI revolves around three "focus areas" that will be coordinated by dedicated MPRI Community Coordinators who are funded at each Pilot Site under a grant award from the JEHT Foundation with the requisite skills needed to do the job.

Focus Area One: Community Involvement in the MPRI Process

Each of the major decision points for improved prisoner re-entry under the MPRI Model must involve community input and collaboration. Without local community involvement, the process would be viewed as "top down" and undoubtedly miss the opportunities for local expertise and experience at the ground level where service delivery must be focused. The community role in each of the seven decision points began at the first meeting of the MPRI Advisory Council and continues to be one of the hallmarks of the design and implementation process. The seven decision points affect the policies and practices that apply to the offender transition process—each of which must be adapted as a result of community input and involvement in the process. The affected policies and practices provide a rich context for an examination of the community's role in the MPRI and thus a guide to the work that will be done.

Task 1. The Community Coordinator will be responsible for making certain the information from the first Transition Accountability Plan (TAP1) is in the hands of the local MPRI Steering Team.

Task 2. The Community Coordinator will be responsible for making certain that the Targeted or Earliest Release Date and status of the offender's movement to the facility nearest his or her city of return is communicated to the local Steering Team by the local Field Operations staff.

Task 3. The Community Coordinator will be responsible for ensuring that the local re-entry parole agent coordinates the logistics for the interaction of the Transition Team and the local prison and for the convening and facilitation of local Team meetings to develop the TAPs.

Task 4. Since the Community Coordinators will be acting as staff for the local Steering Teams and their ReEntry Councils, one of their many responsibilities will be to coordinate the planning and implementation of the fourth and final TAP (TAP4: The Discharge TAP) that will be the "hand off" of the parolee's case to responsible parties in the community who will continue providing services and guidance to the ex-offender.

Task 5. Committees will be formed to address these issues. Community representation on the MPRI committees will be coordinated by the Community Coordinator.

Focus Area Two: Community Assets, Policy Barriers, and Gaps in Services

Task 6. The community-assessment task of evaluating the assets, barriers, and gaps will be organized by the Community Coordinator.

Focus Area Three: Community-Based Comprehensive Prisoner ReEntry Plans

Task 7. Coordinating the completion of the Comprehensive Community ReEntry Plans will be the responsibility of the Community Coordinator.

The primary role of the MPRI Community Coordinator is to be the "point person" to coordinate the community's input so that the key local stakeholders have enhanced capability to adjust their processes accordingly and have in place a communications system to make certain everyone is clear about the process and has a voice in its development.

Oakland County MPRI Pilot Site

IMPLEMENTATION PLAN

SUBMISSION TO DEPARTMENT OF JUSTICE

PROJECT TIMELINE

POSITION DESCRIPTIONS

SUPPORT LETTERS

Project Timeline
PHASE ONE: DECEMBER 2005 THROUGH APRIL 2006

1.1 GOAL: Develop formal structures for management and oversight with Project partners that specify responsibilities and time lines for tasks and deliverables

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
1.1.1 Select lead agency responsible for the operational aspects of the grant.	Meet with key stakeholders to discuss fundamental aspects of grant application and determine best agency suited to lead the charge. Lead agency selected and manages grant application process	Key stakeholders in partners: MDOC, Oakland County MPRI Steering Team	COMPLETED 12/15/05 See Support Letter
1.1.2 Partner with the DOL-funded FB/CBO and others to establish a memorandum of agreement for roles and services.	As a result of the grant planning process, develop understandings of roles and responsibilities including but not limited to position descriptions. Develop Memorandum of Agreement between partner agencies Sign Memorandum and submit with grant application	Key stakeholders in partners: MDOC, Oakland County MPRI Steering Team	March 1, 2006
1.1.3. Establish a multidisciplinary advisory group including FB/CBO partners to inform reentry efforts between the DOJ/DOL grant recipients.	Meet with co-chairs of Oakland County MPRI Pilot Site which received the DOL grant and reach agreement that the MPRI Steering Team for Oakland County will act as Multi-disciplinary Advisory Group for DOJ application. Establish communication structure and process for information about the two grants.	Oakland County MPRI Steering Team co-chairs MDOC (Lead Agency)	COMPLETED 1/20/2006 See Addendum 1.1.3

1.2. GOAL: <u>Develop</u> primary service approaches for Project including screening/risk assessment, pre-release services and transition planning processes and post-release services

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
1.2.1. Develop offender screening and assessment processes using dynamic risk and needs assessments	Work with Department of Management and Budget and the Department of Information technology to solicit bid for MPRI Risk, Needs and Strengths Assessment Instrument and select best bid and establish MPRI Work Group/Committee structure to design implementation strategy and time line.	MDOC Policy and Strategic Planning Administration, Office of Research and Planning; DMB, DIT	COMPLETED 1/20/06 See Addendum 1.2.1.
1.2.2. Develop a transition planning process including an individualized transition plan; type and level of pre-release services; coord. with FB/CBO, community supervision agency; and other local service and community agencies	Work within MPRI Organizational Structure (See Attachment No. 2; Addendum No. 11) to develop Prison In-Reach and Transition Accountability Plan process (TAP2), consistent with the MPRI Model (See Attachment No. 2; Addendum No. 3) that specifies content and process for identification of pre-release programming needs and post-release human service needs as well as community supervision as part of a collaborative process with Faith and Community based organizations.	MPRI Executive Management Team and Phase II (Going Home) Work Group. MDOC MPRI Implementation Resource Team	COMPLETED 1/20/06 See Addendum 1.2.2.
1.2.3. Develop a written implementation plan process for critical pre-release services to the target population and program participants	Work within MPRI Organizational Structure to develop Phase I Transition Accountability Plan (TAP1) process that indicates the connections between the COMPAS Risk/Needs Assessment Instrument and the specific program and pre-release services that will be provided to the target population during the MPRI Phase I (Getting Ready) and MPRI Phase II (Going Home). Use the MPRI Oakland County Pilot Site and the Macomb Correctional Facility to test and demonstrate the approach (See Goal 1.4 for more detail).	MPRI Executive Management Team and Phase I (Getting Ready) Work Group MDOC MPRI Implementation Resource Team	April 15, 2006
1.2.4. Develop approach to increase employability and employment retention for former prisoners.	Write Issue Brief to guide local process; local multi-disciplinary advisory group (Oakland County MPRI Pilot Site Steering Team) to develop implementation strategies.	MDOC Office of Offender ReEntry and Oakland County MPRI Pilot Site Steering Committee	COMPLETED 1/20/06 See Addendum 1.2.4.

1.3 GOAL: Develop approaches and time lines that ensure at least 200 offenders successfully complete pre-release programming and participate in post release community-based services resulting in over 200 individual transition plans implemented in collaboration with the FB/CBO with supervision provided by the MDOC Field Operations Administration.

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
1.3.1. Develop & implement process to identify targeted prisoners & transfer them to MRF for "Getting Ready" Phase I of MPRI Model.	Identify prisoners from Oakland County who meet eligibility criteria including having an Earliest Release Date (ERD) within next 24 months. Determine funding source within MDOC for prisoner housing unit at MRF using vacant and unfunded beds in 240 bed housing unit that will be used for Oakland County MPRI Pilot as well Macomb and St. Clair MPRI Pilot Sites. Determine transportation and prisoner movement schedule, based on ERD, so that the target population is on site 12 months or more prior to their ERD. Implement transportation and prisoner movement schedule.	MDOC Office of Research and Planning (ORP) MDOC Bureau of Fiscal Management and ORP MDOC Correctional Facility Administration	April 1, 2006 February 1, 2006 May 1, 2006
1.3.2. Utilize established policies and procedures within the MDOC for Parole Board review of targeted prisoners participating in "Getting Ready" Phase to determine "Going Home" of the MPRI Model (Phase II)	Work with Parole Board to determine and implement new schedule for the Parole Eligibility Review (PER) process 12 months prior to the ERD. Create a variance to the existing policy as a demonstration of the MPRI Model as part of the MPRI Phase I Work Group process.	MDOC Policy and Strategic Planning Administration and the Parole Board. MPRI Phase One Work Group	February 15, 2006 March 16, 2006

1.4 GOAL: <u>Implement</u> primary service approaches for Project including screening/risk assessment, pre-release services and transition planning processes and post-release services

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
1.4.1. Determine specific services available in the community with and without sufficient funding.	Complete Community Assessment for Oakland County (See Attachment No. 2; Addendum No. 6	Oakland County MPRI Pilot Site Steering Team	March 1, 2006
1.4.2. Implement offender screening and assessment processes using dynamic risk and needs assessments for target population.	Implement the results of 1.2.1.	Oakland County MPRI Pilot Site Steering Team, MDOC	May 1, 2006
1.4.3. Implement a written implementation plan for critical pre-release services to the target population and program participants.	Implement the results of 1.2.2.	Oakland County MPRI Pilot Site Steering Team, MDOC	May 1, 2006
1.4.4. Implement the transition planning process for target population.	Implement the results of 1.2.3.	Oakland County MPRI Pilot Site Steering Team, MDOC	May 1, 2006
1.4.5. Implement approach to increase employability and employment retention for former prisoners.	Implement the results of 1.2.4.	MDOC Office of Offender ReEntry and Oakland County MPRI Pilot Site Steering Committee	May 1, 2006

Project Timeline
PHASE TWO: MAY 2006 THROUGH SEPTEMBER 2007

2.1 GOAL: Design and implement a monitoring and evaluation plan to document implemented strategies and outcomes; develop or enhance information collection and analysis capacity beyond the grant period.

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
2.1.1. Achieve full funding for evaluation	MDOC to work with MPRI partners to raise funds for evaluation. MDOC to augment private funds with state funds and solicit bid for evaluation.	MDOC, Public Policy Associates (PPA)	Completed $600,000 in Funds Raised
2.1.1 MDOC Contractor to solicit and select an Independent Evaluator.	Conduct a competitive bid process to select the most qualified evaluator to conduct both a process and an outcome evaluation.	PPA	April 1, 2006
2.1.2 Finalize and launch evaluation design and performance measures.	Determine most appropriate evaluation design for both the process and the outcome evaluation. Finalize data collection and analysis plan. Prepare grantees to provide data as described in the performance measurement section.	Independent Evaluator, PPA, MDOC Office of Research and Planning (ORP)	May 1, 2006
2.1.3 Collect data for evaluation, monitoring, and quality assurance.	Collect data from necessary data systems, key stakeholders, and program participants for purposes of the evaluation, implementation monitoring, documenting the process, and quality assurance.	Independent Evaluator, ORP	May 15, 2006
2.1.4 Analyze data and report results.	Analyze data elements, and report evaluation findings to key stakeholders and practitioners to ensure that the evaluation improves the process of implementation.	Independent Evaluator, PPA, ORP	August 1, 2006 and ongoing
2.1.5 Provide technical assistance	Assess technical assistance needs and meet these needs as required. As the evaluation progresses, participants will require ongoing technical assistance to effectively cooperate with the evaluation and understand how the evaluation results should impact practice.	Independent Evaluator, PPA	May 15, 2006 and ongoing
2.1.6 Report final results	Report the final results of the process and outcome evaluation.	Independent Evaluator	September 30, 2007

2.2 GOAL: Implement, manage and oversee Project Implementation Plan using established structures for management and oversight with Project partners

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
2.2.1. Manage rigorous screening & dynamic risk and need assessment process for all potential candidates for effective participation , including use of eligibility criteria	Administer and process all required comprehensive testing instruments i.e. COMPAS, SASSI, etc. Report data and assist in developing Case Management Plan with case managers according to identified risks/needs/strengths. Provide data to departmental analyst for data entry and reporting functions.	Pre-release Coordinator Institutional Parole Agent Prisoner Case Managers	Continuous Process Beginning May 2006
2.2.2. Oversee pre-release programming and services,	In coordination with case managers, oversee enrollment and participation in required programming for targeted population. Track and document progress in case management plans and TAP2's with a focus on employability under the Ready4Work model.	Deputy Warden Pre-release Coordinator Employment Specialist	Continuous Process Beginning May 2006
2.2.3. Implement process for coordof pre-release orientation meetings with FB/CBO such as employment service providers & mentors	Collaborate and structure pre-release meeting process with Community Coordinator, CFA, FOA staff, FB/CBO and other necessary stakeholders. Prepare Agenda, notify appropriate individuals of meeting day/time/place, and draft minutes. Assist with organization of service delivery with community service providers and provide help with referral procedures.	Deputy Warden Pre-release Coordinator Institutional Parole Agent DOL Grant Manager Community Coordinator	Continuous Process Beginning May 2006
2.2.4. Coordinate transition services with the DOL-funded FB/CBO, law enforcement, community corrections, victim services, and other partners to ensure public safety.	Provide TAP2's of all targeted inmates that are scheduled for release in 90 days to all necessary transition team members. Provide a grid of needed services within identified service areas i.e. housing, transportation, legal, etc. for each individual. Identify and report to all appropriate authorities those inmates that have a high to medium risk for violent/aggressive behavior.	Institutional Parole Agent Parole Field Supervisor Community Coordinator DOL Grant Manger Employment Specialist	Continuous Process Beginning May 2006

2.3 GOAL: Design and implement approach to build support for sustainability after federal funding ends

OBJECTIVE	ACTIVITIES	RESPONSIBILITY	DUE DATE
2.3.1. Commit public funds to MPRI Oakland County MPR Pilot Site	Work within Executive Branch to develop FY 2007 MPRI Budget and then with Michigan Legislature to pass the budget. This budget will include funds for the Oakland County MPRI Pilot Site that will sustain – and expand – the funding for the Project after federal funding ends.	MDOC, State Budget Office, Governor's Office, Legislature	September 30, 2006
2.3.2. Raise private foundation funds for MPRI Oakland County MPR Pilot Site	Work with the MPRI private partner organization, Public Policy Associates, Inc. and the Governor's Foundation Liaison Office to raise private funds that will augment public funds for site.	MDOC, PPA, Governor's Foundation Liaison Office	COMPLETED See Attachment No. 1 & No.2 – Addendum 7
2.3.3. Develop local sources of funding and in-kind services for the Oakland County MPRI Pilot Site	Work with United Way of Southeast Michigan and local community foundations and to determine the feasibility of using local funds to respond to "challenge grant" offered to Michigan MPRI by the JEHT Foundation to match $1 for $1 for financial commitments to local MPRI Pilot Sites. This funding would be provided for services and support not otherwise available through federal and state funding.	Oakland County MPRI Pilot Site Steering Committee, Governor's Foundation Liaison Office, SE MI United Way	Throughout FY 2006 and FY 2007
2.3.4. Develop additional funding applications for federal funding especially for substance abuse and mental health services and for housing.	Based on federal solicitations for prisoner re-entry promised by the Department of Labor, apply for re-entry funds from the departments of Health and Human Services, Housing and Urban Development and other opportunities as they become available.	MDOC Policy and Strategic Planning Administration, Office of Offender ReEntry	Throughout FY 2006 and FY 2007

POSITION DESCRIPTIONS & RESPONSIBILITIES

Management Team: The Oakland County MPRI Pilot Site for the Department of Justice (DOJ) Prisoner ReEnty Project will be overseen by a multi-disciplinary Management Team:

- Management Team Leader: Nancy Dargan, MPRI Community Liaison, Michigan Department of Corrections, Policy and Strategic Planning Administration, Office of Offender ReEntry, Contract Manager for the DOJ Grant Award.

- Prison Facility Representative: Charlene Carberry, Deputy Warden, Michigan Department of Corrections, Correctional Facilities Administration, Macomb Regional Facility (MRF).

- Prison In-Reach Representative: An Institutional Parole Agent position that will be filled using DOJ Grant Award Funds. This position will report to the Michigan Department of Corrections, Field Operations Administration, Office of Field Programs.

- Community Supervision Representative: Ken Aud, Michigan Department of Corrections, Field Operations Administration, Region II, Oakland County Area Manager.

- Community Representative: Lynn Crotty, Associate Director for ReEntry Programs for Oakland, Livingston Human Services Agency, responsible for oversight of the Department of Labor (DOL) Prisoner ReEntry Grant Award

Services Team: Services for the Oakland County MPRI Pilot Site for the Department of Justice (DOJ) Prisoner ReEnty Project will be overseen by a multi-disciplinary Service Team:

- Prison Pre-Release Services: A Pre-Release Program Coordinator position will be filled using DOJ Grant Award Funds. This position will report to Charlene Carberry, Michigan Department of Corrections, Correctional Facilities Administration, MRF.

- Prison In-Reach Services: The Institutional Parole Agent position (described above) that will be filled using DOJ Grant Award Funds.

- Parole Supervision: Mr. Aud will assign a Field Supervisor to the Team who is responsible for supervising the Parole Agents who supervise these cases.

- Community Services: Three persons will be responsible for the development and coordination of Community Services. (1) the local MPRI Pilot Site Coordinator, funded by JEHT Foundation funds, will be responsible for the development of the services that will be funded under the MPRI through the Comprehensive Prisoner ReEntry Plan who will act as Team Leader, (2) The Grant Manager for the DOL Grant Award, who reports to Ms. Crotty will be responsible for the coordination of services funded under that grant and, (3) for employment related services, the Ready4Work Employment Specialist, who will be funded with other federal, state and local funds.

MPRI COMMUNITY LIAISON

CONTRACT MANAGER FOR DOJ PRISONER RE-ENTRY GRANT

Nancy E. Dargan

Position Description

Overview: This is one of two statewide Community Liaisons for the new Office of Offender Reentry. This position will plan, implement, coordinate, and provide oversight of pilot sites under the statewide Michigan Prisoner Reentry Initiative (MPRI). The Community Liaison serves as the expert in community development and capacity-building techniques in MPRI. The community Liaison will conduct analyses of community assets, barriers and gaps to determine the extent of community readiness for reentry and this analysis will guide the process of state/local collaboration to demonstrate elements of the MPRI Model and institute full Pilot Sites.

Responsibilities:

- Coordinate tasks in the local community related to the development, implementation and monitoring of the MPRI Model in local communities that result in improved service delivery so that fewer parolees return to prison. Write specific Implementation Plans for pilot and demonstration sites.
- Evaluates program and makes recommended policy and procedural changes.
- Research, analyze, develop and maintain databases and record systems on information related to local pilot and demonstration site development, implementation and monitoring.
- Prepare reports and correspondence related to the work.
- Coordinate local implementation of the MPRI.
- Developing system-wide approaches to reduce parolee failure.
- Collaborating with service delivery agencies for special needs populations such as women, veterans, mentally ill, substance abuse, health care, etc., that focus on housing, employment and treatment services that will increase the likelihood of community success after prison.
- Community with communities to engage in discussion and planning for demonstration of MPRI elements.
- Serve as a liaison for Policy and Strategic Planning Administration with MDOC and non-MDOC employees, agencies and organizations, elected and appointed officials who are engaged in local pilot and demonstration site activities, focusing on improved coordination of services for parolees in the areas of housing, employment, substance abuse and mental health services, etc.
- Serve as liaison between MDOC and other stakeholder state and community agencies.

Skills:

- Advanced written and verbal communication skills.
- Training and group facilitation experience.
- Advanced community organizational skills.
- Knowledge and experience of special needs populations including but not limited to offenders, alcohol, drug addiction, mentally ill and health related issues.
- Ability to plan, direct and coordinate programs and administrative activities of a complex nature.
- Knowledge of data systems and the internet.
- Research skills.

- Knowledge of local community organizations, particularly in potential pilot sites – including faith based groups, nonprofit and community based organizations, and understanding of how other state agencies operate in the local level in these communities.

Requirements:

- Bachelor's Degree.
- Minimum of two years of progressively responsible community development experience.
- Experience in state and local planning.
- Experience in planning, coordinating and directing local teams, committees and work groups in the development and implementation activities that are complex, interrelated and interdependent in nature, where unknowns and numerous contingency factors are involved.
- Ideal candidate will have experience working with nonprofit or community based organizations or have extensive experience in community organizing and community convening.

Funding Source for Position: Michigan Department of Corrections

DEPUTY WARDEN; MACOMB REGIONAL FACILITY
Charlene Carberry

PRISON FACILITY REPRESENTATIVE ON DOJ GRANT MANAGEMENT TEAM

Position Description

Overview: The position is directly responsible for the internal operations of a correctional facility. Included within the responsibility is the custody and security of the facility. Responsible second line supervision of the prisoner housing units and prisoner Program Department. Position is responsible for Fire and Safety procedures and operations and implementation thereof. Included within the listed responsibilities is the custody and security of Level I, II, III, IV and Administrative Segregation prisoners. Responsible for first and second line supervision of all facility staff. Plans, organizes and directs control of work activities. Formulates current and long range programs, coordinates work by scheduling assignments and directing the work of subordinate supervisors. Selects and assigns staff, ensuring equal employment opportunity as directed by MDOC Policy Directives and Operational Procedures. Identify staff with development needs and ensures training is obtained, as well as proper labor relations and conditions of employment are being maintained. Maintains records, as well as prepares reports and conducts correspondence relative to this position.

Responsibilities:

- Annually reviews the Security Classification of prisoners confined to the facility.
- Assist in overseeing the preparation of transfer requests for eligible prisoners by virtue of the action taken by the Security Classification Committee and facility needs.
- Assures that prisoners are placed in and released from Segregation in accordance with Administrative Rules and Policy Directives.
- Assures that felonious prisoner behavior within the facility is referred to the Michigan State Police for investigation, as well as assuring that critical incidents that occur within the facility are reported as mandated.
- Assuring the facility operations satisfy the requirements of all Administrative Rules, Policy Directives related to fire/safety, sanitation, tool control and contraband control.
- Ensures the facility operates in compliance with the guidelines as established by the American Correctional Association.
- Audits facility Operating Procedures as well as implementation of same.
- Conducts employee Disciplinary Conference as required.
- Implements the provision of labor contracts; meets with union representatives.
- Coordinates work by scheduling assignments and directive the work of subordinates.
- Conducts staff meetings and conferences to discuss operational, organizational, budgetary, personnel and technical matters/problems and status of projects.
- Develops budget recommendations for capital outlay, personnel services, equipment and materials.
- Assures that prisoner security is provided.
- Directs the revision of rules, regulations and procedures, to meet changes in policy.
- Directs the revision or rules, regulations and procedures to meet changes in policy.

- Deployment of staff resources within the facility to maximize the delivery of same ensuring all custody and security requirements are met and in doing so, providing a safe work environment for staff and living environment for prisoners.
- Meets with officials of Federal, State and local agencies: Legislators, Governor's staff, professional organizations and interested groups on matters relating to the security of the facility.

Skills:

- Knowledge of the social sciences underlying criminal activity: psychology, criminology and sociology.
- Knowledge of social attitudes.
- Knowledge of interviewing techniques.
- Knowledge of behavioral problems, mental illnesses and minority group problems.
- Extensive knowledge of Departmental Policy and Administrative rules.
- Demonstrated ability to prepare and implement Operational Procedures.
- Ability to manage subordinate supervisors effectively, assuring that they carry out their responsibilities efficiently.
- Thorough knowledge of institutional custody and security requirements.
- Ability to work cooperatively with union officials and implement the provisions of various labor contracts.
- Ability to self-motivate and lead by example.
- Knowledge of equal employment opportunity practices.
- Knowledge of the principles of management including budgeting.
- Ability to work under stress.
- Ability to communicate effectively with others.

Requirements:

- Bachelor's degree in criminal justice or social sciences.

Funding Source for Position: Michigan Department of Corrections

INSTITUTIONAL PAROLE AGENT
Vacant

PRISON IN-REACH REPRESENTATIVE ON DOJ PROJECT MANAGEMENT TEAM & DOJ PROJECT SERVICES TEAM

Position Description

Overview: Work with Correctional Facility Administration (CFA) staff initiating the Transitional Accountability Plan (TAP2) for prisoners in Michigan Prisoner Reentry Initiative (MPRI) facilities. Work with CFA, Field Operations Administration (FOA) field staff and transition teams to develop reentry/parole supervision plans and initiate needed assessments and referrals prior to parole release. Develop acceptable parole placement options for FOA field staff. Work with Oakland County prisoners in the pilot site facility that are targeted as participants in the Department of Labor/Department of Justice (DOL/DOJ) grant and ensure that in-reach is completed per the grant.

Responsibilities:

- Review prisoner file and OMNI material.
- Interview and orientate prisoner with CFA Staff.
- Assess information initiate development of TAP2 with CFA staff and prisoner to include: housing, employment, family/community support, health and education.
- Interview prisoner and develop acceptable home placement options. Complete CFJ-457, updated parole placement.
- Work with assigned field agents and transition teams to establish tentative parole supervision plan (TAP3).
- Identify prisoner needs/barrier that require action prior to/at time of release.
- Initiative/schedule assessments and/or referrals both at the facility and in the community after parole release.
- Incorporate MPRI programs in the development of supervision plans where appropriate.
- Work with, schedule and facilitate transition team meetings.
- Assist in coordinating family reunification sessions.
- Work with the transition team in development employment opportunities for Oakland County prisoners designated as part of the DOL/DOJ grant.
- Attend staff meetings and training.
- Collect data and statistics as required.
- Maintain accurate/timely case notes and other OMNI entries.
- Prepare correspondence and reports as needed.
- Read and implement current policy, procedures and instructional memoranda.
- Establish and maintain close working relationships with CFA staff, FOA staff, law enforcement, transition teams and other agency/local service agency staff delivering approved community support services.

Skills:

- Knowledge of the social sciences underlying adult parole and probation work, such as psychology, criminology and sociology.
- Knowledge of interviewing techniques.
- Knowledge of community organizations and resources.

- Ability to maintain daily offender contact, demonstrating appropriate use of authority.
- Ability to work well with department staff and outside agencies/service providers.
- Ability to evaluate programs and policies and make recommendations accordingly.
- Ability to work under stress.
- Ability to communicate effectively with others.

Requirements:

- Bachelor's degree with a major in criminal justice, correctional administration, criminology, psychology, social work, guidance and counseling, child development, sociology, school social work, social work administration, educational psychology, family relations or theology.
- Minimum of two years of progressively responsible experience equivalent to a Parole/Probation Manager 14.
- Possession of a valid driver's license.
- Possession of a working telephone.

Funding Source for Position: Department of Justice Prisoner ReEnty Grant Award

PAROLE AND PROBATION MANAGER

Kenneth J. Aud

COMMUNITY SUPERVISION REPRESENTATIVE ON DOJ PROJECT MANAGEMENT TEAM

Position Description

Overview: This is a third-line supervisory level of Parole/Probation Officers within Field Operations Administration - Region I, Wayne County. This position is responsible for the planning and directing of parole and probation activities through second-line and first-line supervisors. This position requires a thorough knowledge of MDOC policies, procedures and regulations of probation programs, OMNI, responsible for training, issuing service ratings, and counseling of employees.

Responsibilities:

- Selects and assigns staff, ensuring equal employment opportunity in hiring and promotion.
- Coordinates activities by scheduling work assignments, setting priorities, and directing the work of subordinate employees.
- Evaluates and verifies employee performance through the review of completed work assignments and work techniques.
- Identifies staff development and training needs and ensures that training is obtained.
- Ensures proper labor relations and conditions of employment are maintained.
- Maintains records, prepares reports and composes correspondence relative to the work.
- Interprets and implements departmental directives and regulations; keeps subordinates informed of changes in policy and procedures.
- Maintains liaison with circuit court judges, prosecutors, sheriffs, chiefs of police, friends of the court, county boards of supervisors, and other concerned with the parole and probation program.
- Investigates parole/probation violations, documents findings and recommends disposition to the parole board, court officials, or other officials involved in the parole and probation revocation, or inmate classification process.
- Advises judges, attorneys, police and the public regarding parole and probation policies and procedures.
- Evaluates polices and procedures of the assigned program and makes recommendations to management staff accordingly.
- Maintains favorable public relations in the area through meetings with service clubs, school officials, gives speeches at schools, and visit to police agencies.
- Attends conferences and keeps informed of developments in the corrections field.
- Performs related work appropriate to the classification as assigned.

Skills:

- Knowledge of the social sciences underlying adult parole and probation work, such as psychology, criminology and sociology.
- Knowledge of social attitudes.
- Knowledge of interviewing techniques.
- Knowledge of behavioral problems, mental illnesses and minority group problems.
- Knowledge of the psycho-sociological factors in the committing of crime.

- Knowledge of the psychological effects of incarceration.
- Knowledge of parole and/or probation laws pertaining to adults and departmental policies relating to the work.
- Knowledge of the techniques of parole and probation supervision and treatment.
- Knowledge of community organizations and resources.
- Knowledge of training and supervisory techniques.
- Knowledge of employee policies and procedures.
- Knowledge of equal employment opportunity practices.
- Knowledge of the principles of management including budgeting.
- Ability to evaluate programs and policies and make recommendations accordingly.
- Ability to conduct investigations and to evaluate findings.
- Ability to recognize pathological behavior.
- Ability to formulate a plan of social and economic rehabilitation for individual cases.
- Ability to work under stress.
- Ability to communicate effectively with others.

Requirements:

- Bachelor's degree in criminal justice, correctional administration, criminology, psychology, social work, guidance and counseling, child development, sociology, school social work, social work administration, educational psychology, family relations or theology.
- Minimum of two years of progressively responsible experience equivalent to a Parole/Probation Manager 14.

Funding Source for Position: Michigan Department of Corrections

ASSOCIATE DIRECTOR FOR RE-ENTRY PROGRAMS
Lynn Crotty, Oakland, Livingston Human Services Agency

COMMUNITY REPRESENTATIVE ON DOJ PROJECT MANAGEMENT TEAM

Position Description

Overview: Provide comprehensive services, designed to secure employment, housing, and mentoring, for ex-offenders transitioning back into the community.

Responsibilities:

- Coordinate all aspects of the **Department of Labor** Prisoner ReEntry Program and ensure compliance with all OMB and department of Labor regulations.
- Oversee and monitor all contractual agreements and memorandums of agreement to ensure compliance.
- Complete all required reports and monitor all budgets in a timely manner as required by grant regulations.
- Work with the Michigan Department of Corrections and other partners for recruitment, ongoing case management, mentoring, training, employment, and all other required services.
- Supervise all program staff.
- All other responsibilities as assigned by supervisor.

Requirements:

- BA in Business, Criminal Justice, Social Work, Behavioral Science or related field.
- A minimum of two (2) years experience working with the criminal justice system.
- Experience with computers and reporting systems, excellent verbal and written skills.
- A minimum of two (2) years supervisory experience.
- Experience working with employers and workforce development.

Funding Source for Position: Combination of Department of Labor and Michigan Works!

(The Department of Labor Prisoner ReEntry Grant Award funds the DOL Project Manager who reports to Ms. Crotty).

MPRI PILOT SITE COMMUNITY COORDINATOR
Vacant

COMMUNITY REPRESENTATIVE ON DOJ PROJECT SERVICES TEAM
TEAM LEADER

Position Description

Overview: The Community Coordinator is responsible for coordinating community wide involvement in prisoner reentry planning and service provision in accordance with the Michigan Prisoner Reentry Initiative (MPRI) Model.

Responsibilities:

- Organization and coordination of the process to create a Comprehensive Prisoner Reentry Plan for Oakland County (community assets, barriers, and gaps affecting prisoner reentry;
- Facilitation and staffing of the local MPRI Steering Team; and
- Coordination and communication, both within the local community and between the community and the statewide partnership, regarding the evolving design of the MPRI so that the entire process is deeply influenced by the community perspective
- Organization and coordination of the implementation process, including contract management, for the Comprehensive Prisoner Reentry Plan.

Skills:

- Communication, both written and oral, between stakeholders within the community and between the community and the statewide partners.
- Community convening to bring diverse stakeholders together, build consensus, stimulate leadership and action toward reentry planning;
- Community organizing to coordinate and train community steering teams, facilitate Reentry Council and Steering Team meetings, build community partnerships, and maintain written records of the process;
- Brokering to negotiate through community conflict while maintaining a neutral stance;
- Coordinating the MPRI process at the community level; and
- Systems building to improve policies, systems, resources and services to support returning prisoners and the community.

Requirements:

- Bachelor's degree in a human services related field, advanced degree preferred.
- Minimum of four years of progressively responsible work experience in criminal justice.
- Extensive knowledge of the local community.
- Knowledge of and success with organized, data-driven, community-level change, including coordination of project implementation and contract management.
- Excellent written and verbal communication skills.
- Success in grant seeking and/or other fundraising activities.
- Excellent computer skills, including competency with the Microsoft Office software package, web-based applications, and other data programs.

Funding Source for Position: JEHT Foundation

DEPARTMENT OF LABOR GRANT MANAGER
Vacant

COMMUNITY REPRESENTATIVE ON DOJ PROJECT SERVICES TEAM

Position Description

Overview: Responsible for the provision of comprehensive services, designed to secure employment, housing and mentoring for prisoners transitioning back to the community.

Responsibilities:

- To coordinate all aspects of the Prisoner Reentry Program and to ensure compliance with all OMB and Department of Labor regulations.
- Oversee and monitor all contractual agreements and memorandums of agreement to ensure compliance.
- Complete all required reports and monitor all budgets in a timely manner as required by grant regulations.
- Work with the Department of Corrections and other partners for recruitment, ongoing case management, mentoring, training, employment and all other required services.
- Supervise all program staff.
- All other responsibilities as assigned by supervisor.

Skills:

- Communication, both written and oral, between stakeholders within the community and between the community and the statewide partners.
- Working with diverse stakeholder to build consensus, stimulate leadership and action toward reentry planning;
- Community organizing to coordinate and train community steering teams, facilitate Reentry Council and Steering Team meetings, build community partnerships, and maintain written records of the process.
- Experience with computers and reporting systems, excellent verbal and written skills.

Requirements:

- Bachelor's degree in Business, Criminal Justice, Social Work, Behavioral Science or a related field.
- A minimum of 2 years experience working with the criminal justice system.
- A minimum of 2 years supervisory experience.
- Experience working with employers and workforce development.

Funding Source for Position: Department of Labor Grant Award

READY4WORK - EMPLOYMENT SPECIALIST
Vacant

EMPLOYMENT SERVICES REPRESENTATIVE ON DOJ PROJECT SERVICES TEAM

Position Description

Overview: Employees in this job function as professional employment services analysts, completing or overseeing a variety of assignments to provide research and analysis for the purpose of evaluation, assessment, planning, development and implementation of employment services and workforce programs.

Responsibilities:

- Establishes, administers and evaluates workforce/employment services programs, and assists in development of policies and procedures.
- Designs and conducts surveys or special studies to determine workforce needs and to assist in planning, implementing and evaluating employment services programs.
- Interprets or clarifies employment services objectives, policies and programs.
- Functions as a liaison and coordinates programs with state and federal agencies and private or public organizations.
- Reviews and consolidates data and prepares reports.
- Reviews employment services activities to ensure that established procedures are being followed, evaluates techniques, discusses problems and makes recommendations.
- Develops evaluation methods, techniques and procedures to implement workforce programs.
- Conducts training sessions, work shops, conferences and seminars.
- Prepares training and procedural material related to special applicant groups.
- Establishes and coordinates special workforce projects in assigned communities.
- Prepares informational releases pertaining to changes in policies and procedures.
- Collects and disseminates educational and promotional information.
- Maintains records and prepares reports and correspondence related to the work performed.
- May perform related essential functions as appropriate to the class and other non-essential functions as required.

Skills:

- Communication, both written and oral, between stakeholders within the community and between the statewide partners.
- Knowledge of the principles and practices of employment services analysis.
- Knowledge of the tools of management, such as methods development, cost analysis, procedural manuals, training materials, operating controls, records and reports, and studies applicable in evaluating programs or services.
- Knowledge of the principles and methods of social and economic research, statistics, systems analysis, operational analysis, cost analysis, and finance of public and private programs.
- Knowledge of economic, social, political and business conditions in the state.
- Knowledge of workforce needs and training needs.
- Knowledge of the legislative process and governmental organization and structure.

- Knowledge of the pertinent and controlling legislation and related administrative rulings and judicial decisions.
- Ability to organize, evaluate and present information effectively.
- Ability to interpret laws, rules and regulations relative to the work.
- Ability to analyze, synthesize and evaluate a variety of data for use in program development and analysis.
- Ability to assess operations from the standpoint of management controls, systems and procedures.
- Ability to develop workforce programs and employment services procedures, policies or guidelines and to relate these to objectives.
- Ability to prepare and/or select training materials.
- Ability to maintain favorable public relations.
- Ability to communicate effectively with others.
- Ability to maintain records and prepare reports and correspondence related to the work.

Requirements:

- Bachelor's degree in any major;
- Minimum of one year of professional experience involving the research and analysis of employment and workforce programs equivalent to an Employment Services Analyst in the State of Michigan.
- Two years of professional experience involving the research and analysis of employment and workforce programs equivalent to an Employment Services Analyst in state service, including one year equivalent to an intermediate level Employment Services Analyst.
- Excellent computer skills, including competency with the Microsoft Office software package, web-based applications, and other data programs.

Funding Source for Position: Michigan Works!

PRE-RELEASE PROGRAM COORDINATOR
Vacant

PRE-RELEASE REPRESENTATIVE ON DOJ PROJECT SERVICES TEAM

Position Description

Overview: Applicant must have a thorough knowledge of the Michigan Prisoner Reentry Initiative (MPRI) programming. Position will be responsible for coordinating prisoner programming and organizations at the facility to meet the needs of the institution and the needs of the prisoners, and other essential functions as assigned. Position must demonstrate ability to work independently in assisting supervisor in carrying out the mission and goals of the Department by adhering to established rules, policies and procedures, practices and oral instructions, using own judgment in carrying out duties with minimal supervision and adhering to supervisor's instructions.

Researches, collects, consolidates, analyzes and maintains program data necessary to meet program reporting and evaluation requirements and the goals of the agency program or service.

Position has 50% or more prisoner contact and/or supervision and is within the secured area of the facility.

Reports to Macomb Regional Facility Deputy Warden.

Responsibilities:

- Supervise prisoner program activities.
- Coordinate programming for all prisoners.
- Place prisoners on call-outs after being notified that they are interested in participating in a program.
- Utilize the Prisoner Program and Work Assignment Evaluation to prepare prisoner reports and information for submission to the Parole Board.
- Participate in the development and implementation of policies within the facility with regards to MPRI.
- Research, collect, consolidate, analyze and maintain MRPI program data necessary to meet program reporting and evaluation requirements.
- Establish, administer and evaluate programs, recommend program policies and procedures, design forms in regards to MPRI.
- May perform related essential functions appropriate to the class and other nonessential functions as required.
- Maintain and update the MIPRI prisoner data base.
- Update prisoner movement data base.
- Design, implement and document personal based data collection, processing and reporting systems.
- Maintain computer data bases to record and analyze data on MPRI program and activities.
- Compose memos for MPRI staff.
- Relay pertinent information, answer questions and give guidance to staff regarding MPRI matters, interpreting supervisor's viewpoint and act as liaison between supervisor and facility staff.

- Maintain filing system for all correspondence, reports and other required printed documents for retrieval as needed.
- Maintain and update the Macomb Correctional Facility Volunteer Report.
- Provide consultation to and coordinates departmental programs with state agencies, private and public organizations, and communities in regards to MPRI programming.
- Assist the Volunteer Coordinator of the facility.

Skills:
- Knowledge of and experience in research, collection, data consolidation and analysis.
- Knowledge of various data systems such as Excel, Access, etc.
- Knowledge of Microsoft program applications.
- Knowledge of the principles of research and Evidence Based Programming.
- Ability to maintain daily offender contact, demonstrating appropriate use of authority.
- Ability to work well with department staff and outside agencies/service providers.
- Ability to evaluate programs and policies and make recommendations accordingly.
- Ability to work under stress.
- Ability to communicate effectively with others.

Requirements:
- Educational level typically acquired through the completion of high school and four years of experience as an advanced 9-level state worker in an ECP Group One Classification, or
- Educational level typically acquired through the completion of high school and two years of experience as an E9, E10, or E11 level worker in a technical or paraprofessional ECP Group One Classification.
- Must possess and have working knowledge/experience in research, collection, consolidation and analysis of data.
- Possession of a valid driver's license.

Funding Source for Position: Department of Labor Prisoner ReEntry Grant Award

PAROLE FIELD SUPERVISOR
Kim Eisenbies

PAROLE SUPERVISON REPRESENTATIVE ON DOJ PROJECT SERVICES TEAM

Position Description

Overview: Employees in this job direct professional parole/probation activities. Under general supervision the employee works within general methods and procedures and exercises considerable independent judgment to adapt and apply the guidelines to specific situations.

Responsibilities:

- Selects and assigns staff, ensuring equal employment opportunities.
- Coordinates activities by scheduling work assignments, setting priorities and directing the work of subordinate employees.
- Evaluates and verifies employee performance through the review of completed work assignments and work techniques.
- Identifies staff development and training needs and ensures that training is obtained.
- Ensures proper labor relations and conditions of employment are maintained.
- Maintains records, prepares reports and composes correspondence relative to the work.
- Interprets and implements departmental directives and regulations; keeps subordinates informed of changes in policy and procedures.
- Maintains liaison with circuit court judges, prosecutors, sheriffs, chiefs of police, friends of the court, county boards of supervisors and others concerned with the parole/probation program.
- Investigates parole/probation violations, documents findings and recommends disposition to the parole board, court officials or other officials involved in the parole and probation revocation or inmate classification process.
- Advises judges, attorneys, police and the public regarding parole and probation policies and procedures.
- Evaluates the policies and procedures of the assigned program and makes recommendations to management staff accordingly.
- Maintains favorable public relations in the area through meetings with service clubs and school officials, speeches at schools and visits to police agencies.
- Attends conferences and keeps informed of developments in the corrections field.
- Performs related work appropriate to the classification as assigned.

Skills:

- Knowledge of policies, procedures, laws and regulations of the assigned parole/probation program.
- Knowledge of supervisory techniques and personnel policies and procedures.
- Knowledge of the social sciences underlying adult parole and probation work, such as psychology, criminology and sociology.
- Knowledge of social attitudes.
- Knowledge of interviewing techniques.
- Knowledge of behavioral problems, mental illnesses and minority group problems.
- Knowledge of the psycho-sociological factors in committing of crime.

- Knowledge of the psychological effects of incarceration.
- Knowledge of parole and/or probation laws pertaining to adults and departmental policies relating to the work.
- Knowledge of techniques of parole and probation supervision and treatment.
- Knowledge of community organizations and resources.
- Knowledge of employee policies and procedures.
- Knowledge of equal employment opportunity practices.
- Knowledge of the principles of management including budgeting.
- Ability to evaluate programs and policies and make recommendations accordingly.
- Ability to conduct investigations and to evaluate findings.
- Ability to recognize pathological behavior.
- Ability to formulate a plan of social and economic rehabilitation for individual cases.
- Ability to work under stress.
- Ability to effectively communicate through verbal and written media.

Requirements:

- Possession of a bachelor's degree in criminal justice, correctional administration, criminology, psychology, social work, guidance and counseling, child development, sociology, school of social work, social work administration, educational psychology, family relations or theology.
- Two years of professional experience working with adult offenders.

Funding Source for Position: Michigan Department of Corrections

LETTERS OF SUPPORT

The Oakland County MPRI Pilot Site for the Department of Justice (DOJ) Prisoner ReEnty Project has strong support by many key stakeholders. Letters of support include:

- Jennifer M. Granholm, Governor
- Patricia L. Caruso, Director Michigan Department of Corrections (Lead Agency)
- Ronald B. Borngesser, Chief Executive Officer, Oakland Livingston Human Service Agency (Community Based Organization funded for Prisoner ReEntry under the Department of Labor Grant Award)
- Oakland County Michigan Prisoner ReEntry Initiative Steering Committee (in their capacity as the multi-disciplinary, advisory committee to the project.
- John Almstadt, Manger, Oakland County Workforce Development Program

Unless otherwise noted, the Michigan Department of Corrections has signed letters of support on file from all parties listed above.

JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
OFFICE OF THE GOVERNOR
LANSING

JOHN D. CHERRY, JR.
LT. GOVERNOR

January 26, 2006

Mr. Robert Hendricks
Policy Advisor for Prisoner Reentry Initiative
Bureau of Justice Assistance, Office of Justice Programs
U.S. Department of Justice
Washington, D.C.

Dear Mr. Hendricks:

In these difficult times, Michigan cannot afford to bear the social or financial costs associated with unchecked growth in our prison population. Since 2003, we have responded to this dilemma in various ways, endeavoring to bring corrections costs under control without compromising public safety. One initiative geared toward that end, *The Michigan Prisoner ReEntry Initiative (MPRI)*, has been implemented throughout state and local governments, led by the Michigan Department of Corrections. This initiative is focused on better preparing prisoners for their eventual release to our communities, a vital approach in addressing the complex public policy challenge we currently face.

Controlling our prison population, however, is only half of the equation. Criminal justice experts acknowledge that in addition to punishing wrongdoers, our corrections system must also assure that prisoners are prepared to meet both the economic and social challenges of post-prison life. In addition to workplace readiness, arrangements for post-prison transition must deal realistically with the inadequate coping skills that contribute to recidivism, particularly in the areas of alcohol and drug relapse and family and community connectedness. Research demonstrates that this dual emphasis approach reduces recidivism, and allows offenders to contribute to society in a positive fashion. With the proper mix of supervision and support - guided by careful offender assessment - we believe we can reduce recidivism without compromising public safety.

The MPRI has brought key stakeholders to the table and working together, they have gained momentum to permanently improve prisoners' transition to their communities. It is critical that we continue to establish creative community partnerships among public and nonprofit agencies that enjoy strong links to our state-level efforts.

Printed by members of:

I enthusiastically embrace our *Michigan Prisoner ReEntry Initiative* and I am pushing the MPRI team for statewide implementation by the end of Fiscal Year 2007. The application from the Michigan Department of Corrections to the Department of Labor for funding under your Prisoner Reentry Initiative would provide support for pre-release programs, prison in-reach by our community partners, and help ensure that our focus on helping prisoners become ready for work. I fully support this application.

Sincerely,

Jennifer M. Granholm
Governor

JMG/pd
c: Patricia L. Caruso

JENNIFER M. GRANHOLM GOVERNOR	STATE OF MICHIGAN DEPARTMENT OF CORRECTIONS LANSING	PATRICIA L. CARUSO DIRECTOR

January 26, 2006

Mr. Robert Hendricks
Policy Advisor for Prisoner Reentry Initiative
Bureau of Justice Assistance, Office of Justice Programs
U.S. Department of Justice
Washington, D.C.

Dear Mr. Hendricks:

Those of us involved with the Michigan Prisoner ReEntry Initiative (MPRI) are pleased at the possibility of continuing our long-standing collaboration with the U.S. Department of Justice to ensure the successful implementation of a sound prisoner re-entry model for Michigan. The many stakeholders in the process have often expressed their gratitude for having the guidance of your agency as we successfully demonstrated improved re-entry practices under the Serious and Violent Offender Re-entry Initiative. We are now ready to expand on the lessons we learned from that three-year grant and apply a "ready for work" approach to prisoner re-entry. Your grant solicitation, which will dovetail with a recent grant award to the Oakland County MPRI Pilot Site, will allow us to fully test the MPRI Model by introducing pre-release programming into one of our premier re-entry prison facilities that we have started at eight locations in Michigan.

As you know, the MPRI is driven by a vision that every prisoner released to the community will have the tools needed for success. We are governed by an unwavering mission 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. Consistent with your solicitation, our three most important goals for our MPRI Pilot Site in Oakland County are to:

- Reduce crime and promote public safety by addressing 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 helping them find work and access other critical services in the community.
- Fostering effective risk management and treatment programming, offender accountability, and community and victim participation.

This clarity of vision, mission and purpose has helped keep the initiative focused on tangible outcomes as we are now moving ahead aggressively with implementing the MPRI Model statewide by the end of Fiscal Year 2007. Thus, the opportunity you provide for us to fully implement the Model in one of the sites already selected for implementation this year is very timely.

As you know, Oakland County is a committed partner with the Michigan Department of Corrections in the implementation of the MPRI and the braiding of funds from the Department of Labor, the Department of Justice and the Michigan Department of Corrections will produce the synergy needed to thrust us toward successful outcomes in improved recidivism and former prisoner job retention. As you will see from the grant application, we have partnered with all of the stakeholders to create the operational opportunity to achieve our goals and reach our vision.

As required, in order to act as the lead agency for this grant application, the Michigan Department of Corrections in conjunction with the partnering agencies and services, agree to provide individual criminal history information for all of the project participants to Department of Labor Prisoner Reentry grantees and evaluators, unless prohibited by law. These data will be provided in response to periodic requests from the grantees and evaluators throughout the period of performance of this project to capture both criminal history prior to the program enrollment and subsequent recidivism. Further, we agree to work with the Oakland/Livingston County Human Services Agency that was recently funded for post-release re-entry services by the Department. We will assist this community-based organization in obtaining individual criminal history information about other returning offenders, who may be served by them but are not under the jurisdiction of the application, to the extent allowed by state law.

We greatly look forward to working with you.

Sincerely,

Patricia L. Caruso
Director

cc: Dennis Schrantz

Oakland Livingston Human Service Agency
A Community Action Agency Since 1964
"Equal Opportunity Employer/Program"

196 Cesar E. Chavez
P.O. Box 430598
Pontiac, MI 48343-0598
(248) 209-2600 *tel*
(248) 209-2645*fax*
www.olhsa.org

January 24, 2006

Mr. Ken Aud, Area Manager
Michigan Department of Corrections
Field Operations Administration
1200 N. Telegraph
Pontiac, Michigan 48341

Dear Mr. Aud:

Please accept this letter as a letter of support for the grant application that the Michigan Department of Corrections is submitting to the Department of Justice. We understand that these funds will further support and enhance the pre-release activities that are essential to the successful reintegration of the ex-offender into the community. Oakland Livingston Human Service Agency (OLHSA) is committed to the Michigan Prisoner Re-entry Initiative and as such fully supports this grant application.

As the Grantee of the Department of Labor grant for Prisoner Re-entry in Oakland County, OLHSA is dedicated to working in partnership with Michigan Department of Corrections, to implement programming that focuses on a seamless hand-off from prison to the community. OLHSA, in partnership with Michigan Department of Corrections is fully prepared to successfully reintegrate ex-offenders into the community and enable them to become productive members of the community. This collaborative involves community and faith based groups working together with state agencies to ensure a positive result for the ex-offender and the community as a whole.

OLHSA applauds the commitment of the Department of Corrections, its parole officers, community partners, and state agencies to this important effort. We pledge our continued support and partnership in this initiative and offer this letter of support as an indication of our continued commitment and partnership.

Ronald B. Borngesser, Chief Executive Officer
Oakland Livingston Human Service Agency

January 23, 2006

To whom it may concern:

Please be advised that we, the co-chairs of the Oakland County MPRI Steering Team pledge our support for this grant application. If awarded this grant, we the co-chairs will ensure the Steering Team and Advisory Council stay on track, meet regularly and assist in administering the grant in any way deemed necessary.

We will ensure that the programming utilized in preparing the target population is evidence based and designed to enhance the population's cognitive skills focusing on their needs and strengths. Through our Transition Team approach we plan to deliver a seamless hand off of the offender from prison to the community and provide the wrap around services required based on needs of the individual. It is our desire that offenders will leave prison better prepared for work and the transition from the prison to the workforce is successful.

Each of us is committed to this endeavor and very confident of its success.

Sincerely,

The Oakland County MPRI Steering Team Chairs

Lynn Crotty, Director
Oakland Livingston
Human Services Agency

Hugh Wolfenbarger, Warden
Macomb Correctional Facility

Kenneth Aud, Area Manager
Oakland County MDOC

January 25, 2006

To whom it may concern:

On behalf of the Oakland County Workforce Development Board, I strongly support the Oakland Parolee Re-entry Initiative's application to the U.S. Department of Justice for a prisoner re-entry program grant. Representatives from our Board actively participated in the application's development, and I appreciate the opportunity to collaborate.

To that end, the Workforce Development Board's Michigan Works! (One Stop) Service Centers will provide the grant's participants access to such services as job search assistance and skills training. Assuming that the grant is awarded, we will also provide prospective parolees an in-jail assessment that will ensure they make a seamless transition from prison to parole.

Reducing recidivism and assisting ex-offenders to re-integrate into society flows naturally from the mission of our Workforce Development Board. Our Board also recognizes that gainful employment is essential to a prisoner's successful re-entry.

I am certain that, like our other joint endeavors, this collaboration will be an asset to the community and I look forward to working with our partners on the prisoner re-entry program. If I can provide additional support, please contact me at (248) 452-2256.

Thank you for consideration.

Sincerely,

SIGNED

John Almstadt, Manager
Workforce Development Division

JA:dl

Michigan Prisoner ReEntry Initiative
MPRI
Creating Safer Neighborhoods & Better Citizens

Implementation Process Description

For the past two years, MPRI Workgroups have been considering the policies and practices that should comprise the MPRI Model. Today, September 19, 2005, marks the conclusion of the Design Phase of MPRI. Tomorrow, the crucial Implementation Phase of MPRI begins. To facilitate effective, statewide implementation, the following approaches will be used for the structure and process for MPRI implementation.

The Three Phase Work Group structure has provided a way to focus on the three inter-connected phases of the Model and has served as a logical reference point for dialogue on these enormous reforms. **The Work Group structure will thus be maintained.**

- The Work Groups will no longer meet weekly to engage in design activities but will meet quarterly to engage in information sharing. Work Groups will function as "guardians" of the Model and determine, based on the information that flows to them, the degree to which – if any – the Model needs to be adapted or re-examined as a result of the implementation experiences. Work Groups will have Facilitators instead of co-chairs, and trained recorders will staff both the Committees and the Work Groups to provide the highlights of the meetings for posting on the MPRI website.

- Work Groups will each meet at the same time at the same location on an established day in the last month of each quarter (December, March, June, September). The Work Groups will meet individually from 9:00 A.M. to 11:30 A.M. and then work as a "committee of the whole" over lunch for 90 minutes, sharing the information across the three phases of the Model.

- At 1:00 P.M. The Executive Management Team will meet to review the various recommendations and inputs from the Work Groups as well as several committees that will report to them. The State Policy Team will meet twice per year – more if needed – to consider adaptations of the model at their level.

As the focus shifts from state-level design to local-level implementation, the purpose and timeframes for these meetings should also shift. As one active participant noted, "This isn't theory any more, we need less time meeting and more time doing."

- The **Pilot Sites** will be asked to provide information to the Work Groups for their quarterly meetings that indicate successes, challenges, needs and recommendations regarding their implementation of the Model.

- Departmental "**Implementation Resource Teams**" at MDOC, DLEG, DCH, DHS and DOE have been, or will be, formed whose charge is to react to policy and process needs for MPRI in their agencies and to interpret the MPRI Model in terms of implementing or reconsidering policies, processes and programs that affect prisoner re-entry. These Implementation Resource Teams will also meet at least quarterly.

- **Work Group Committees** will report to the Work Groups and will be co-chaired by the appropriate leaders in the partner agencies or from local Pilot Sites as is appropriate and will have an established membership that does not shift from meeting to meeting. Committees will continue to focus on the 7 decision points of the MPRI Model plus the important issues of the Sentencing Process and prisoner Health Care. Each committee will report quarterly progress to their specific Work Group. Several committees will have **subcommittees** that will be involved in particularly detailed work on a variety of issues. Committees and subcommittees meetings are expected to resume in October.

Michigan Prisoner ReEntry Initiative
MPRI
Creating Safer Neighborhoods & Better Citizens

Organizational Structure for Implementation Stage

GOVERNOR
Jennifer M. Granholm

STATE POLICY TEAM

Team Leader: *Teresa Bingman,* Governor's Deputy Chief of Staff for Cabinet Affairs and Management
Department of Corrections: *Patricia L. Caruso*, Director ◆ *Dennis Schrantz*, Deputy Director, Policy & Planning
Department of Community Health: *Ed Dore*, Chief Deputy Director
Department of Labor & Economic Growth: *Robert Johnson*, Special Executive Assistant to the Director
Department of Human Services: *Laura Champagne,* Chief Deputy Director
Department of Education: *TBD*

ADVISORY COUNCIL
Key Stakeholders

EXECUTIVE MANAGEMENT TEAM

IMPLEMENTATION RESOURCE TEAMS
DLEG, DCH, DHS, DOC, DOE

- **DLEG**
  - *Housing*
  - *Workforce Development*
- **DCH**
  - *Substance Abuse Treatment*
  - *Mental Health Treatment*
  - *Physical Health Care*
- **DHS**
  - *Family & Children Services*
- **DOC**
  - *Correctional Facilities*
  - *Field Operations*
- **DOE**
  - *Education*

Getting Ready Workgroup
Institutional Phase

- Sentencing Process Committee
- Prisoner Assessment & Classification Committee
- Prisoner Behavior & Programming Committee
- Prisoner Healthcare Committee

Going Home Workgroup
ReEntry Phase

- Prisoner Release Preparation Committee
  - Victims Subcommittee
- Release Decision Making Committee
  - Parole Guidelines Subcommittee

Staying Home Workgroup
Community Phase

- Parole Supervision & Services Committee
- Revocation Decision Making Committee
- Parole Discharge & Aftercare Committee

- Mentally Ill Prisoner ReEntry Committee
- Children & Family Committee
- Data Systems Committee
- Performance Measurement Committee
- TAP/Case Management Committee
- Workforce Development Committee

Round 1 Pilot Sites

Macomb County	Berrien County	Genesee County	Kzoo County	Kent County	Nine-County	Wayne County	Capital Area

10/2005

MICHIGAN DEPARTMENT OF CORRECTIONS

Safer Neighborhoods, Better Citizens: The Michigan Prisoner ReEntry Initiative

POLICY AND STRATEGIC PLANNING ADMINISTRATION
OFFICE OF OFFENDER RE-ENTRY

MPRI Pilot Site Comprehensive Prisoner ReEntry Plan and Application for Fiscal Year 2006 Funds

(October 1, 2005 – September 30, 2006)

Pilot Site	

Due Date: September 8, 2005
Date Submitted: _____

Email the application and mail three hard copies to:

Twyla Snow, Manager
Snowts@michigan.gov
Office of Offender ReEntry
Policy and Strategic Planning Administration
Department of Corrections
Grandview Plaza Building
P.O. Box 30003
Lansing, Michigan 48909

Approved by MPRI State Policy Team July 28, 2005

TABLE OF CONTENTS

Introduction & General Information 2
Pilot Site Steering Team Membership 3

Part One:
Summary of Comprehensive Prisoner ReEntry Plan 4
Fiscal Year 2006 Funds 5

Part Two:
Services 8
•Program Definitions 8
•Gender Responsive Strategies 9
•Eight Principles of Evidence Based Practices 10
•Sex Offender Management 11
•Demographic Survey: MPRI Pilot Site Target Population Information 12
Service Area Sections
1. Safe, Affordable Housing 13
2. Workforce Development Services 15
3. Substance Abuse Treatment 17
4. Mental Health Treatment 19
5. Transportation 21
6. Health Care Services 23
7. Family Support Services 25
8. Life Skills Programs 27
9. Adult Education 29
10. Domestic Violence Services 31
11. Sex Offender Services 33
12. Victim Services 35
13. Entitlement Programs 37
14. Law Enforcement Services 39
15. Prison IN-REACH & TAP Development 41
16. Other 43

Part Three:
Case Management & Service Delivery System
A. Overview of the Case Management Process 45
B. Prison IN-REACH Service Strategy 46
C. Involvement of Faith-Based Organizations 47
D. Law Enforcement, Prosecutorial and Victim Advocate Involvement 48

Part Four:
Performance Measurement & Evaluation Plan
Overview of the Performance Measurement Plan 49

Service Descriptions - Addendum 50
Summary / Table of Contents 51
Program Cost Detail 55

Agency Listings by Service Area - Attachments 57
Summary / Table of Contents 58
Summary Area Information Detail 59
Endnotes and Citations 60

INTRODUCTION

General Information

Community Coordinator:		Title:	
Address:		Phone Number:	
City:		Fax Number:	
State:	MI	E-Mail:	
Zip:			
Fiscal Agent:		Title:	
Contact Person:		Phone Number:	
Address:		Fax Number:	
City:		E-Mail:	
State:	MI		
Zip:			
Federal I.D. Number:			
Steering Team 1st Co- Chair:		Title:	
Address:		Phone Number:	
City:		Fax Number:	
State:	MI	E-Mail:	
Zip:			
Steering Team 2nd Co- Chair:		Title:	
Address:		Phone Number:	
City:		Fax Number:	
State:	MI	E-Mail:	
Zip:			
Steering Team 3rd Co- Chair:		Title:	
Address:		Phone Number:	
City:		Fax Number:	
State:	MI	E-Mail:	
Zip:			
	Date of Submission:		
	Date Application Approved by Steering Team:		
	Date Application Approved by Fiduciary:		

Pilot Site Steering Team Membership				
Name & Title	**Organization**	**Service Area**	**Email Address**	**Phone Number**

Comprehensive Prisoner ReEntry Plan
PART ONE: SUMMARY

Briefly summarize the key points of the Prisoner ReEntry Comprehensive Plan including assets, barriers and gaps identified in the Pilot Site's Community Assessment. Information included should provide a clear and concise picture of local issues, long and short term goals, local priorities, and overall implementation strategies to improve the parolee success rate and reduce crime by parolees for the target population outlined on the "MPRI Pilot Target Population Information" sheet (page 5). The Summary should include a brief description of your case management strategy and how evidence based practices and gender responsive strategies will be incorporated into your case management and service delivery approach. Use no more than three pages in this summary.

Notes:

- Part One should be completed last.
- You may eliminate the instructions here (and throughout the application) to provide more space for your responses.

MPRI PILOT SITE TARGET POPULATION INFORMATION[1]

Total Paroles (June 1, 2004 through May 31, 2005)	
Demographics	
Population[2] (July 1, 2004)	
Percent Living Below Poverty Level[3] (1999)	%
Unemployment Rate[4] (May, 2005 - Not Seasonally Adjusted)	%
UCR Crime Data	
Total Crimes/1,000[5] (2003 Michigan UCR Data)	
Index Crimes/1,000[4] (2003 Michigan UCR Data)	
2004 Prison Intake	
Total Prison Intake 2004[6]	
Parole Violator New Sentence Intake (PVNS)	
Parole Technical Violator Returned (PTV) 2004	
Estimated Number PV Tech with New Criminal Activity[7]	
Parole Failures in 2004 (PVNS + PTV)	
Characteristics of Parole Population	
Number Paroled	
"B" or Higher Prefix (At least one prior Michigan Prison Term)	%
Drug Problem	%
Alcohol Problem	%
Drug AND Alcohol Problem	%
Substance Dependent (SASSI 3 or 4)	%
Previous Mental Health Contacts	%
Active Mental Health Diagnosis at Parole	%
Less than GED or Diploma at Commitment	%
Not Employed at Time of Offense	%
Gender Male: Female:	% %
Offense Type (Controlling Offense if multiple types) Assaultive: Drug: Other Nonassaultive:	% % %
Percent with one or more prior Assaultive Convictions (PGE)	%
Honorably Discharged Veteran	%

[1] **This information has been provided to each Pilot Site by the MDOC and is to be reiterated here for reference purposes**

[2] 2004 Census Population Estimates, Table T1 [7]. Retrieved July 19, 2005, from http://www.census.gov: http:/factfinder.census.gov/servlet/DTSelectedDatasetPageServlet.

[3] 2000 Census, Summary File 3, Table TM-P067. Retrieved July 19, 2005, from http://www.census.gov: http://factfinder.census.gov/servlet/DTGeoSearchByListServlet.

[4] Michigan Department of Labor & Economic Growth, Office of Labor and Market Information, *May 2005 Area Jobless Rates*. Retrieved July 20, 2005, from http://www.michigan.gov/cis: http://www.michlmi.org/LMM/laus/lausindex.htm.

[5] Michigan State Police, Criminal Justice Information Center. *2003 **U**niform **C**rime **R**eport*, 45th edition http://www.michigan.gov/documents/2003_Annual_Report_106553_7.pdf

[6] Prison Intake includes New Court Commitments, Probation Violators (New Sentence and Technical Violators), Parole Violators with a New Sentence and Escapers with a New Sentence. Technical Parole Violators and Additional Sentence Imposed cases are not included in this number.

[7] Based on the assumption that 75% of Technical Violators actually were involved in new criminal activity, based on prior studies by MDOC.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
2. Workforce Development Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
3. Substance Abuse Treatment			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
4. Mental Health Treatment			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
5. Transportation			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
6. Health Care Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
7. Family Support Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			

SERVICE AREA	Costs	Eligibility Criteria	Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.
8. Life Skills programs			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
9. Adult Education			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
10. Domestic Violence Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
11. Sex Offender Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
12. Victim Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
13. Entitlement Programs			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
14. Law Enforcement Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			

SERVICE AREA	Costs	Eligibility Criteria	Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.
15. Prison IN-REACH & TAP Development			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
16. Other: _____			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
Sub Total Services Request	$		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	Funding Sources						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Training							
Travel							
Sub Total Management	$						

Fiduciary Administrative Costs (10% MAX MPRI Funds)	Funding Sources						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Contractual Services							
Supplies							
Equipment							
Training							
Travel							
Other							
Sub Total Adm. Costs & Percent	$ / %						$

SERVICES FUNDS REQUESTED	**$**
COMPREHENSIVE PLAN MANAGEMENT	**$**
ADMINISTRATIVE FUNDS REQUESTED	**$**
TOTAL REQUEST	$

Comprehensive Prisoner ReEntry Plan
PART TWO: SERVICES

- **Each Pilot Site completed an MPRI Community Assessment that evaluated the resources the local jurisdiction has and the resources needed to meet the needs of returning prisoners. This Assessment included a review of data on returning prisoners provided by the MDOC.**
- **The Comprehensive Prisoner ReEntry Plan builds on the Community Assessment in that the Plan includes using the assets available in your jurisdiction, includes your plan to break down the barriers that inhibit efficient service delivery and describe the resources – both from the state and from other sources – that are will needed to fill the gaps in services.**
- **Funding information is needed for both state and non-state resources and the overall budget should reflect ALL funding that will be applied to the target population. For requested funding using state MPRI funds, detailed program description information is required.**
- **Part Two of the Comprehensive Plan is organized by service area using the results – in SUMMARY fashion – of the local Pilot Site Community Assessment.**
- **A competitive and open bid process is required for the determination of service providers.**

DEFINITIONS

As you know, the purpose of the Community Assessment was to begin the work of developing a Comprehensive Community ReEntry Plan for your Pilot Site jurisdiction be focusing on assets, gaps, barriers, proposed solutions, case management strategy, and plans to follow evidence based practices for parolee services. In order to have a consistent frame of reference across sites the following definitions are being used for both the Assessment and the Comprehensive Plan:

- **Assets** are those strengths present in communities and may consist of programs, services, delivery systems, organizational capacities and networks.
- **Barriers** consist of those challenges that impede the effective coordination and delivery of services to meet a recognized need.
- **Case management** describes *how* the services provided to a returning prisoner are coordinated and effectively delivered.
- **Evidence based practices**[i] refer to those practices that are founded in research and demonstrate a correlation between those practices and recidivism reduction. (See page 8).
- **Gaps** refer to the absence of a specific element or component within a community that renders the service delivery network less effective than it might otherwise be. It may be something that could be addressed through policy change, organizational structural change or funding assistance, or some combination of these.
- **Gender Responsive Strategies** refer to gender relevant approaches to effectively managing and assisting women parolees. (See page 7 for more information).
- **Proposed solutions** should describe your plan to effectively use your assets, fill your gaps, and overcome your barriers for each service area.
- **Sex offender services**[ii] include specialized, sex offender specific assessment, supervision and treatment to effectively manage sex offenders in the community. (See page 9 for more information).

Comprehensive Prisoner ReEntry Plan
GENDER RESPONSIVE STRATEGIES

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 PRACTICES[iii]

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 two[iv]. These 7 Guidelines provide insight into implementation.

Limit new projects to mission-related initiatives[v]

- 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[vi]

- 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[vii]

- 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[viii]

- 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[ix]

- 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[x]

- 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[xi]

- 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.

Comprehensive Prisoner ReEntry Plan
SEX OFFENDER SPECIFIC SERVICES

There are five principles that underlie each of the seven components of a comprehensive approach to sex offender management:

FUNDAMENTAL PRINCIPLES	APPLIED TO EACH COMPONENT
Collaboration Victim-Centered Specialized Knowledge and Training Monitoring and Evaluation Community involvement and education	Investigation, Prosecution, and Notification Supervision Assessment Treatment Reentry Registration (if applicable) Notification (if applicable)

See *Comprehensive Assessment Protocol (CAP) for Sex Offender Management Practices*, Pilot Test Version, U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance, prepared by the Center for Sex Offender Management, April 2004, www.csom.org.

Approaches to Addressing Sex Offender Specific Services*

Given the profound impact of sex offending on victims and the complex nature of sex offending and sex offenders, comprehensive interventions and systemic responses – tailored to meet the individual levels of risk and needs of offenders – are required.

Collaboration

- Ensure collaboration at both the policy and case management level.
- Include agencies and individuals that affect or are affected by sex offenders.
- Develop multi-disciplinary case management teams to ensure offender accountability, rehabilitation, and victim and community safety.

Victim Centeredness

- Enhance sex offender policy development to ensure that the safety needs of victims are paramount
- Develop and deliver professional training initiatives to educate criminal and juvenile justice system and other actors about the effects of victimization.
- Inform day-to-day supervision practices, especially around policies that may be harmful to victims.
- Assist and support supervision agencies with community notification and education efforts, which should include a component aimed at providing information about sexual assault to community members.

Specialized Knowledge and Training

- Develop specialized sex offender supervision officers and caseloads to ensure strategies and interventions utilized will maximize the likelihood of reducing recidivism and ensuring safe communities.
- Treatment for sex offenders is a highly specialized area. At a minimum, those providing sex offender treatment services should ascribe to Association for the Treatment of Sexual Abusers (ATSA) Standards (www.ATSA.com).
- Comprehensive, specialized assessments and psycho-sexual evaluations are important to the development of an appropriate supervision and treatment plan for the offender.

Monitoring and Evaluation

- Develop monitoring and evaluation strategies to ensure the integrity, quality and efficacy of sex offender management practices.

Public Education

- Myths and misperceptions about adult and juvenile sex offenders and victims are widespread among the general public. Educate communities about the prevalence and incidence of sexual victimization, and the range of interventions being used to manage sex offenders safely in the community.
- Involve the public in community notification efforts.
- Empower the community to be a part of the solution to this problem.

* For more information, contact the Center for Sex Offender Management, www.csom.org. Also, see the Comprehensive Assessment Protocol as cited above.

1. Safe, Affordable Housing

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

1. Safe, Affordable Housing: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

1. Safe, Affordable Housing		
Number to be Served		
Amount Requested		
Cost per Parolee		

2. Workforce Development Services

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

2. Workforce Development Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

1. Workforce Development Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

3. Substance Abuse Treatment

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

3. Substance Abuse Treatment: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

3. Substance Abuse Treatment		
Number to be Served		
Amount Requested		
Cost per Parolee		

4. Mental Health Treatment

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

4. Mental Health Treatment: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

4. Mental Health Treatment		
Number to be Served		
Amount Requested		
Cost per Parolee		

5. Transportation

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

5. Transportation: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

5. Transportation		
Number to be Served		
Amount Requested		
Cost per Parolee		

6. Health Care Services **(medical centers, health care clinics, free or low cost prescription coverage)**

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

6. Health Care Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

6. Health Care Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

7. Family Support Services **(family reunification programs, mentoring, emergency services)**

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

7. Family Support Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

7. Family Support Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

8. Life Skills Programs **(financial management, cognitive skills, anger management)**

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

8. Life Skills Programs: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
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- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

8. Life Skills Programs		
Number to be Served		
Amount Requested		
Cost per Parolee		

9. Adult Education

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

9. Adult Education: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
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- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

9. Adult Education		
Number to be Served		
Amount Requested		
Cost per Parolee		

10. Domestic Violence Services

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

10. Domestic Violence Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

10. Domestic Violence Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

11. Sex Offender Services

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

11. Sex Offender Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

11. Sex Offender Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

12. Victim Services

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

12. Victim Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

12.. Victim Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

13. Entitlement Programs **(veteran benefits, Medicaid services, Social Security, etc.)**

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

13. Entitlement Programs: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

13. Entitlement Programs		
Number to be Served		
Amount Requested		
Cost per Parolee		

14. Law Enforcement Services

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

14. Law Enforcement Services: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

14. Law Enforcement Services		
Number to be Served		
Amount Requested		
Cost per Parolee		

15. Prison IN-REACH & TAP Development

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

15. Prison IN-REACH & TAP Development: *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

15. Prison IN-REACH & TAP Development		
Number to be Served		
Amount Requested		
Cost per Parolee		

16. Other: _____

(Delineate any gender responsive strategies and faith-based programs in assets, barriers and gaps, and, if appropriate, in proposed solutions.)

Assets

Please SUMMARIZE the assets available in your community for this service area. Please list specific resources available to the MPRI program and related to MPRI activities as ATTACHMENT No. 1.

Barriers

Please SUMMARIZE the barriers to providing effective services in this area. Barriers could include existing policies or procedures that regulate the service for returning prisoners.

Gaps

Please SUMMARIZE the gaps, not limited to but including funding, for this service area in your community.

16. Other: _____ : *Proposed Solutions*

- *Please SUMMARIZE your community's plan for addressing the gaps and barriers as they relate to the number of parolees — and their characteristics — returning to the Pilot Site jurisdiction as detailed in the "MPRI Pilot Site Target Population Information" included on page 5.*
- *Your solution could include obtaining additional funding to address the gaps, changing policies to overcome barriers, or adapting existing assets to meet additional needs.*
- *For each service delivery gap that you identify as an area for which funding has either been identified or requested, please include the funding in the budget section below and in the BUDGET SUMMARY beginning on page 6.*
- *For each service delivery gap for which you are requesting MPRI funds, please complete a PROGRAM DESCRIPTION as an addendum.*

16. Other: _____		
Number to be Served		
Amount Requested		
Cost per Parolee		

Comprehensive Prisoner ReEntry Plan
PART THREE: CASE MANAGEMENT & SERVICE DELIVERY SYSTEM

A. PROVIDE AN OVERVIEW OF THE CASE MANAGEMENT PROCESS: This section must include how re-entry Transition Teams are chosen and the identity of the Parole Office representative that will lead the Transition Team and the maximum number of returning prisoners the Comprehensive Plan will target in FY 2006. Transition Teams are responsible for providing support to prisoners in the transition planning process and assisting their transition into the community though case management with supervising facility and parole staff. Transition Team members may provide re-entry services and programming directly to prisoners within a facility subject to approval by the Warden of the facility and the eligibility criteria set forth in PD 03.02.100 "Michigan Prisoner Reentry Initiative" and PD 06.06.115 "Intensive Parole Reentry Program".

B. <u>PRISON IN-REACH SERVICE STRATEGY</u>: Please describe how the local Transition Team will interact with the Intensive ReEntry Prison Programs for men and women and with the prison nearest your community when inmates are moved there as part of the implementation of the MPRI in FY 2006 and the maximum number of returning prisoners the Comprehensive Plan will target in FY 2006. This section should also detail the process for developing the offender Transition Accountability Plan in coordination with prison and parole staff.

C. INVOLVEMENT OF FAITH-BASED ORGANIZATIONS IN SERVICE DELIVERY SYSTEM[8]: Describe the role of faith-based community in the design of the Comprehensive Plan and in providing support services and supervision for parolees.

[8] State funds cannot be used to directly support religious instruction, worship, prayer, proselytizing or other inherently religious practices. Neutral, secular criteria that neither favor nor disfavor religion must be employed in the selection of grant and sub-grant recipients. However, funds for services are encouraged for faith-based organizations with the stipulation that they agree to not use funds for these purposes.

D. LAW ENFORCMENT, PROSECUTORIAL AND VICTIM ADVOCATE INVOLVEMENT IN SERVICE DELIVERY SYSTEM: Describe the role of law enforcement, prosecution and victim advocate representatives in the design of the Comprehensive Plan and in providing support services and supervision for parolees.

Comprehensive Prisoner ReEntry Plan
PART FOUR: PERFORMANCE MEASUREMENT & EVALUATION PLAN

The MPRI Evaluation Plan has five goals:

1. Document the policy-development and implementation processes; capture all important lessons learned from MPRI.
2. Determine effectiveness of MPRI as measured through the long-term outcomes of recidivism and time before return to prison.
3. Inform improvements (both in policy and in practice) within the MPRI community, with MDOC and other state partners, and within the service-provision network.
4. Equip policymakers and funders with the data needed to make effective decisions.
5. Raise awareness and increase understanding of the prisoner transition process.

Public Policy Associates, Inc. (PPA) (www.publicpolicy.com) is coordinating and managing the statewide, independent evaluation of MPRI. All evaluation and performance measurement activities involving MPRI Pilot Sites should be conducted in collaboration with PPA.

PROVIDE AN OVERVIEW OF THE LOCAL PERFORMANCE MEASUREMENT PLAN: Using the 5 MPRI Evaluation Plan Goals as a framework, define the data elements you plan to collect and describe how you will collect, analyze, and report on these elements in collaboration with PPA.

The objective of the MPRI evaluation is to learn as much as possible about what works as hoped, what does not, and how to improve the Initiative. This implies understanding both the *results or outcomes* of the work and the *process of implementation*. Measuring the *outcomes* lets one know whether the direction and magnitude of change is meaningful, and assessing the processes of implementation lets one know how the results were achieved. Evaluation results will be fed constantly back to policy makers, MPRI architects, and staff in the field. By injecting these results frequently, the Initiative can be refined and improved. Lessons learned from the earliest implementation efforts can be applied to later efforts and across sites. Thus, the evaluation is not simply an academic exercise. Rather, it is a critical element of MPRI that will contribute important knowledge to it. Each pilot site will be responsible for collecting the data that will be used throughout the evaluation.

Key *outcome measures* to be used by the evaluation include:

- Offender recidivism as defined by a return to prison during the term of parole.
- Time between release and failure.
- Number of violations of supervision conditions by parolees.

Between October 1, 2005 and January 1, 2006, each pilot site will develop local performance measures using the attached baseline data for their pilot site community. Each pilot site is responsible for tracking their performance on the failure rate of parolees in their community. The MDOC Office of Research and Planning will assist the pilot sites in tracking these indicators. In addition to the key outcome measures, *process measures* must be developed, collected, and analyzed to fully glean lessons learned from MPRI. For <u>each service area</u>, each pilot site is responsible for collecting the following information:

- Number of offenders served and their characteristics (type of offense, gender, age, ethnicity, etc.).
- Number of TAPs and Case Management Plans completed.
- Changes in offenders' risk, needs, and strength profiles (profiles forthcoming with the implementation of a validated risk assessment instrument).
- Use of risk management principles and criminogenic needs in case planning.
- Type and dosage of treatment for each offender (programming received, number of sessions or frequency of assistance, etc.)

Each pilot site may collect any additional indicators of success as needed; however, by agreeing to collect the above information, each pilot site is indicating an understanding and commitment to the statewide performance evaluation. Because the evaluation plan is not fully developed and will evolve over time, the required data elements may change.

Addendum

SERVICE DESCRIPTIONS

MPRI funding is available to support activities within several service areas:

- Housing
- Workforce Development
- Employment Services
- Substance Abuse Treatment
- Mental Health Treatment
- Transportation
- Health Care
- Family Support
- Life Skills Programs
- Adult Education
- Domestic Violence Services
- Sex Offender Services
- Victim Services
- Entitlement Programs
- Law Enforcement Services
- Prison IN-REACH & TAP Development

Complete a Service Description for <u>each</u> service area
for which funding under MPRI is requested.

MPRI Comprehensive Prisoner ReEntry Plan
Service Descriptions

Summary/Table of Contents

ADDENDUM Number*	SERVICE AREA	VENDOR Name/Address	CONTACT PERSON / E-MAIL
1.1			
1.2			
1.3			
1.4			
1.5			
1.6			
1.7			
1.8			
1.9			
1.10			
Etc.			

- **Addendum number refers to the number of the Service Description shown in the top right corner of the Service Description, page one.**

SERVICE DESCRIPTION NUMBER 1.

Service Area: _____

Repeat here the summary information from Part One for this service area, including assets, gaps, and barriers, and your plan to utilize funding to build on assets and address gaps and barriers. (Specify the identified gap this program will address.)

List specific programs to be funded through MPRI and complete a program description and budget summary for each proposed program.
Program Name:
Program Services Description Provide information regarding the program design and frequency/duration of service.
How is offender progress reported to the parole agent referral source? Include frequency of reporting positive and negative progress and the types of reports provided such as intake, monthly termination, etc.

Is an Assessment required prior to referral or admission to this program?	Yes: ( )	No: ( )

If Yes, describe the Assessment Process:
Provide information regarding the program intake process.

Please describe in detail how this program includes, supports, or is built on Evidence Based Practices in its design or implementation strategies
Eligibility Criteria: Briefly describe the program eligibility criteria including target population and risk/need factors as they apply to this specific program. If target population includes women parolees, identify which gender responsive strategies will be used or supported. See Addendum 3.
Describe anticipated program outcomes and process for measuring success for each outcome. Outcomes should be specific*; i.e.*, 75% of participants will successfully complete the program. Use other benchmarks as appropriate.

Program Cost Detail

This information can only be detailed after the local competitive and open bid process. This detail needs to be on file locally and may be requested by the MDOC during FY 2006.

Service Area:	_____						***Please list all sources that will be / are providing funding for this program.***
Program Costs	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary and Wages							
Contractual Services							
Supplies							
Equipment							
Training							
Travel							
Other							
Sub Total							

Program Cost Descriptions: Fill out for MPRI requested funds utilizing the following program cost categories:	
Cost Category:	**Description/Amount (see examples provided):**
Salary & Wages: Would include those costs incurred paid to any individual providing either direct or indirect services to support approved program activities. **Example:** Program Supervisor ($25,000) to administer daily activities of the job training unit. Ensures services are completed in prompt and required manner.	
Contractual Services: Costs would include those incurred pursuant to a contractual agreement to provide services for approved program activities. **Example:** $50,000 for job skills assessment. Service provider will be determined through competitive bid process. Contract will be issued to secure services on a per diem basis.	
Equipment: Costs would include those incurred for the purchase of equipment. Examples would include computers, copiers, fax machines. **Example:** 3 computers and printers for a total of $3,000.	

Program Cost Descriptions: (Cont'd.)	
Cost Category:	**Description/Amount (see examples provided):**
Supplies: Costs would include purchases for office supplies such as pens, paper, ink cartridges, computer software, etc. Additional costs may include drug testing kits/supplies, test manuals or books, or other programmatic materials or items that are utilized on a consistent basis to provide program services and typically maintain a per unit cost of less than $100. **Example:** Misc., office supplies in the amount of $500. Costs to rent copier at a total cost of $500.	
Travel: Costs are typically those reimbursed to employees for travel purposes. Travel may be routine or non routine and include reimbursement for mileage, parking, and meals. Travel costs may be incurred for routine transportation between various work locations, client/customer meetings; or to attend conferences or seminars that would benefit the delivery of program services. Costs described within this section should be limited to actual transportation costs and not include seminar/conference registration costs etc. **Example:** $2,000 to allow staff to travel between program sites.	
Training: Costs may include: registration fees to allow staff to attend training seminars/conferences; membership fees or subscription costs; and those incurred to *provide* training to clients or staff and could include costs for room rental, materials, brochures, etc. **Example:** $1,500 to allow three staff to attend job training seminar in Grand Rapids, MI. $500 registration fee for each individual. Seminar will be conducted by Job Training Experts, Inc.	
Other: Costs may also include those that support multiple services or cannot be directly allocated to any specific cost category. **Example:** Indirect costs of $2,000 incurred for accounting, personnel services, and building rent.	

ATTACHMENTS

AGENCY LISTINGS BY SERVICE AREA

For each of the service areas, provide a listing of the Assets that your community already has in place: Housing; Workforce Development; Employment Services; Substance Abuse Treatment; Mental Health Treatment; Transportation; Health Care; Family Support; Life Skills Programs; Adult Education; Domestic Violence Services; Sex Offender Services; Victim Services; Entitlement Programs; Law Enforcement Services, Prison IN-REACH & TAP Development, etc.

Note: Each Service Area Asset Summary in Part One refers to this listing.

MPRI Comprehensive Prisoner ReEntry Plan
Agency Listing by Service Area

Summary/Table of Contents

Attachment Number	SERVICE AREA
1	Housing
2	Workforce Development
3	Employment Services
4	Substance Abuse Treatment
5	Mental Health Treatment
6	Transportation
7	Health Care
8	Family Support
9	Life Skills Programs
10	Adult Education
11	Domestic Violence Services
12	Sex Offender Services
13	Victim Services
14	Entitlement Programs
15	Law Enforcement Services
16	Prison IN-REACH & TAP Development
17	Other

AGENCY INFORMATION BY SERVICE AREA			
Service Area		Attachment #	
Agency/Contact Name:		Agency/Contact e-mail	
Agency/Contact Address	Street	City	ZIP

Number of Parolees Served on an annual basis		Is there additional capacity available? If so, how many slots are available?	Yes: ___ No: ___ Number of slots available: ____
Cost per participant		How long has this population been served? (i.e. “Years Serving Parolees”)	
Other populations served			

Funding sources and amounts

Outcome measures and results (Detail)	

ENDNOTES: CITATIONS FOR EVIDENCE BASED PRACTICES

[i] Evidence-based practices website: http://www.nicic.org/Library/019342

[ii] Center for Sex Offender Management website: www.csom.org

[iii] See: U.S. Department of Justice, National Institute of Corrections manuscript, Implementing Evidence Based Practice in Community Corrections (April 2004).

[iv] 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.

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REPORT TO THE LEGISLATURE
Pursuant to P.A. 154 of 2005
Section 411
Recidivism Reduction Report
January 2006

Section 411 of 2005 P.A. 154 requires that the Department of Corrections provide a plan to reduce recidivism rates among prisoners released from correctional facilities, including detailed information regarding:

- Recidivism rates in Michigan for the most recent 5-year period,
- Comparison of those rates to rates in other states and a national average,
- How the department plans to improve recidivism rates, and
- How the department proposes to measure the success of the plan.

I. Michigan Recidivism Rates for Offenders Who Paroled in 1998-2003

Methodology

Table 1 provides detailed information regarding two-year follow-up outcomes for offenders who paroled in 1998-2003, broken down by parole year. The most recent available offender release cohort for recidivism analysis is 2003 releases because of the need to allow for the follow-up period. Table 1 includes follow-up outcomes for all Michigan offenders who paroled to field supervision in Michigan during the six-year period. The table excludes offenders who paroled into the custody of another jurisdiction (such as federal detention), or who paroled to field supervision in other states under the Interstate Compact, or who paroled to Michigan field supervision from other states under the Compact, or who died within the two-year period.

The follow-up period is a standard two years for every offender in the table (unless they returned to prison sooner than that), regardless of whether the parole term was still active or the offender had successfully discharged from parole supervision before two years had passed. Parole terms are typically two years in length, although they range from a few months (when paroled to an imminent max out date) to as long as four years (which is mandatory for paroled lifers). However, a uniform follow-up period is essential for recidivism analysis to control for time at risk, so the analysis tracked recidivism outcomes within two years of release even if the parole terms had already expired within that time.

As to the measurement of recidivism, it is possible for paroled offenders to return to prison as technical rule violators, or with new sentences, or both. When both, the cases appear in the new sentence column – which includes parole violators with new sentences as well as new court commitments in the event that the new crimes occurred after the parole terms had ended.

Another form of failure reflected in Table 1 (but somewhat different because the subjects are not back in prison) is offenders who were on parole absconder status at the end of two years. While on absconder status, parolees are obviously not successes at that point; but it is also important to note that they are not automatically headed back to prison, but are pending review for violations and potential revocation. For example, while the most recent three-day MDOC/Michigan State

Police sweep of targeted absconders netted 172 arrests (coordinated in partnership with local law enforcement agencies), only 18.6% (32) of the violators were returned to prison. The remaining 81.4% ultimately remained in the community, albeit with imposition of local sanctions, increased supervision levels, extended terms of parole, added special conditions of parole, et cetera.

The determining factor in the disposition of a parole absconder is an assessment of offender risk. When risk is determined to be low (such as when an absconder is still employed and generally following parole rules, but failed to report), then the parole agent may continue to work with the case and impose local sanctions, possibly increase supervision of the case, and engage the community in service delivery designed to intervene in the behavior that led to the abscond.

Baseline Recidivism Rate

For purposes of the recidivism reduction plan, the outcomes for offenders in Table 1 who paroled in 1998 are the baseline recidivism rate against which the impact of recidivism reduction initiatives will be determined. This is because 1998 is the most recent year that is far enough in the past to enable extension of the follow-up period to as long as four years from the date of parole (the length of the longest parole terms) and yet end prior to the initiation in 2003 of the department's Five Year Plan to Control Prison Growth. Administrative and statutory measures implemented as part of the Five Year Plan represent a myriad of new actions designed, in large part, to bring down the recidivism rate, so the baseline rate needs to use an offender release cohort whose long-term follow-up period ends before those actions commenced.

Consequently, the baseline recidivism rate (1998) in Table 1 against which to determine the impact of recidivism reduction measures shows that, on average, 51.3% of paroled offenders would be expected to successfully remain in the community two years after release. Within that time, the other 48.7% would either return to prison with new sentences (12.3%), or return to prison as parole technical violators (26.5%), or be on parole absconder status (9.9%).

Subsequent Recidivism Trend Results Against the Baseline Recidivism Rate

The results of the multi-year recidivism analysis in Table 1 show a gradual 2.1% improvement in the overall two-year success rate for the offender release cohorts subsequent to the baseline year. That modest improvement translates into 228 more successes in the 2003 release cohort than would otherwise have been expected. (The slight increase in the proportion of returns to prison with new sentences is offset by the drop in technical returns and the reality that about 70% of technical returns also involve new criminal activity, with either dropped or pending charges.)

It is also useful to note an 8.9% improvement in the percentage of failures that were returned to prison within two years as parole technical violators or new sentence admissions. The corresponding 6.8% increase in parolees on absconder status after two years (rather than already back in prison), along with the modest improvement in the overall success rate, together demonstrate that time to failure has also begun to be extended. Though absconder status is not a positive standing, it must be remembered that about 8 of every 10 absconders are ultimately continued on parole. In essence, the shift from the baseline recidivism rate pattern for the 2003 offender release cohort means that as many as 742 of the absconders from that year normally would have already been back in prison by the end of the follow-up period for infractions that occurred earlier in time. Future MPRI status reports will examine the causes and plans to address absconding.

Table 1

Two-Year Follow-Up Outcomes of Offenders Who Paroled in 1998 to 2003 by Year
(Flat Two-Year Follow-Up Regardless of Parole Status)

YEAR	TOTAL CASES[1]	SUCCESS			FAILURE				BY PERCENT TO TOTAL				
		Total	Still on Parole[2]	Discharged	Total	Absconds[3]	Technical Violators[4]	New Sentence	Total Success	Total Failure	Absconds	Technical Violators	New Sentence
1998	**10,054**	**5,157**	**1,263**	**3,894**	**4,897**	**1,000**	**2,663**	**1,234**	**51.3**	**48.7**	**9.9**	**26.5**	**12.3**
1999	9,275	4,929	1,230	3,699	4,346	881	2,484	981	53.1	46.9	9.5	26.8	10.6
2000	8,709	4,634	1,168	3,466	4,075	800	2,242	1,033	53.2	46.8	9.2	25.7	11.9
2001	9,591	5,110	1,461	3,649	4,481	1,070	2,206	1,205	53.3	46.7	11.2	23.0	12.6
2002	10,254	5,408	1,683	3,725	4,846	1,630	1,851	1,365	52.7	47.3	15.9	18.1	13.3
2003	10,987	5,864	1,808	4,056	5,123	1,835	1,837	1,451	53.4	46.6	16.7	16.7	13.2

The baseline recidivism rate release year is 1998 (see narrative).

SOURCE DATA: Corrections Management Information System (CMIS)

[1] Follow-up includes two years from parole for prisoners paroled to Michigan counties
[2] Still on Parole status after two years from parole; either parole term given is longer than two years or parole term extended.
[3] On Abscond status after two years from parole
[4] If a prisoner returned as a Technical Violator but also received a New Sentence within two years, the case is counted only in the New Sentence column.

Recidivism Reduction Measures

The gradual, modest 2.1% improvement in the overall two-year success rate during the six years of offender release cohorts reflected in Table 1 (as well as the lengthened time to failure) have been achieved via actions taken under the Five Year Plan that were implemented through FY 2005, including:

- Expanded community sanctions for low level offenses.
- Expanded community sanctions and control for parole technical violators.
- Expanded use of community residential programs – including work oriented community residential facilities for female parolees.
- Intensive Reentry Units (IRU) that have served as a testing ground for Michigan Prisoner ReEntry Initiative (MPRI) practices.

To take recidivism rate reduction to the next level of improvement beyond the 2.1% already reflected in Table 1 will require ongoing and extended impact from the above measures, as well as new impact from the following initiatives that are now also underway in FY 2006:

- First round MPRI Pilot Site implementation at 7 Prison Pilot Site Facilities serving 8 Pilot Site communities.
- Implementation of the Mentally Ill Inmate ReEntry Demonstration Project.
- MPRI expanded drug treatment programming.
- Evidence-based policy and procedure improvements for probation and parole sanctions, services and supervision.

The ongoing/expanded actions and new initiatives listed above are the major components of the department's Recidivism Reduction Plan. But before we present the details of the Plan, we will compare Michigan's recidivism rate to the rates in other states and a national average.

II. Michigan Comparison to the Recidivism Rates of Other States and a National Average

Table 2 is a comparison of Michigan's recidivism rate to the rates of other large parole population states and the national average. The sources of the data are two reports from the Bureau of Justice Statistics of the U.S. Department of Justice, entitled *Trends in State Parole, 1990-2000 (October 2001)* and *Probation and Parole in the United States, 2004 (November 2005)*. National parole outcome statistics tend to lag behind the availability of internal state data because of the time involved in collecting data from all of the states, as well as the difficulty in accounting for the considerable variation in the recidivism measures and methods used.

Table 2 shows that Michigan has the 8th largest parole population among the fifty states. However, the number of parolees per 100,000 adult residents in Michigan is lower than the national state average, and is the second lowest among the ten largest state parole systems. Table 2 also shows that Michigan's percentage of successful parole discharges is 10% above the national average of 41.9%. And while Michigan's parole failure rate is higher than the failure rates of some states with comparable parole populations (such as Georgia, Illinois, and New York), it is also much lower than the failure rate of the state with the largest parole population (California).

Table 2

Statistics for the Ten Largest Parole Population States in 2004 (vs. Nationwide)

State	2004 Year-End Parole Population	2004 Parole Population Per 100,000 Residents	Percent Successful Among 1999 Parole Discharges	Percent Parole Violators Among 1999 Prison Admissions*
California	110,261	**419**	**21.3**	67.2
Texas	102,072	**629**	**54.9**	21.0
Pennsylvania	77,175	806	*Not reported*	36.1
New York	54,524	**372**	**54.9**	31.5
Illinois	34,277	**362**	**62.9**	27.3
Louisiana	24,387	728	46.9	53.1
Georgia	23,344	**359**	**63.4**	20.5
MICHIGAN	**20,924**	**276**	**51.9**	**36.8**
Oregon	20,858	761	50.6	25.1
Ohio	18,882	**218**	**43.6**	17.6
NATIONWIDE	**765,355**	**347**	**41.9**	**34.8**

* Prison admissions include parole violator technical returns.

Source: DOJ Bureau of Justice Statistics

III. Recidivism Rate Reduction Plan

General Description

Among the recidivism reduction measures adopted by the department, the one with by far the greatest potential long-term impact is the Michigan Prisoner ReEntry Initiative (MPRI). In fact, one way or another, every other recidivism reduction measure listed earlier is intimately related to the MRPI – either as a precursor to the full implementation of the MPRI Model (e.g., Intensive ReEntry Units or IRUs), or as specialized subgroups to be addressed within overall MPRI implementation (such as the Mentally Ill Inmate ReEntry Demonstration Project). Consequently, the remainder of this Recidivism Reduction Report will focus on the features of the MPRI and the department's plans for its implementation, measurement and evaluation.

There is now powerful evidence that offenders fail in the community when their inability to secure employment, adequate housing, and health care – especially substance abuse and mental health treatment – breaks whatever bonds they may have with their families and they relapse into alcohol and drug abuse. The key to offender community success is finding supports and services to address the cycle of substance abuse, unemployment, and criminal activity. Systemic reforms begun under the MPRI will provide a new framework for these services, which begin in prison and continue in the community. Safer neighborhoods and better citizens will result.

The major barriers and gaps preventing increased parolee success – and the specific outcomes that Michigan wants to achieve – are in the areas of alcohol and substance abuse treatment, employment, education, housing, welfare, and health care services. Removing these barriers and filling these gaps will increase the potential for long-lasting family reunification and community success. We are better preparing inmates for release, improving the parole process, and revitalizing the supervision of parolees in the community upon their release to address the issue of relapse prevention. But in order for parolee success to be sustained beyond the period of parole supervision, a new partnership inside and outside of state government is underway via the MPRI – a partnership built on a common vision and a shared understanding of what really works to help offenders who get out of prison stay out of prison.

The vision of the MPRI is that every prisoner released to the community will have the tools needed to succeed.

The mission of the 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 MPRI has two complementary goals:

- ***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.*

These goals will be achieved by implementing an MPRI Model that includes the following reentry strategies:

- State-of-the-art prisoner assessment and classification.
- Prison-based planning and programming aimed at sharply reducing risk of recidivism.
- Linkage between the prisons and the community that prepares inmates for release.
- Effective coordination and collaboration among community agencies to deliver supervision and services that reduce recidivism.
- Interagency information sharing.
- Performance-based management.
- System reforms based on evidence-based practices.

Key features of the process of the MPRI include:

- Improved prisoner transition planning by inclusion of all key stakeholders represented by the MPRI State Policy Team:
  - Health, mental health and substance abuse treatment.
  - Housing.
  - Workforce development.
  - Adult education.
  - Temporary economic support.

- The state departments of Corrections, Community Health, Labor and Economic Growth, Human Services and Education – along with local law enforcement and criminal justice agencies, victim's advocates, and public, private and faith-based community service providers – are all active stakeholders in the MPRI and in the local prisoner transition process.

- State and community partners in the MPRI are identifying and examining:
  - Common clients across agencies.
  - Practices and procedures that govern the transition of these clients back to the community.
  - Using improved practices at each of the seven decision points in the three-phase MPRI Model.
  - Families and intergenerational crime.

Expectations

The impact of the MPRI will be reduced crime, fewer victims, safer neighborhoods, better citizens, fewer returns to prison and reduced costs. Michigan is poised for success combining a strong mandate from the Governor, a powerful policy framework, and strong community buy-in. The challenge now is staged statewide implementation on an eventual scale of 10,000 inmates per year transitioning successfully from prison.

Since better offender parole plans will result from the MPRI, the parole approval rate is expected to increase modestly without jeopardizing public safety and the parole success rate will increase

as the MPRI is implemented and expanded statewide. One objective is to increase the parole approval rate by 2% each year as the parole board gains confidence in release outcomes. Another objective is to increase the success rate of MPRI participants by 6% by the end of FY 2006, and eventually by as much as 10% statewide when the MPRI Model is fully implemented.

An indicator of the potential improvement is Ohio's experience, where the percentage of successful parole discharges has improved 10% in two years, from 44% in 1999 to 54% in 2001.

There have already been successes in Michigan resulting from the MPRI:

- Intensive ReEntry Units (IRU) have served as a testing ground for MPRI practices, and the first IRU offender release cohort of 687 paroled IRU participants has yielded a 26% improvement in returns to prison so far, resulting in fewer crimes, fewer violations, and potential savings of more than 320 prison beds. (See footnote #19, Monthly Report.)

- The first official MPRI pilot site cohort began paroling in November and December, with 100% positive community supervision status at the end of the year. The size of each MPRI offender release cohort is scheduled to increase with each "wave" every 4-6 months, and each release cohort will benefit from fuller implementation of the complete MPRI Model.

- The first 21 mentally ill inmates have been identified for the MPRI Mentally Ill Inmate Demonstration Project, with Transition Accountability Plans (TAP) in progress and the first releases anticipated in late spring.

Detailed Description

The MPRI has been described nationally as the gold standard in prisoner reentry and Michigan is the first state in the nation to converge the three major schools of thought on prisoner reentry to develop and fully implement a comprehensive model of inmate transition planning. The MPRI Model:

- Begins with the three-phase reentry approach of the U.S. Department of Justice Serious and Violent Offender ReEntry Initiative (SVORI).

- Further delineates the transition process by adding the seven decision points of the National Institute of Corrections Transition from Prison to Community Initiative (TPCI) model.

- Is now incorporating into our approach the policy statements and recommendations from the Report of the ReEntry Policy Council that is coordinated by the Council of State Governments.

In this way, the MPRI represents a synergistic model for prisoner reentry that is deeply influenced by all of the nation's best thinkers on how to improve parolee success.

To develop the MPRI Model, Michigan has had the tremendous benefit of technical assistance grants from the National Governors Association (NGA) and the National Institute of Corrections (NIC) that provide substantial resources for consultation, research, training, and technical assistance. As a result of the grant from NGA, the MPRI is also utilizing zip-code level parolee mapping of Michigan conducted by the Urban Institute as part of our intensive strategic-planning process. As a result, the knowledge base created by the MPRI is unprecedented.

Michigan is also benefiting from financial support from the JEHT Foundation for purposes of implementing the local community coordination process, developing and implementing the evaluation plan and conducting the process and outcome evaluation. Strategic planning and technical assistance with operational development and evaluation preparation is also being provided by our partners at Public Policy Associates and the Michigan Council on Crime and Delinquency.

The Three-Phase, Seven-Decision-Point MPRI Model

The MPRI Model involves improved decision making at seven critical decision points in the three phases of the custody, release, and community supervision/discharge process.

- ***PHASE ONE – GETTING READY:*** The **institutional phase** describes the details of events and responsibilities that occur during the offender's imprisonment from admission until the point of the parole decision and involves the first two major decision points.

  1. ***Assessment and classification*:** Measuring the offender's risks, needs, and strengths.
  2. ***Inmate programming*:** Assignments to reduce risk, address need, and build on strengths.

- ***PHASE TWO – GOING HOME:*** The **transition to the community or reentry phase** begins approximately six months before the offender's target release date. In this phase, highly specific reentry plans are organized that address housing, employment, and services to address addiction and mental illness. Phase Two involves the next two major decision points.

  3. ***Inmate release preparation*:** Developing a strong, public-safety-conscious parole plan.
  4. ***Release decision making*:** Improving parole release guidelines.

- ***PHASE THREE—STAYING HOME:*** The **community and discharge phase** begins when the inmate is released from prison and continues until discharge from community parole supervision. In this phase, it is the responsibility of the former inmate, human services providers, and the offender's network of community supports and mentors to assure continued success. Phase Three involves the final three major decision points of the transition process.

  5. ***Supervision and services*:** Providing flexible and firm supervision and services.
  6. ***Revocation decision making*:** Using graduated sanctions to respond to behavior.
  7. ***Discharge and aftercare*:** Determining community responsibility to "take over" the case.

Risk & Needs Assessment in the MPRI Model – The COMPAS Assessment Tool

The variables and principles of the MPRI Assessment Instrument require that standardized, accurate and complete assessments of risk, needs and strengths be performed at prison intake and periodically thereafter (See Table 3). The assessments must identify the risk of failure for each offender and which programs, treatments and interventions will most effectively reduce each offender's risk of failure. Periodic reassessment must be done to ensure the degree to which each offender's risks and needs are being affected at each stage of the MPRI process from intake through discharge and aftercare. Further, assessment must be based on a measurement instrument that is accurate, affordable, understandable and useful for case planning and management. Assessments must be simple. Offenders must completely understand and buy into the process for it to be effective.

The MPRI will be using the COMPAS risk assessment instrument that addresses certain variables and key principles that underlie the Initiative, based on research that shows what works to reduce recidivism. COMPAS is a statistically-based, risk assessment tool designed for assessment of risk and needs factors in correctional populations, and for providing decision support to justice professionals in assessing offenders for community placement. COMPAS is automated, theory-driven and designed to assist practitioners in designing case management support systems for offenders in community placement settings.

A unique aspect of the COMPAS design is that it addresses four separate risk assessment systems: Violence, Recidivism, Flight, and Community Technical Violations. In addition, COMPAS has built multiple validity tests into the assessment instrument to improve reliability of the collected data. The COMPAS application is highly adaptable, with the ability to select the entire standard 22 risk and criminogenic scales, including Criminal Behavior, Needs and Social Factors, Personality, Cognition and Social Supports, Recidivism-related factors, and Validity scales.

Perhaps the most important aspect of the COMPAS, from an operational, service-delivery standpoint is that it addresses the principle of "responsivity" in that it is designed to build the Case Management Plan based on the unique needs, risks and strengths of the prisoner and leads to the successful match to programs during the pre-release phase of the MPRI.

The COMPAS system will provide the capacity to enable users to input data related to offender risk, needs and strengths, specifically in the areas of: Criminal Attitudes, Educational Achievement, Vocational Training and related abilities, Substance Abuse History, Criminal Associates/Family, Mental Health History, Housing/Neighborhood, and Employment History/Financial Stability.

Northpointe, Inc., which developed the COMPAS and is under contract with the MDOC, will routinely assess the collected data and assessment scales for internal validity, and present the outcomes study to the MDOC. "Known-group" analysis will also be conducted on the MDOC data as an additional validity measure in testing the differentiation between selected offender risk groups. MDOC staff feedback and administrative requirements will also be employed to enhance operational revisions at the early stages of the COMPAS tool implementation, including the potential inclusion of additional risk or need scales into the instrument.

Table 3

Key Variables for the MPRI Assessment Instrument

- Identifies needs and strengths and measure risk of recidivism.
- Is valid and reliable.
- Is useful for TAP, Case Management, and structured decision making.
- Is appropriate for repeated measures of dynamic factors and risks.
- Is accessible for data and data systems.
- Meets several resource requirements:

1. *Be cost effective,*
2. *Not negatively impact number of staff required to process,*
3. *Have feasible training requirements,*
4. *Have feasible impacts on work processing time,*
5. *Be highly adaptable*

Key Principles for the MPRI Assessment Instrument

- **Risk**: It is possible to predict which offenders present a greater level of risk of failure.
- **Need**: Parole failure can be reduced if factors that cause new criminal behavior (dynamic needs) can be changed through treatment, programs and addressing other needs.
- **Responsivity:** Different offenders respond positively to various treatments and methods of delivery and the selection of programs, treatments and interventions should be based on case specific factors. The assessment leads to the proper match of programs.
- **Grounded in Evidence Based Practices:** Treatment and program assignments and resources be allocated according to which have shown to be effective at reducing parole failure rates for specific groups of offenders.

Case Management and Transition Accountability Plans

The lynchpin of the MPRI Model is the development and use of Transition Accountability Plans (TAPs) at four critical points in the offender transition process that succinctly describe for the offender, the staff, and the community exactly what is expected for offender success. The TAPs, which consist of summaries of the offender's Case Management Plan at critical junctures in the transition process, are prepared with each inmate at prison intake, at the point of the parole decision, when the offender returns to the community, and when the offender is to be discharged from parole supervision. TAPs are concise guides for the inmates and staff:

- ***TAP1*:** The expectations for the prison term that will help inmates prepare for release.
- ***TAP2*:** The terms and conditions of offender release to communities.
- ***TAP3*:** The supervision and services offenders will experience in the community.
- ***TAP4*:** The elements of the Case Management Plan for eventual discharge from parole.

The Case Management Plans and TAPs are structured around a target release date that will be developed within the framework of Michigan's releasing authority, the Michigan Parole Board. The target release date is a cornerstone for transition planning. The target release date is not guaranteed; rather, it connotes a strong expectation that all parties—the facility, the releasing

authority, and the inmate—will abide by the terms of the plan, and that, if inmates achieve the elements summarized in the TAP and maintain good behavior while confined, then they will be released on the target release date.

The Case Management Plans and TAPs reduce uncertainty in terms of release dates, actions, and timing of actions that need to be taken by inmates, prison staff, the Parole Board, community supervision staff, and partnering agencies. Increased certainty will motivate inmates to participate in the rehabilitation process and to become engaged in fulfilling their responsibilities. Additionally, they will help ensure that all parties are held accountable for timely performance of their respective responsibilities. In essence, the Case Management Plans and TAPs reflect concerns for accountability, public safety, restoration, treatment, and offender success that will be built into the policies that result from the implementation of the emerging MPRI Model.

NIC suggests seven principles for the Case Management Plan and TAP process that the MPRI has embraced:

1. The process starts during an offender's classification soon after admission to prison and continues through ultimate discharge from community supervision.

2. The Case Management Plan and TAP define programs or interventions to modify an individual offender's dynamic risk factors that were identified in a systematic assessment process.

3. The documents are sensitive to the requirements of public safety, and to the rational timing and availability of services. The MPRI vision expects every inmate to have access to programs and services to modify dynamic risk factors. In this system that is so constrained by finite resources, the MPRI will rationally allocate access to services and resources using risk-management strategies and the principles of Evidence-Based Practices as the basis for that allocation.

4. Appropriate partners will participate in the planning and implementation of an individual offender's Case Management Plan and TAP. These will include the offender, prison staff, Parole Board and parole supervision representatives, victims, the offender's family and significant other, human service agencies, and volunteer and faith-based organizations.

5. Individual Case Management Plans and TAPs delineate the responsibilities of offenders, correctional agencies, and system partners in the creation, modification, and effective application of the plans and hold them accountable for performance of those responsibilities.

6. Case Management Plans and TAPs provide a long-term road map to achieve continuity in the delivery of treatments and services, and in the sharing of requisite information, both over time and across and among agencies.

7. A case management process is used to arrange, advocate, coordinate, and monitor the delivery of the services defined in the TAP that are needed to manage risk, address needs, and build on offender's strengths.

Local Organizational Structure of the MPRI: Communities Dedicated to Increasing Parolee Success

The plan for statewide implementation of the MPRI Model is structured using a pilot-testing model. Over a three-year period, the entire state will implement the MPRI Model beginning with the eight Pilot Site communities that are now fully engaged with the first MPRI offender release cohort. These eight sites mark the beginning of the implementation of the MPRI Model. During fiscal year 2006, another seven pilot sites are already starting to incorporate the lessons learned from the first set of Pilot Sites, working toward a total of 15 fully operational jurisdictions covering 75% of the state. During the third year, the rest of the state will begin implementation.

Pilot sites are organized under a structure that parallels the statewide initiative. Each Pilot Site has three key groups of stakeholders that are instrumental to the wide range of activities needed for full implementation of the MPRI Model.

- **Local ReEntry Advisory Council:** Advises, informs, and supports the implementation process along the same lines as the statewide MRPI Advisory Council. These councils are created for the purpose of building support for the local implementation of the MPRI Model and work to educate the community on how the Initiative will create safer neighborhoods and better citizens. Each Advisory Council may have as many as 150 members.

- **Steering Team:** Develops, oversees, and monitors the local implementation process and coordinates local community involvement in the overall statewide MPRI development process. The Steering Team is lead by three co-chairs:

    - The **Warden** of a local prison from where the inmates transition to parole.

    - A **Parole Supervision Representative** from the local MDOC Field Operations Administration office.

    - A **Community Representative** drawn from the large number of faith-based and community-based organizations who are leading the local effort.

    Each Steering Team includes representatives or service providers associated with the MPRI partner government agencies representing the service modalities that must be included in successful re-entry planning. These representatives are active on the Steering Team because of the strong mandate from the Governor for multi-agency collaboration and participation as well as agency leaders encouraging and empowering their active participation.

    The three co-chairs of the Steering Team work directly with the Community Coordinator that is assigned to their jurisdiction and may be housed in the local parole office. The Community Coordinator, in one sense, "staffs" the Steering Team under the guidance of the three co-chairs. It is expected that the parole representative co-chair of each Steering Team acts as the "single point of contact" for interaction between the local group and the

state organizers so that direct and frequent communication is possible. The specific responsibilities and role of the Community Coordinator are described in the next section.

- **Transition Team:** Supports offenders in the transition planning process and guides the offender from the institution back into the community through a case-management approach. The Transition Teams are comprised of key local service providers, drawn from the membership of the Steering Teams, whose major responsibilities include the local and essential input needed to develop and implement the Transition Accountability Plans for the ReEntry (TAP2), Community Supervision (TAP3) and Discharge (TAP4) Phases. The Transition Team is led by the Field Operations Administration parole representative – who also serves as one of the co-chairs of the Steering Team – since the function of the parole officer is to work toward parolee success under a case-management model. (Although the case-management work of the future will be guided by Evidence-Based Practices.)

The challenges now are to continue implementation utilizing the carefully crafted models and structures developed by MPRI and to begin testing the validity of these assumptions.

Coordinating Community Development: The Heart of MPRI

Strong and sustained local capacity is the single most critical aspect of the MPRI implementation process. The Pilot Site communities will become dedicated champions of improved offender re-entry that will result in less crime through determined and specific preparation for inmates who will transition back to their communities. Local efforts at education, training, planning, and implementation need significant guidance and support in order to build the capacity for system reform. Each Pilot Site has a local Community Coordinator to help the community effectively prepare for offender re-entry while MDOC is better preparing inmates for release.

Community convening and organizing will serve to elicit community buy-in and investment, planning for sustainability, and ensuring quality results throughout the transition process. The Community Coordinators receive training and technical support so that they are clear on how to manage the process based on the MPRI Model. The involvement of Michigan's communities in the MPRI revolves around three focus areas:

- **Focus Area One:** Coordination and communication regarding the evolving design of the MPRI Model so that each of the seven primary decision points is deeply influenced by the community perspective. The iterative process of refining the Model requires open communication and effective coordination to ensure that community input is captured, the community has an accurate understanding of the Model, and expectations for implementation are clearly defined.

- **Focus Area Two:** Facilitation and coordination regarding the identification of: (1) community assets that can be applied to improve parolee success, (2) policy and operational barriers among state and local agencies, and (3) service gaps that can be filled with state, federal, and local funding.

- **Focus Area Three:** The design and implementation by local Pilot Sites of Comprehensive ReEntry Plans to provide the framework, rationale, and funding for improved policies,

practices, and programs whose success will be measured by reduced crime and fewer parolee returns to prison.

The above discussion summarizes the key features of the MPRI Model now being implemented as round one at the first seven Pilot Site Facilities and in the first eight Pilot Site communities. As each subsequent offender release cohort transitions to parole under the MPRI, is it expected that more and more of these features will become fully developed and implemented, with progressively better offender outcomes as a result. The plan for evaluation is described below.

IV. Performance Measurement & Evaluation of the Recidivism Rate Reduction Plan

The objective of evaluating the recidivism reduction plan is to learn as much as possible about what works as hoped, what does not, and how to further improve the MPRI. This implies understanding both the *results and outcomes* of the work and the *process of implementation*. Measuring the *outcomes* determines whether the direction and magnitude of change is meaningful, and assessing the processes of implementation addresses how the results were achieved. Evaluation results will be fed constantly back to policy makers, MPRI architects, and staff in the field. By injecting these results frequently, the MPRI can be refined and improved. Lessons learned from the earliest implementation efforts can be applied to later efforts and across sites. Thus, the evaluation is not simply an academic exercise. Rather, it is a critical element of the MPRI that will contribute important knowledge to it.

Key *outcome measures* to be used by the evaluation include:

- Reducing offender recidivism as defined by 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.

Positive results for these three measures will, in turn, lead to such long-term *impacts* as:

- Safer communities and prisons.
- Lower prison costs than the system would otherwise have incurred.
- More offenders leading constructive lives.

Evaluation Plan

The evaluation plan includes both formative and summative evaluation. It is important that both approaches be included because the MPRI is being implemented using a pilot-testing approach. The assessment of processes and outcomes during the early stages of the evaluation will form the basis for adaptation and implementation of additional sites and, ultimately, statewide application of the final MPRI Model.

The MPRI Evaluation Plan has five goals:

1. Document the policy-development and implementation processes; capture all important lessons learned from the MPRI.

2. Determine effectiveness of the MPRI as measured through the long-term outcomes of less recidivism and increased time before return to prison.

3. Inform improvements (both in policy and in practice) within the MPRI community, with MDOC and other state partners, and within the service-provision network.

4. Equip policy makers and funding sources with the data needed to make effective decisions.

5. Raise awareness and increase understanding of the prisoner transition process.

Evaluation Strategies

These goals will be achieved within the framework of two evaluation strategies:

1. To conduct a short-term formative and summative evaluation of the community-coordination strategy and its impact on returning offenders.

2. To conduct a comprehensive, long-term formative and summative evaluation of the overall effectiveness of the MPRI, including both process and impact measures.

Conducting the Evaluation

JEHT Foundation support is being used to fund an Independent Evaluator and an Evaluation Coordinator to perform the tasks associated with the evaluation. The Independent Evaluator will conduct the evaluation and the Evaluation Coordinator will coordinate the evaluation. The Independent Evaluator is responsible for taking the ideas presented in the evaluation goals and strategies and creating the evaluation plan by developing the tasks and processes necessary to conduct an effective evaluation that meets our goals. The evaluation plan must incorporate the following elements:

- Preliminary Logic Model (Appendix A)
- Priorities for Evaluation (Appendix B)
- Formative (Process) Evaluation
- Individual Program Outcomes Evaluation
- Outcome (Summative) Evaluation

Formative (Process) Evaluation

The seven MPRI decision points should provide the framework for evaluating the process of implementation. Testing the MPRI Model implies that each of the seven decision points will be evaluated and improved based on the results of the formative evaluation. The process evaluation will include at a minimum:

- *National Program Assessment and Best Practices Analysis.* A national program assessment and best practices analysis will be conducted with the goal of designating programs with demonstrated effectiveness as "ReEntry Approved Programs." Information from the Individual Program Outcome Evaluation will also be incorporated into the rubric for determining which programs are "ReEntry Approved."

- *Program Fidelity*. Measures of program fidelity will be developed to ensure programs were implemented as planned.

- *Offender Participation*. Quantitative and qualitative methods will be used to measure offender participation.

- *Assets, Gaps, and Barriers Assessment*. Ongoing assessment of assets, gaps, and barriers to local reentry efforts will be evaluated to inform the deployment of additional resources.

- *Measurement of intermediate system outputs.* For example, system outputs may include:

    - The number of cases with Transition Accountability Plans (TAPs) and Case Plans.
    - The number of offenders with critical documents at parole/discharge.
    - The number of offenders placed in "appropriate" (definition to be developed) housing programs as well as program and treatment involvement during parole and after discharge.
    - Changes to offender risk/needs profiles, etc.

Individual Program Outcome (Formative and Summative) Evaluations

This aspect of the research and evaluation will focus on the contribution of individual programs, treatments and interventions (e.g., assaultive offender program, sex offender therapy, cognitive therapy, substance abuse treatment, vocational/educational programs), and the overall impact on offender risk and recidivism. It is important to recognize that programs, treatments and interventions will likely be determined to be more effective in concert with one another, as implementation in isolation has seldom demonstrated overwhelming individual effectiveness independent of all other offender problems and needs also being addressed. This work will be managed using expanded staff in the DOC Office of Research and Planning with assistance from a consortium of Michigan universities.

The purpose of the program-level outcome evaluation is to understand which programs or combinations of programs are most effective at reducing offender risk and decreasing recidivism. Central to using Evidenced-Based Practices is the understanding of which programs, driven by an outcome evaluation, are most effective. Few programs in Michigan have been thoroughly assessed for their ability to reduce offender risk and decrease recidivism; however, if effective programming is not used within the institution, recidivism will not likely be affected. As part of this, another purpose of the program-level outcome evaluation is to generate quantifiable impacts to incorporate into the COMPAS risk/needs assessments. Once the program outcome evaluations have been completed, programs will be designated "ReEntry Approved" because of their demonstrated effectiveness and will be replicated across institutions where appropriate.

Outcome (Summative) Evaluation

The primary focus of the outcome evaluation will be on the measurement of offender recidivism and behavior following release from prison. In addition, the study will need to include components to assess:

- Which decision points are being implemented at each Pilot Site.

- Whether shifts in gaps and barriers to reentry have been achieved as a result of community-coordination efforts.

- The results of the Community Development effort in terms of improved access and connection of offenders to needed services.

- The number and characteristics (including risk and needs) of offenders participating at each Pilot Site.

- The use of a valid and reliable assessment instrument.

- The extent to which offender case planning is being done according to principles of risk management and criminogenic need and facilitates agency and offender accountability.

- The occurrence of expected intermediate outcomes, including improved housing, employment, family reunification, health care, mental health and substance abuse treatment, etc.

Inclusion of measures for the process and outcome evaluation will ensure that, in addition to establishing changes in offender recidivism, the changes can be reliably attributed to the effects of various aspects of the MPRI.

The outcome evaluation will be implemented in several stages, consistent with the phase and schedule for the MPRI. The first stage includes the following elements. Each subsequent stage will build on the previous stage, until the MPRI has been fully implemented and a statewide impact evaluation can be completed.

- Development of baseline measures.
- Design and implementation of data-collection methods to establish baseline data for each Pilot Site.
- Analysis of short-term outcomes for the first eight Pilot Sites.
- Baseline data collection for the second seven Pilot Sites.

While the final design and methodology of the outcome evaluation will be developed in collaboration with the Independent Evaluator, it is expected that assessment of outcomes will employ multiple methodologies, including:

- Before and after comparisons.
- Trend analysis (interrupted time series/regression discontinuity).
- Comparison groups matched on Pilot Site selection criteria and other critical predictors of recidivism.
- Comparison to similar sites, where possible (especially Wayne County).
- Meta-analysis of Pilot Site evaluations.

Coordinating and Managing the Evaluation

The independent evaluation of the MPRI is expected to proceed in separate, but coordinated, stages and will be developed by an Independent Evaluator retained and overseen by Public Policy Associates (PPA). In addition to retaining an Independent Evaluator, PPA will create a position of Evaluation Coordinator who will be responsible for the following tasks:

- ***Task 1.*** *Retain independent evaluation consultant.* Working in close collaboration with MDOC, the PPA Evaluation Coordinator will conduct a competitive process to identify an independent evaluation consultant. This process will include development of selection criteria, creation and circulation of a solicitation, creation of a review and scoring process, coordination of a proposal review committee, and management of the review and selection process. The independent evaluator must meet the guiding principles of ethical evaluation as described by the American Evaluation Association (AEA). These principles can be accessed on the AEA web site (http://www.eval.org/Guiding%20Principles.htm.).

- ***Task 2.*** *Oversee the work of the independent evaluation consultant.* The Evaluation Coordinator will be the principal point of contact between the Evaluator and the MPRI. The coordinator will work closely with the evaluator to:

    - Develop the evaluation design.
    - Link the evaluator to needed MPRI information and resources.
    - Assure timely completion of key tasks.
    - Review deliverables prior to circulation to the MPRI team.
    - Provide feedback regarding the evaluation process and results.
    - Link the evaluation results to MPRI improvement.

- ***Task 3.*** *Serve as principal link between the independent evaluation consultant and the MPRI.* The Evaluation Coordinator will encourage all participants in the MPRI in the prisons and in the communities to embrace the evaluation as a tool for quality improvement and effective management. This will include:

    - Working with the evaluator to develop materials and workshops as necessary to inform participants about the benefits of evaluation.
    - Resolving any conflicts that might arise between the evaluator and participants.
    - Disseminating evaluation results to all relevant stakeholders.

Some of the groups of people that will be able to utilize the evaluation results at the local, state, and national level are listed below.

- Policy makers
- Service providers
- Offenders
- Families
- Victims
- Law enforcement officers
- Courts
- Correctional practitioners
- Funding sources
- Faith- and community-based organizations

The evaluation will be used by a variety of stakeholder groups for many purposes. For example, national reentry stakeholders will use the evaluation results differently than will policy makers or local Pilot Steering Teams.

- **National ReEntry Stakeholders.** The growing national reentry movement will find value in the evaluation findings conducted by the MPRI. Because so little empirical evidence exists regarding reentry theories, the evaluation will be vital to the field at large.

- **State Policy Team.** The State Policy Team will put to work the report that consolidates the findings to shape statewide policies and practices for the MPRI and to influence the practices of each state agency involved in the Initiative.

- **Pilot Steering Teams.** Local Pilot Steering Teams will need individual site reports to improve the efforts in their jurisdictions. The local use of the evaluation findings will profoundly affect individual offenders as they seek to transition into thriving members of the local community.

- ***Task 4.*** *Develop a plan for ongoing evaluation of the MPRI.* Working very closely with the Evaluator and the DOC Office of Research and Planning (ORP), the Evaluation Coordinator will develop a long-term plan for data collection, monitoring, and evaluation of MPRI. This will include a plan for the transition of evaluation responsibility from the Independent Evaluator to the ORP following completion of the independent evaluation.

V. MPRI Reporting on Status and Recidivism Levels

The appropriations boilerplate requirement for a monthly status report on offender MPRI participation and recidivism levels will be used as a vehicle to summarize the status of the MPRI implementation, the MPRI evaluation, and recidivism reduction plan results.

Appendix A

Preliminary Logic Model for Evaluation Planning

GOALS:

1. Document policy development and implementation processes; capture all important lessons learned from the MPRI.
2. Determine effectiveness of the MPRI as measured through the long-term outcomes of recidivism and time before return to prison.
3. Inform improvements within the MPRI community, with MDOC and other state partners, and within the service-provision network.
4. Equip policy makers and funding sources with the data needed to make effective decisions.
5. Raise awareness and understanding of the prisoner transition process.

STAKEHODLERS: The groups of people that will be able to utilize the evaluation results at the local, state, and national level.

- Policy makers
- Service providers
- Offenders
- Families
- Victims
- Law enforcement officers
- Courts
- Correctional practitioners
- Funding sources
- Faith- and community-based organizations

Outputs: Process Measures	Short-Term Outcome Measures	Long-Term Outcome Measures	Impacts
Public Safety Department of Corrections			
• Inmate preparation for release is standardized from prison to prison	➢ Prison-wide inmate prep process	➢ **Recidivism is reduced** ➢ **Reducing the # of supervision violations by parolees**	➢ Safer Prisons
• Objective risk assessment included in rehab process	➢ Volunteer-based ed/voc ed programs		
• Cooperative management of offenders spanning Field Operations Administration and Correctional Facilities Administration	➢ Objective risk, need, and strength assessments		
• Evidence-based transition plans to increase chances of parole	➢ Needs-based transition plans		
• Prison volunteers focused on re-entry preparation	➢ Risk management improved through services		
• State agencies that provide services involved in re-entry	➢ ID, AOD, housing, health, welfare services addressed in transition plans		
• IDs & federal program eligibility addressed in prison	➢ More rapid accessibility to services following release		
• Postrelease supervision ensures relapse prevention	➢ Parole agents trained in relapse-intervention techniques		
Human Services Department of Community Health			
• Decrease delays in assessment and referral	➢ Timely assessment and referral		➢ Better Citizens
• Utilize effective interventions	➢ Improved compliance/outcome		
• Reduce treatment waiting lists	➢ Increased ability to meet needs		
• Comprehensive, resource-rich supervision response	➢ Improved access to treatment		
• Type and length of treatment is controlled	➢ Parole plan includes AOD services		
• Release decision takes place with specific services available	➢ Increase access to services		

Appendix A

Preliminary Logic Model for Evaluation Planning

Outputs: Process Measures	Short-Term Outcome Measures	Long-Term Outcome Measures	Impacts
Health Services Department of Community Health			
• Decrease delay in access to services	➢ Improved access to services	➢ **Time before return to prison is increased**	➢ Safer Communities
• Direct referral for needed services	➢ Medicaid eligibility triggered at release		
• Increase treatment options for dual-diagnosis offenders	➢ Timely intervention to address needs		
• Suspend, rather than terminate, Medicaid eligibility	➢ Improved employment rates		
• Physical/mental health needs fully identified before release	➢ Improved parole success rates		
Employment Department of Labor & Economic Growth			
• Better employment options	➢ Adequate employment to provide income		
• Offenders gain employment-readiness skills	➢ Improved payment compliance		
• Incentives for offenders willing to participate in training	➢ Improved employment rates		
Education Department of Labor & Economic Growth			
• Inmates gain fundamental skills/literacy upon release	➢ Education addressed in TAP		
• Gain needed educational entry-level degrees for employment	➢ Improved employment capability		
• Educational services specified in TAP	➢ Improved educational attainment		
Housing Department of Labor & Economic Growth			
• Safe, crime-free, commercial housing	➢ Prevent "association" violations		
• Special problem cases have placement options	➢ Improved supervision conditions		
• Sex offenders gain accessibility to housing	➢ Address basic needs		
Family Reunification and Support Department of Human Services			➢ Stronger Families
• Decrease delay in access to DHS services	➢ Timely delivery of critical services		
• Direct referral source for family counseling needs	➢ Family preparation of release		
• Parole plan addresses family reunification and support issues	➢ Relapse prevention		
• Plan to address issues of inmate returning to home	➢ Break the cycle of domestic violence		
Victims and Survivors			
• Include victims and survivors of crime in the MPRI	➢ Increased community restoration		

Appendix B

Priorities for Evaluation

- **Performance Measurement.** A committee comprised of Michigan Department of Corrections (MDOC) Office of Research and Planning (ORP) staff and staff from the other MPRI partner departments will work in coordination with MPRI Work Groups and Pilot Site leadership to produce a set of standardized performance measures for State Policy Team (SPT) review and approval. These measures will guide all aspects of Michigan Prisoner ReEntry Initiative (MPRI) research and evaluation. *Appendix A: Preliminary Logic Model for Evaluation*, illustrates aspects including process measures, outputs, and intermediate and long-term outcomes and impacts. The identification of the measures will thus facilitate assessment of implementation, program integrity, offender participation and performance, establishment of effective state and local collaborative networks, and other critical aspects of the MPRI Model.

- **Evidence-Based Practices.** All MDOC, state department, and partner agency staff will be trained in the principles of Evidence-Based Practices (EBPs) as part of a statewide effort to institute EBPs as the underlying philosophy for the MPRI and our work with inmates and parolees. The implementation of EBPs will ensure that all components of the MPRI Model are solidly grounded in research findings and that MPRI is guided by the principles of Risk Assessment and Management, Targeted Interventions, and Dynamic Measurement and Feedback. Consistent with these principles, major programs, treatments and interventions will be evaluated to determine their effects on offender Risk and behavior. The National Institute of Corrections (NIC) is providing some technical assistance for training and strategic planning to help Michigan achieve the integration of EBPs and the MPRI.

- **Risk, Needs, and Strengths Assessment.** As one of the primary elements of EBPs, the MPRI will work with an outside contractor to implement, norm, validate, and adapt a standardized Risk, Needs, and Strengths Assessment Instrument. Included in that effort will be the development of dynamic assessment capabilities to assess the impact of programs, treatments, and interventions and integrate those impacts into ongoing assessment for offenders as they progress through the system from intake to transition to community supervision to discharge. As a related item, other risk-based assessments, such as Parole Guidelines, parole supervision and violation guidelines, and discharge decision making will be examined to determine if they can be integrated into the overall Assessment process. The MDOC and the Michigan Department of Labor and Economic Growth (MDLEG) have received a U.S. Department of Labor grant to begin this process in fiscal year (FY) 2005 and will fund the second year of activity (estimated at $200,000) with private foundation and/or federal funds.

- **Data Systems Development.** The development and adaptation of existing MDOC, other department, and other partner agency data systems will be critical to the efficient management of MPRI and to the ability to conduct meaningful evaluations. As part of the development, data and information needs, current data sources, mechanisms (and potential legal and technical impediments) for data and information sharing will all be assessed and strategies to enhance capabilities will be devised. The development and adaptation of existing data systems is a long-term process that requires enormous investment on the part of state and local agencies to achieve full integration; however, the initial mapping of data systems will occur during the period of performance for the JEHT Foundation grant (June 2005–September 2007). This data map will inventory which agency has what pieces of data that will be useful to the evaluation and how the data is collected by each agency. This information will also inform the strategy for integrating data across systems. The MDOC will be requesting technical assistance from NIC that will enable us to work with their re-entry partner, Abt Associates, Inc. on this issue.

REPORT TO THE LEGISTATURE
Pursuant to P.A. 154 of 2005
Section 409
Prisoners Who Have Served Their Maximum Sentence
February 2006

Section 409 of 2005 P.A. 154 requires that the Department of corrections provide a report on prisoners who have served their maximum sentence and have been released from prison in the last five year, including detailed information regarding:

- Comparison of the number of offenders who were paroled and returned to prison prior to serving their maximum sentence to the number of offenders who served their maximum sentence without ever having been paroled
- Number of offenders who served the maximum sentence disaggregated by major offense type: sex, other assaultive, drug, and other nonassaultive
- Educational history and the number of vocational certifications while in prison
- Comparison of each offender's original offense to the offender's new offense by major offense type (sex, other assaultive, drug, and other nonassaultive) for offenders who have since returned to prison with a new commitment after previously serving a maximum sentence.

I. Comparison of the Number of Offenders Who Served Their Maximum Sentence and were Release in 2001-2005

Section 409(a) of 2005 P.A. 154 requires that the department report on the number of offenders who were paroled and returned to prison prior to serving their maximum sentence compared to the number of offenders who served their maximum sentence without ever having been paroled.

All prisoners who have served their maximum sentence and have been released from prison between January 1, 2001 and December 31, 2005 are counted. If the prisoner did not have a parole since the latest commitment date prior to the date released on the maximum then the prisoner was characterized as "Never Paroled". Otherwise, the prisoner is counted as "After Parole Violation".

Discharges on the Maximum Sentence

Calendar Year	After Parole Violation	Never Paroled
2001	687	942
2002	686	1,013
2003	662	1,052
2004	543	1,382
2005	498	1,431

SOURCE: 2/15/06 CMIS

The number of prisoners released on their maximum after return for a parole violation decreased from 687 to 498 over the past five years. On the other hand, the number of prisoners released after serving their maximum term without a parole has increased over the past five years. The increase in the number of prisoners released on their maximum without a parole from 942 in 2001 to 1,431 in 2005 can in part be explained by the increase in the number of prisoners sentenced from Wayne County for a Felony Firearm sentence which carries a flat two year determinate sentence. Since there is no minimum sentence for Felony Firearm there is no provision or opportunity for parole from these sentences, as the entire term must be served in a secure facility. The following table illustrates that in 2001 twenty-one prisoners from Wayne County were released after serving the Felony Firearm Sentence of two years. This number increased to 403 that were released in 2005.

Prisoners Discharged on the Maximum Sentence for Felony Firearm (Gun Law)

(Flat Two Year Determinate Sentence)

Calendar Year	Wayne	Outstate	Total
2001	21	20	41
2002	38	23	61
2003	111	25	136
2004	354	42	396
2005	403	40	443

SOURCE: 2/15/06 CMIS

II. Number of offenders who served the maximum sentence disaggregated by major offense type

Section 409(b) of 2005 P.A. 154 requires that the department report on the number of offenders who served the maximum sentence disaggregated by major offense type: sex, other assaultive, drug, and other nonassaultive in 2001-2005.

Discharges on the Maximum Sentence

Offense Type

Calendar Year	Sex	Other Assaultive	Drug	Other Nonassaultive	Total
2001	307	464	147	711	1,629
2002	347	497	114	740	1,698
2003	393	464	103	754	1,714
2004	386	574	86	879	1,925
2005	436	538	59	896	1,929

SOURCE: 2/15/06 CMIS

NOTE: The Felony Firearm (Gun Law) cases are in the "Other Nonassaultive" category

With the decease in parole rate for sex offenders and other assaultive offenders, we would expect an increase in the number of these offenders discharged on their maximum sentence. Similarly, with an increase in the parole rate of drug offenders the number of drug offenders discharged on their maximum has decreased.

The increase the number of other nonassaultive offenders discharged on their maximum sentence entirely accounted by the fact of the increase in the number of Felon Firearm cases (which are categorized as "other nonassaultive" as discussed in the prior section. Excluding the 41 Felony Firearm cases in 2001 leaves 670 other nonassaultive prisoners discharged on their maximum compared to 453 (896 minus 443 Felony Firearm cases) in 2005. Therefore, excluding Felony Firearm cases the other nonassaultive offenders discharged on their maximum has decreased in the past five years.

Furthermore, the number of assaultive (sex and other assaultive) offenders discharged on their maximum sentence has increase and the number of non-assaultive (drug and other nonassaultive) and not Felony Firearm offenders has decreased each year for the past five years.

III. Educational History and the Number of Vocational Certifications while in Prison

Section 409(c) of 2005 P.A. 154 requires that the department report on the educational history of those offenders, including how many had a G.E.D. or high school diploma prior to incarceration in prison, how many received a G.E.D. while in prison, and how many received a vocational certificate while in prison.

Information was gathered using MDOC's Offender Educational Tracking System (OETS) computer system and an extensive file review to determine High School Diploma/G.E.D. and vocational certificate. Since there is no expected difference over the years in the rate of prisoners receiving the G.E.D. or High School Diploma prior to the current term and in the current term, the prisoners who maxed out in 2005 were used to compile the data needed for Public Act 154 of 2005, Section 409(c) requirement. In addition, the OETS computer system is a new system and prisoners who maxed out in prior years are not in the database.

A random sample of 545 out of 1,929 prisoners who maxed out in 2005 was used to estimate the number of prisoners who

1. Received G.E.D. or High School Diploma prior to current term
2. Received G.E.D. in current term
3. Received Vocational Certificate in current term.

Information was gathered using MDOC's OETS computer system and an extensive file review to determine High School Diploma/G.E.D. and vocational certificate.

Prisoners Who Have Served Their Maximum Sentence
Releases in 2005* by
Educational History and Vocational Certification
(Estimated from a Random Sample of 545 Cases)

Received G.E.D. or High School Diploma Prior to Current Term	Received G.E.D. in Current Term	Received Vocational Certificate in Current Term
766 (39.7%)	419 (21.7%)	154 (7.9%)

SOURCE: 2/2006 OETS and Prisoner Files

* The numbers were computed upon a random sample of 545 cases; educational history based upon 506 cases (excluded 39 cases with missing information).

Almost four out of ten (39.7%) offenders who are discharged on their maximum had received their G.E.D. or High School Diploma prior to their commitment for their current term. Over two out of ten (21.7%) received their G.E.D. during their current term. Therefore, over six out of ten (61.4%) of the offenders who were discharged on their maximum had a High School Diploma or G.E.D. at the time of their discharge. In addition, 7.9% received vocational certification.

IV. Comparison of each offender's original offense to the offender's new offense

Section 409(d) of 2005 P.A. 154 requires that the department a report on a comparison of each offender's original offense to the offender's new offense by major offense type (sex, other assaultive, drug, and other nonassaultive) for offenders who have since returned to prison with a new commitment after previously serving a maximum sentence.

In the following table the number of max out cases that are returned to prison in the earlier years is larger is because the cases released in the earlier years have a higher exposure risk – they have been out longer. For example, prisoners who were release in January 2001 would have over five years at risk compared to prisoners who were release end of December 2005 would have less than two months at risk.

All Returns to Prison Following Discharge on the Maximum Sentence*

Calendar Year	Original Offense From Which Served Maximum Sentence	New Offense Following Discharge on Maximum: Sex	Other Assaultive	Drug	Other Nonassaultive	Total
2001	Sex	16	10	1	21	48
	Other Assaultive	10	49	11	40	110
	Drug	1	12	11	16	40
	Other Nonassaultive	9	78	21	119	227
	Total	36	149	44	196	425
2002	Sex	11	13	2	16	42
	Other Assaultive	5	50	7	30	92
	Drug	2	2	7	5	16
	Other Nonassaultive	4	57	15	97	173
	Total	22	122	31	148	323
2003	Sex	12	12	3	6	33
	Other Assaultive	3	23	6	32	64
	Drug	0	8	2	6	16
	Other Nonassaultive	4	44	8	73	129
	Total	19	87	19	117	242
2004	Sex	8	4	0	3	15
	Other Assaultive	2	18	5	14	39
	Drug	0	4	3	4	11
	Other Nonassaultive	2	20	3	47	72
	Total	12	46	11	68	137
2005	Sex	1	1	2	3	7
	Other Assaultive	1	10	0	6	17
	Drug	0	0	0	0	0
	Other Nonassaultive	0	1	1	9	11
	Total	2	12	3	18	35

SOURCE: 2/15/06 CMIS

* Includes all returns to prison so far through February 14, 2006 for cases discharged on the maximum sentence from 2001-2005.

In the above table we had a total of 425 prisoners who were discharged on the maximum sentence in 2001 and subsequently returned to prison. Of that 425 prisoners 48 prisoners original offense from which they served their maximum sentence was for a sex offense. Out of this 48 offenders 16 (one out of three) new offenses was for a sex offense, too. Furthermore, these 16 offenders accounted for 16 out of 36 new sex offenses from the group of offenders who were discharged on their maximum sentence during calendar year 2001.

REPORT TO THE LEGISLATURE
Pursuant to P.A. 154 of 2005
Section 407 (2)
Prisoner Reintegration Programs Report
March 2006

Section 407 (2) of 2005 P.A. 154 requires that the Department of Corrections provide a report on prisoner reintegration programs, including the following information:

- Allocations and projected expenditures for each project funded, and for each project to be funded, itemized by service to be provided and service provider,
- An explanation of the objectives and results measures for each program,
- An explanation of how the programs will be evaluated,
- A discussion of the evidence and research upon which each program is based,
- A discussion and estimate of the impact of prisoner reintegration programs on re-offending and returns to prison, and
- A progress report on applicable results of each program, including, but not limited to, the estimated bed space impact of prisoner reintegration programs.

Prisoner reintegration programs are one of the major components of the implementation of the Michigan Prisoner ReEntry Initiative (MPRI). There is now powerful evidence that offenders fail in the community when their inability to secure employment, adequate housing, and health care – especially substance abuse and mental health treatment – breaks whatever bonds they may have with their families and they relapse into alcohol and drug abuse. The key to offender community success is finding supports and services to address the cycle of substance abuse, unemployment, and criminal activity. Systemic reforms begun under the MPRI will provide a new framework for these services, which begin in prison and continue in the community. Safer neighborhoods and better citizens will result.

The major barriers and gaps preventing increased parolee success – and the specific outcomes that Michigan wants to achieve – are in the areas of alcohol and substance abuse treatment, employment, education, housing, welfare, and health care services. Removing these barriers and filling these gaps will increase the potential for long-lasting family reunification and community success. We are better preparing inmates for release, improving the parole process, and revitalizing the supervision of parolees in the community upon their release to address the issue of relapse prevention. But in order for parolee success to be sustained beyond the period of parole supervision, a new partnership inside and outside of state government is underway via the MPRI – a partnership built on a common vision and a shared understanding of what really works to help offenders who get out of prison stay out of prison.

The vision of the MPRI is that every prisoner released to the community will have the tools needed to succeed.

The mission of the 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 MPRI has two complementary goals:

- ***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.*

Prisoner reintegration programs are critical to achieving these goals via the MPRI Model. MPRI funding is available to support activities within 16 service areas:

- Housing
- Workforce Development
- Employment Services
- Substance Abuse Treatment
- Mental Health Treatment
- Transportation
- Health Care
- Family Support
- Life Skills Programs
- Adult Education
- Domestic Violence Services
- Sex Offender Services
- Victim Services
- Entitlement Programs
- Law Enforcement Services
- Prison In-Reach & Transition Accountability Plan Development

I. Allocations and Projected Expenditures for Prisoner Reintegration Programs

In FY 2006, four prisoner reintegration program projects are funded for a total of $12 million within the MDOC budget to implement the MPRI Model:

1) $5 million for the first eight Pilot Sites for parolee services in the areas of housing and employment; alcohol, drug addiction, and mental health services; community coordination and activities and management of local "Comprehensive Prisoner ReEntry Plans" for each community. In anticipation of approval by the Legislature of the Governor's recommendation for MPRI funding, the MDOC Policy and Strategic Planning Administration worked with the MPRI partners at Public Policy Associates and the Michigan Council on Crime and Delinquency to develop and promulgate an application for FY 2006 funds that required a local "comprehensive re-entry plan" for

each community. These grant requests were reviewed and approved for funding for FY 2006 in the amount of $625,000 for each of the first eight Pilot Sites.[1]

2) $3 million for a statewide Mentally Ill Inmate ReEntry Demonstration Project. This Request for Proposal required special creativity as the interaction between the prison system and the mental health system has historically been very difficult. We have approved a contract to demonstrate how to achieve success with this difficult population.

3) $3 million for Parolee Reintegration Services in the areas of residential, day reporting, and other services. Again, in anticipation of funding approval, several grants had been prepared for approval including residential, day reporting and employment services for women in Wayne County, where the majority of our female offenders return. All of these services were already linked to the Intensive ReEntry Unit (IRU) for female inmates at the Huron Valley Complex for Women in Ypsilanti, where the MPRI process began.

4) $1 million for miscellaneous planning and administrative support of the MPRI Model in FY 2006 within the MDOC for communication support (such as video conferencing and public education), training (such as MPRI conferences and stakeholder meetings), and data systems improvement (such as case management applications). There is no staffing component in the use of these planning and administrative support funds.

Table 1 provides summary information regarding current allocations and projected expenditures within each of the prisoner reintegration projects. See Addendum No. 18, "MPRI Pilot Site Comprehensive Plan Summaries;" Addendum No. 19, "Mentally Ill Inmate Demonstration Project Summary;" and Addendum No. 20, "Parolee Reintegration Services Summary" for more detailed information about the allocations and projected expenditures in each of the service areas for each of the project service providers.

II. Objectives and Results Measures for Prisoner Reintegration Programs

The Michigan Prisoner ReEntry Initiative developed a Community Assessment instrument that provided the structure for local Steering Teams to assess not only the prison and parole supervision systems' current ability to screen and assess the prisoner population returning to their communities, but also the capability of the service delivery systems for housing, employment, alcohol, substance abuse and mental health services, transportation and 11 other service modalities.[2]

The purpose of the Community Assessment instrument was to begin the work of developing the Comprehensive Community ReEntry Plan for each Pilot Site community by focusing on each community's assets, gaps, barriers, proposed solutions, case management strategies, and plans to follow evidence-based practices for parolee services. In order to have a consistent frame of reference across sites, the following definitions were used:

[1] FY 2006 First Round Pilot Sites (Berrien, Capital Area, Genesee, Kalamazoo, Kent, Macomb, 9-County Rural, and Wayne).
[2] See Addendum No. 10, "MPRI Community Assessment for Pilot Site Development."

- Assets – Strengths present in the community, consisting of programs, services, delivery systems, organizational capacities and networks.
- Barriers – Challenges that impede the effective coordination of delivery of services to meet a recognized need.
- Gaps – Absence of a specific element or component within a community that renders the service delivery network less effective than it might otherwise be, and that could be addressed through policy change, organizational structural change or funding assistance, or some combination of these.
- Proposed Solutions – The community's plan to effectively use its assets, fill its gaps, and overcome its barriers for each service area.
- Case management – How the services provided to returning prisoners are coordinated and effectively delivered.
- Evidence-based practices – Practices founded on research which demonstrates a correlation between the practices and recidivism reduction.

Table 1

Current Reintegration Program Allocations & Projected Expenditures*

MPRI Pilot Sites	Fiscal Agents	Allocation
Berrien County	Berrien-Cass-Van Buren Michigan Works!	$625,000.00
Capital Area	Capital Area Michigan Works!	$625,000.00
Genesee County	Genesee Co. OCC	$625,000.00
Kalamazoo County	W.E. Upjohn Institute	$625,000.00
Kent County	Goodwill Industries of Greater Grand Rapids, Inc.	$625,000.00
Macomb County	Macomb/St. Clair Workforce Development Board	$625,000.00
9 County – Rural	Northwest Michigan Council of Governments	$625,000.00
Wayne County	United Way of Southeastern Michigan	$625,000.00

	Contractors	Allocation
Mentally Ill Demo Project	Lifeways CMH Authority	$2,427,100.00
Residential Transitional Housing	Elmhurst Home, Inc.	$1,395,760.00
Employment Services Contract	Goodwill Industries of Greater Detroit	$100,00.00
Day Reporting Services Contracts	Transition of Prisoners, Inc. – Male Program	$226,000.00
	– Female Program	$207,950.00
Misc. MPRI planning/support		$1M

* Figures subject to change as the fiscal year proceeds.

In addition to the projected allocations and cost expenditures, Addenda Nos. 18-20 also contain summaries of the gaps to be addressed, purposes of the funds and expected outcomes in each of the service areas for each of the service providers. The material in these addenda is in the form of plan summaries, project statements, contract statements of work, and other relevant documents.

III. How Prisoner Reintegration Programs will be Evaluated

Michigan is benefiting from financial support from the JEHT Foundation for purposes of developing and implementing the MPRI evaluation plan and conducting the process and outcome evaluation. Strategic planning and technical assistance with evaluation preparation is also being

provided by our partners at Public Policy Associates and the Michigan Council on Crime and Delinquency.

Prisoner reintegration programs are one critical component of the Michigan Prisoner ReEntry Initiative, but there are numerous others in the three-phase, seven-decision-point MPRI Model, such as risk assessment and classification, prisoner release preparation, prison in-reach, and parole supervision. Best practices research indicates that to expect any one component of a reentry model to unilaterally stop recidivism is unrealistic. The whole of MPRI is greater than the sum of its parts, so the evaluation of prisoner reintegration programs is just one element of what must be a comprehensive evaluation of the implementation of the MPRI Model. Individual components of the MPRI Model will, of course, be evaluated with regard to their contributions to objectives and outcomes, but within the context of the Model as a whole rather than in isolation.

The objective of evaluating the Michigan Prisoner ReEntry Initiative is to learn as much as possible about what works as hoped, what does not, and how to further improve the MPRI. This implies understanding both the *results and outcomes* of the work and the *process of implementation*. Measuring the *outcomes* determines whether the direction and magnitude of change is meaningful, and assessing the processes of implementation addresses how the results were achieved. Evaluation results will be fed constantly back to policy makers, MPRI architects, and staff in the field. By injecting these results frequently, the MPRI can be refined and improved. Lessons learned from the earliest implementation efforts can be applied to later efforts and across sites. Thus, the evaluation is not simply an academic exercise. Rather, it is a critical element of the MPRI that will contribute important knowledge to it.

Key *outcome measures* to be used by the evaluation include:

- Reducing offender recidivism as defined by 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.

Positive results for these three measures will, in turn, lead to such long-term *impacts* as:

- Safer communities and prisons.
- Lower prison costs than the system would otherwise have incurred.
- More offenders leading constructive lives.

For more specific information regarding evaluation of the MPRI Model and all of its components, including prisoner reintegration programs, see Section No. 4, “Performance, Evaluation and Sustainability” of the MPRI Monthly Status Report, and Addendum No. 15, “Recidivism Reduction Plan Report.”

IV. Evidence and Research Regarding Prisoner Reintegration Programs

An examination of the eight principles of evidence-based practices, along with some particularly relevant findings of recent research, and some extensive reference lists are located in Addendum No. 21, “Evidence Based Practices Summary.” The reference lists include research findings about what works and information about how to adopt the organizational changes needed to implement the results of that research. The reference lists are organized by subject matter, including types of prisoner reintegration programs.

V. Impact of Prisoner Reintegration Programs on Re-Offending and Returns to Prison

The baseline recidivism rate for parolees (derived from follow-up analysis of all 1998 paroles) – against which to determine the impact of recidivism reduction measures – shows that, on average, 51.3% of paroled offenders would be expected to successfully remain in the community two years after release. Within that time, the other 48.7% would either return to prison with new sentences (12.3%), or return to prison as parole technical violators (26.5%), or be on parole absconder status (9.9%).

Among the recidivism reduction measures adopted by the department, the one with by far the greatest potential long-term impact is the Michigan Prisoner ReEntry Initiative (MPRI). The impact of the MPRI will be reduced crime, fewer victims, safer neighborhoods, better citizens, fewer returns to prison and reduced costs. Prisoner reintegration programs are a core component of the MPRI and are therefore expected to make a significant contribution to the impact of MPRI on both recidivism and the use of prison beds.

Since better offender parole plans will result from the MPRI, the parole approval rate is expected to increase modestly without jeopardizing public safety and the parole success rate will increase as the MPRI is implemented and expanded statewide. One objective is to increase the parole approval rate by 2% each year as the parole board gains confidence in release outcomes. Another objective is to increase the success rate of MPRI participants by 6% by the end of FY 2006, and eventually by as much as 10% statewide when the MPRI Model is fully implemented. Prisoner reintegration programs founded on evidence based practices are a key reason for these expectations given their integral role in the MPRI Model.

An indicator of the potential improvement is Ohio's experience, where the percentage of successful parole discharges has improved 10% in two years, from 44% in 1999 to 54% in 2001.

VI. Progress Report on Applicable Results, Including Estimated Bedspace Impact

There have already been successes in Michigan resulting from the MPRI, which are documented in the MPRI Monthly Status Report, (in which this Prisoner Reintegration Programs Report is an Addendum) and in Addendum 22, "MPRI PowerPoint Presentation" which was also recently presented during testimony in legislative hearings. Implementation of the MPRI Model has only recently begun, but even during FY 2006, the MPRI will target, engage and impact more than two thousand prisoners and parolees via the prisoner reintegration programs of the Intensive ReEntry Units, the MPRI pilot sites, the Mentally Ill Inmate Demonstration Project and Parolee Reintegration Services.

Safer Neighborhoods, Better Citizens: The Michigan Prisoner ReEntry Initiative

A Collaborative Effort of the Governor's Office and the Departments of Corrections, Community Health, Labor and Economic Growth, and Human Services

MPRI Pilot Site Comprehensive Plan Summaries

This addendum contains extracts from the Comprehensive Prisoner ReEntry Plans of the eight Round 1 Michigan Prisoner ReEntry Initiative (MPRI) pilot sites. Each of the eight pilot sites conducted comprehensive community assessments in preparation for reentry activity beginning in Fiscal Year 2006. These comprehensive community assessments were developed into an analysis of each locations' assets, barriers and gaps as related to prisoner reentry to their home communities. The MPRI Comprehensive Prisoner ReEntry Plan is the budget and service delivery plan as developed from the comprehensive community assessment and subsequent analysis.

The Comprehensive Prisoner ReEntry Plan extracts presented here include the overall summary of the community's readiness to participate in the Michigan Prisoner ReEntry Initiative, a short overview of the community assets, barriers to prisoner reentry, and proposed solutions in which community resources and MPRI funding will jointly be utilized to overcome the barriers and provide the avenue for a seamless prisoner reentry system. Additionally, the summaries include short and long-term goals, local priorities, details relating to the pilot site's plan to apply gender responsive strategies, evidence-based practices, and case management strategies.

Each community summary is followed by the individual location's budget summary and details of the specific eligibility criteria, assessment process, and a brief description of the gap the funding would address, and the expected outcomes of applying the funding within the community.

Table of Contents

A. Comprehensive Prisoner ReEntry Plan 3

Berrien County - Summary 3

Capital Area - Summary 12

Genesee County - Summary 19

Kalamazoo County - Summary 25

Kent County - Summary 34

Macomb County - Summary 43

Nine County - Summary 54

Wayne County - Summary 75

A. Comprehensive Prisoner ReEntry Plan

Berrien County - Summary

The Local Process
The Berrien County Steering Team, first convened in June 28, 2005, have developed into a cohesive group, providing valuable leadership throughout the process of community assessment and planning for MPRI in our community. We have identified community assets in many key service areas, including housing, workforce development, transportation, and health care. However, we also recognize that significant barriers and gaps remain, increasing the challenges faced by returning prisoners as they attempt to reintegrate into the community as healthy and productive citizens. We believe that we have created a Comprehensive Plan that will begin to overcome the barriers and fill the gaps by effectively building on existing assets.

Assets
Currently, one of our greatest assets is the membership of the Steering Team and Transition Team. The teams have been instrumental in building our understanding of the strengths and resources available to parolees, as well as their needs. They have also served as a crucial link with the community, identifying and engaging local service providers and community members interested in creating a safer community through successful implementation of MPRI at the local level. Other assets that have been identified are the various organizations such as Salvation Army, United Way, Southwest Michigan Community Action Agency, Michigan Works, We Can Make A Difference, Cornerstone Alliance, Riverwood Center, Home Ownership Made Easier (HOME), Lake Michigan College who are willing to provide assistance with multiple tasks needed for the participants to complete their transition back into the community.

Barriers
Our largest barrier is the lack of understanding of the challenges faced by returning prisoners and of the potential for successful reentry to reduce crime and promote public safety. As a result, many community assets are often unavailable to ex-offenders, including subsidized or affordable housing and employment opportunities. Furthermore, service providers and community members are often unaware of the parole process and the resources available through the process to reinforce parolee accountability.

Gaps
Our largest gap is in service capacity. As stated above, most of the services needed by returning prisoners are available in Berrien County. However, many service providers lack the capacity to meet the existing need, often resulting in long waiting lists or denial of services. Capacity gaps are especially problematic in the areas of affordable housing, workforce development services, transportation, and substance abuse treatment services.

Short-Term
Berrien County MPRI's first IN-REACH will occur on September 22, 2005. All members of the Transition Team along with the Parole Supervisor, and Community Coordinator will be attending the orientation scheduled. Berrien County MPRI will be attending the MPRI Conference scheduled for September 19, 2005. Berrien County MPRI will be using short-term funding for transportation. Berrien County MPRI started using the allotted director's grants for 05 to purchase clothing, identification cards, and birth certificates for participants. Berrien County MPRI is also working on a workshop that will incorporate life skills, workforce development, education and law enforcement while providing transportation to the workshop with short-term funding. Berrien County MPRI will use this workshop as a basis for helping to further expanded on the concept of a "One Stop Shop". Berrien County MPRI will continue to fund services with 06 funding that will allow participants to improve their chances of becoming a productive member of the community. The intent was to obtain assistance to decrease recidivism by aiding the returning individual in obtaining the necessary skills to find employment, further their education, receive adequate housing, affordable health care, and provide transportation.

Long-Term
Berrien County MPRI will be actively seeking to bring other Berrien County representatives from Niles, Buchanan, Galien, Watervliet, and Coloma to table to be a part of the Steering Team, Transition Team, and Advisory Council.

Berrien County MPRI will be contacting landlords to discuss a plan to help with the lack of transitional housing in the community. A Landlord pool will provide for 1st months rent and create a liability fund for any future damages that may occur. Landlord could claim up to one month's rent in damages during residence or after an individual moves out. By offering incentives Berrien County MPRI is hoping that landlords will be willing to provide adequate housing for offenders. This will help build a relationship with the rental agent and MPRI for future participant's usage of rental housing.

Berrien County MPRI will create a transitional employment plan in partnership with an organization that will develop a program that will be specifically designed for the special needs of participants. Berrien County MPRI will work with all current providers in regards to substance abuse and mental health issues. Berrien County MPRI will be looking to utilize Berrien County MPRI will work with all current providers in regards too substance abuse and mental health issues Peter's which is an 88 bed facility that will allow a participants who are diagnosed with having a substance abuse problem to receive assist with housing, and help to address concerns of over coming an substance abuse addiction. Berrien County MPRI will also utilize Inspiration House, which can accommodate up to 6 women; a referral with local approval will be needed prior to acceptance.

Local Priorities

Within the first year of our Comprehensive Plan for Prisoner Re-Entry, our local priorities are:

1. Reduce recidivism and increase public safety;
2. Provide housing to individual parolees and build support for making affordable housing more available to returning prisoners;
3. Increase the employment rate among returning prisoners;
4. Establish and maintain a prison in-reach and TAP development process that will allow prisoners to begin the work of successful reentry prior to release from the IRU;
5. Establish and maintain a case management process that will assist parolees with implementing reentry tasks established through the in-reach and TAP development process;
6. Provide needed community services to parolees, including substance abuse treatment, transportation, health care, including mental health and dental services, life skills training, and adult education;
7. Involve families when and where appropriate;
8. Involve faith-based service providers as appropriate;
9. Incorporate gender-responsive strategies in all service provision.

Plan

Our plan is to use the TAP model of planning in conjunction with Transition Teams, prison in-reach services, and community-based services to create a seamless system of services and accountability for prisoners who are transitioning from prison to the community.

- We will assess prisoners for housing, vocational, mental health, health, family, and other social services needs;
- We will match those prisoners to available and emerging community based resources;
- We will engage those prisoners in programming while they are still in the institution to prepare them for using those services;
- We will engage those prisoners when they are newly paroled in ways that empower them to use the community based services to continue the personal change work they began while in prison;
- We will orient those parolees to the community values, standards, and practices by structuring the parolees' involvement in community services that help them develop a Transition Accountability Plan that allows them to remain in the community;
- We will assist the parolees in their efforts to improve the quality of their life.

Case Management Strategy

The Parole Agent will serve as the case manager and work closely together and with the Transition Team and community service providers to provide a "Wrap-Around" type of support for the offender. This process involves the use of Transition Teams comprised of those social service providers, the Parole Agent, and the Assistant Resident Unit Supervisor.

The Transition Team, or its representatives, meets with the prisoner face-to-face, via telephone, and video conferencing (when available) before the prisoner is released to develop a plan to prepare for going home. This plan

includes establishing connections between the prisoner and service providers. The plan also involves setting the stage for the offender to meet with the Transition Team or its representatives when released and developing a plan to stay home. This plan will involve the conditions of parole, service and treatment plan agreements, assessments and their findings, the parolee's input, the supervision of the parolee by the parole agent, and the recommendations of the case coordinator as well as the service providers.

Evidence-Based Practice

We plan to incorporate evidence-based practices in service provision through the following steps:

- Service providers will be expected to develop and maintain a process for risk and needs assessment that focuses on dynamic and static risk factors; profiles criminogenic needs, and has been validated with similar target populations.
- Service providers shall adopt and demonstrate a policy of relating to offenders in a way that is interpersonally sensitive and will enhance their intrinsic motivation;
- Services will be targeted for the higher risk offenders, focused on criminogenic needs, responsive to the individual, integrated with treatment services, and provide structured tasks for 40 – 70% of high risk offender's time for 3-9 months.
- We will seek trained service providers, particularly in the use of Cognitive Behavioral treatment, and encourage ongoing training to ensure that services are delivered by well-qualified professionals;
- Focus on increasing positive reinforcement for appropriate and healthy behavior;
- Engage the community and build its supportive role
- Create and maintain a system to measure relevant processes/practices;
- Provide measurement feedback to leaders, community members, service providers, and service participants to reinforce success and guide the process of improvement.

It is important to note that a common definition of Evidence-Based Practice does not exist among service providers in our community. Therefore, incorporating these practices into the initiative will require a great of deal of training and communication with service providers, as well as continued training and support from outside experts.

Gender Responsive Approach

Currently in Berrien County, many existing services are designed to meet the specific needs of women, including…. In order to build on the existing foundation of gender-responsive strategies, we will:

- Acknowledge that gender makes a difference and design services accordingly;
- Require service providers to create a service environment based on safety, respect, and dignity;
- Develop policies, practices, and programs, in conjunction with service providers, that are relational and promote healthy connections to children, family, significant others, and the community;
- Address substance abuse, trauma, and mental health issues through comprehensive, integrated, and culturally relevant services and appropriate supervision;
- Provide women with opportunities to improve their socioeconomic conditions.

Educating the Public about the Re-Entry Population

- Reassure the public that people who present a risk to the community are supervised upon their release, and re-incarcerated when appropriate for failures to comply with their conditions of release.
- Make clear that prolonging the incarceration of every prisoner or returning every violator of probation or parole to prison or jail is neither good policy nor fiscally responsible.
- Inform the public about the large and growing number of people with criminal records in the community.
- Help the public appreciate that preparing people in prison or jail for their release and providing support to them upon their return makes families and communities stronger, safer and healthier.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	40	Returning offenders that have housing needs upon release.	There is a lack of affordable housing in Berrien County primarily due to federal barriers which prevent felons from obtaining subsidized housing, limiting housing opportunities. The Berrien County MPRI will provide housing subsidies for returning offenders whose TAP has identified a housing need. This will include rental assistance up to two months rent. Also a damage liability account from which potential future damage costs to the landlord could be covered. Projected Outcomes: Landlords will rent to participants without fear that participants will damage residence and landlord will be responsible for damage expenses. Also 13% of 289 participants will be placed in adequate housing.
Amount Requested	40,000		
Cost per Parolee	$1,000		
Assessment Process	The Transition Team will review the offender's TAP2 and meet with each offender to access their housing needs and the level of service they will require.		
2. Workforce Development Services			
Number to be Served	217	Offender lacks employment, effective job readiness, job search skills, and lacks support services specific to effective job placement and retention.	High unemployment in general and institutional barriers to employment limits the ex-offender's employment opportunities. Berrien County MPRI will create a One-Stop Employment Center to address the employment needs of the returning offenders. A full time job developer will be utilize to create employment options by identifying and engaging "ex-offender friendly" employers; a full time job coach will be used to provide on the job support and case management to help the employed persons maintain their jobs. Transitional employment will be provided to participants. Projected Outcomes: That 75% of 289 participants will acquire employment skills, and the ability to obtain job searches along with the knowledge that they will be able to seek gainful employment on their own merits
Amount Requested	354,600		
Cost per Parolee	$1,634		
Assessment Process			Workforce Development staff along with the Transition Team will work with offender's prior to release. Once released offenders will be assessed for their level of work readiness skills, basic education, and skill levels.
3. Substance Abuse Treatment			
Number to be Served	0	Offenders released that have Substance issues	Berrien County MPRI projects that 14% of the returning offenders have substance abuse problems. Local substance abuse agencies will provide ongoing services to participants.
Amount Requested	0		

Cost per Parolee	0		
Assessment Process	Records such as the TAP2 and PSI will be used by the Transition Team to aid in determining a history of substance abuse.		
4. Mental Health Treatment			
Number to be Served	0	Mental Health is determined by a various evaluations.	Mental Health Treatment is assessed through Riverwood Center or the Health Department. It is based on insurance and your need to provide payment.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Records such as the TAP2 can be used as a source of referral for the Transition Team. The service agencies will also interview the offender for entry into the program.		
5. Transportation			
Number to be Served	250	Offenders released without the means of transportation	Due to a lack of public transportation the Berrien County MPRI will seek to partner with an agency familiar with the various transportation providers already operating in the county. This agency will be required to coordinate services to ensure returning offenders have transportation to interviews, work sites, and other scheduled appointments. Projected Outcomes: By coordinating services participants will be able to attend appointments for medical, employment, or parole related activities.
Amount Requested	64,840		
Cost per Parolee	$247		
Assessment Process	Records such as TAP 2 will be used as a source of referral for the Transition Team. The assigned parole agents in the community will provide information on the transportation needs of the offender.		
6. Health Care Services			
Number to be Served	50	Returning offenders that have health care needs and lack adequate resources or insurance coverage	Parolees without medical resources go without medical care or experience long delays in obtaining needed medications and treatment. There is a lack of knowledge of chronic disease when offenders leave prison. While in theory all returnees have had health assessments, their records are not readily available; local health providers need a current assessment to provide medication. One option is the Berrien County Health Plan yet it is limited by enrollment caps. These funds will cover the initial period following release until other resources are sought. Projected Outcome: That 17% of participants will receive preventive medical or dental care. Participants must also obtain prescriptions for medicines typically too expensive for individuals without medical insurance coverage.
Amount Requested	10,000		
Cost per Parolee	$200		
Assessment Process	Records such as TAP 2 and referrals by medical service agencies can be used by the Transition Team as a source of referrals. The parole agent can obtain the appropriate medical release information forms to determine the particular need(s) of the offender such as physical therapy, prescription refills or dental care.		
7. Family Support Services			

Number to be Served		Offenders returning that have a desire to participate in the family reunification program	Incarceration of a parent has profound impact on family dynamics as a whole and upon children in particular. When the inmate returns home, spouses struggle to negotiate a number of issues from personal intimacy to parenting. Healing can be engendered when the family and ex-offender are brought together in a safe and structured setting to discuss the issues surrounding the new context for their relationship, Family Group Conferencing (FGC) is a conflict resolution model that has gained international attention as an effective tool for both families and offenders. Meetings would be integrated into the inmate release plan and scheduled within 30 to 60 days after return. Follow-up would take place within 60-90 days after the meeting.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Information provided in the TAP2 can be used by the Transition Team to determine a need for family support. Prison Records/Visitor list or family interviews of the offender by the parole agent. Prior programming in an institutional setting will determine entry into a program or the need for continuation of services. The Parole Agent, the family and a Transition Team member will utilize video conference for family reunification interviews.		

SERVICE AREA	Costs	Eligibility Criteria	Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.
8. Life Skills programs			
Number to be Served	0	Parole Order for parole notes a special condition for mental health	There are limited services in Berrien County. Berrien County has contacted agencies to be a referral service for a participant who would like information on available programs. The expected outcome is to develop more self-control and less anger induced crime.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Information provided in the TAP2 can be used by the Transition Team to determine if offenders will require service. Prior programming in an institutional setting will determine entry into a program or the need for continuation of services.		
9. Adult Education			
Number to be Served	15	Offenders returning without GED	While it is the goal that ex-offenders returning to the community will have at least a GED, many do no not and are in need of educational assessment to determine additional training needs. It is estimated that the 15 returning offenders will need educational screening to fully assess their needs and the level of educational services that they might require. Projected Outcomes: That participants who were released from prison without a GED will now be able to apply for better wage jobs that once were a off limits due to the fact the requirement for employment was that an individual could only apply if a high school diploma, or a GED were achieved.
Amount Requested	1,875		
Cost per Parolee	$125		
Assessment Process	Information provided in the TAP2 can be used by the Transition Team to determine if offender will require service.		
10. Domestic Violence Services			
Number to be Served	0	Offender has a past history of violence toward family, friends, or Law Enforcement.	Due to the lack of funding Berrien County will need to assistance to aid in domestic violence for the victims and offenders. These services can be in the form of classes, brochures, and guest speakers.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Information is provided in the TAP2 which can be used to determine need of services. The information will be available to the parole agent and the Transition Team.		
11. Sex Offender Services			
Number to be Served	0	Assist offenders	Pathways Incorporated is an organization based in Kalamazoo, Michigan. The group meets

Amount Requested	0		
Cost per Parolee	0		
Assessment Process	By the end of treatment there will be a complete relapse prevention plan that looks at all of influencing factors such as warning signs, substance abuse, stress, depression, poor anger management, illness, etc., issues and recognizes warning signs before they run into deviant behaviors.		
12. Victim Services			
Number to be Served	0	To assist victims with cost of counseling.	Due to limited funding victim's are being forced to pay out of pocket expense for the cost of counseling. There is currently a 6 month wait for funding before a victim is able to receive treatment. Restitution in most cases is an extended wait.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	To aid victim in their recovery due to trauma suffered at the hand of the offender.		
13. Entitlement Programs			
Number to be Served	0	Offenders requesting/or in need of such services	There is no service agency that can provide an overall view of available social services/entitlement programs. The funding is to seek funds to have an organization. The expected outcome will be that the offender will be aware of information and forms of available services that the offender may need.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Information provided in the TAP2 can be used by the Transition Team, and. parole agents to determine a need for services.		
14. Law Enforcement Services			
Number to be Served	0	Lower recidivism for offenders.	Collaboration between the parole agents, and the police department to improve an offenders chances of not returning to prison.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process	Offender returning to the community established by a Parole Board Order for Parole. Transition Team will review policy of rules/special conditions of parole.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address the purposes of funds and expected outcomes.**
15. Prison IN-REACH & TAP Development			
Number to be Served	289	Offender case management records and evidence base practices	We are requesting funding for mileage and meal reimbursement for the Transition Team due to the fact that the prison does not currently have video conferencing equipment. Once video equipment has been implemented then air time for video
Amount Requested	500		

Cost per Parolee	$0.57		
Assessment Process	The Transition Team will be using will give the offender a chance to meet the individuals who are helping to make a difference in his transition back to the community.		
16. Other: Community Coordination			
Number to be Served	289	Assist the offender to acquire vital identification documents and basic hygiene items.	Many offenders do not have the means necessary to obtain identification required to secure jobs or services within the community. Others still do not have the basic hygiene items necessary to function in society. Equipment, supplies, and refreshments are needed to ensure the Public Education and Outreach plan is implemented properly, as well as to ensure committee, council, team, and training meetings are suitably conducted.
Amount Requested	15,685		
Cost per Parolee	$54		
Assessment Process	Information is provided in the TAP2 which can be used to determine need of services. This information will be given to the Parole agent and the Transition Team. Purchases for equipment, supplies, or refreshments will be approved by the Steering committee co-chairs.		
Sub Total Services Request	$487,500		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$75,000						$75,000
Training							
Travel							
Sub Total Management	$75,000						$75,000

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Contractual Services							
Supplies							
Equipment							
Training							
Travel							
Other	$62,500						
Sub Total Adm. Costs & Percent	$62,500 / 10%						$62,500

SERVICES FUNDS REQUESTED	**$ 487,500**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$ 62,500**
TOTAL REQUEST	$ **625,000**

Capital Area - Summary

The Capital Area Pilot Site (CAPS) has current assets which will continue to be used, with some additions, in the areas of

Substance abuse: An already strong asset for CAPS, the focus will be to obtain immediate programming upon release, follow-up (bird-dogging) to keep clients clean, away from the triggers & stressors that lead to relapse, and provide positive incentives.

Mental Health: A strength for CAPS, and a strategy similar to substance abuse: Immediate programming, follow-up, monitoring, and quick responses.

Sex Offender Treatment: Needs stable funding, tracking, aftercare. CAPS will develop a very detailed database as to this group, what works, what doesn't, what is automatic trouble to support future funding & policy directions.

Domestic Violence (DV): Most victims are women. Local DV agencies need additional funding to sustain current levels of programs, & CAPS will seek mutually beneficial relationships for housing, counseling, and other programming. Most of services for women will be directed through the DV agencies, if possible.

Victim Services: This is primarily the prosecuting attorney's bailiwick. Ways to be of mutual benefit need to be explored. CAPS will focus on cooperation, disseminating information, raising awareness & making referrals.

Health Care: The local communities have assets. The major barrier is the knowledge & coordination to match those in need with what is available, including funding sources.

Adult Education: Programs are out there. CAPS will pursue coordination of programs & needs, with the goal of all parolees earning a GED if mentally capable.

Entitlements: Paperwork & the run-around are the big obstacles. CAPS will develop a few people who are very good in this arena. This area will be tied in with family support services.

Law Enforcement Services: This is not really an oil & vinegar type of relationship. Every parolee should know at least one cop personally, to try to 'walk a mile in his/her shoes'. Paranoia & fear lead to rash choices. Let's get rid of them.

Community Strengths

CAPS has a highly educated and generous population. Over 450 separate congregations of various faiths exist in the tri-county area, several with on-going prison ministries, along with numerous faith-based non-profit entities. The faith-based community (FBC) is the leader in services for parolees in CAPS. Neighborhoods are organized, some more than others. There are apartments available at affordable rents if the property owner will rent to a felon. That is a barrier CAPS is addressing through housing assistance funding.

Community Weaknesses

CAPS consists of three mostly rural counties with a common urban area. Transportation can be a problem due to availability, cost and weather. The area has a high unemployment rate and jobs are hard to find. Many neighborhoods have an entrenched drug trade problem. The generosity of the people is scattered and disorganized as it is applied to reentry. CAPS is seeking to organize & train volunteers for key roles.

So what?

The majority of effort and funding will address jobs and housing. If problems in those two areas can not be remedied, the parolee will likely fail. The more time required to overcome the problems, the greater the chance of failure. Without success in these two areas, the other service areas become irrelevant.

A key concept of CAPS Plan is to keep everything on a manageable scale. This will happen through gathering plenty of information about each parolee as soon as possible, trying to foresee obstacles & trouble, and planning accordingly. The plan for each parolee is to keep it simple and keep it going. Prevent the parolee from feeling isolated. Eliminate 'the run-around'. Accentuate the positive. Worry about today first. Every parolee will have someone who knows them, and is concerned about them. This will come primarily from FBC and mentor groups.

Short-term objectives

The focus of CAPS is to quickly 1) get parolees into jobs to pay their own way; 2) get parolees into decent housing;

3) better utilize the above-mentioned existing assets; and 4) to enlist, coordinate, support & multiply the commitment & energy of the faith-based and broader communities. These priorities will see expression through a 24/7 Wraparound approach.

The CAPS Wraparound plan requires multi-disciplinary cross-training for transition team members & volunteers to perform duties in multiple areas. The key to achieving success is to gather information (knowing what questions need to be asked), using the information (making referrals & connections), follow through (double & triple check to insure the parolee is cooperating and the service goals are attained), and timely reactions (nip problems in the bud). Everyone must see the big picture, understand their part of it, and be a true believer that success is the only acceptable outcome.

A core element of the CAPS plan is the volunteer element, primarily coming from the faith community. Recruitment, training, coordination and support of volunteers are deliberate and funded tasks. Using volunteers involves using three ideas: Ask them, Support them, Thank them. People can be great if you remember their names.

Long-term objectives
The recruitment, training & use of volunteers as a key component in CAPS Plan is intended to provide more dedicated, caring people to keep the parolee's internal motivation engaged. It also serves as a public awareness campaign. CAPS Plan has public relations in mind. Prisoner ReEntry has been in the national & local news. A positive public perception must be cultivated. A positive relationship with the media must be developed. This will happen as the result of a very deliberate campaign. There will come a day when some parolee does something terrible to someone. When that event happens, the reaction of the public & the media can either sustain or doom reentry programs.

A lack of effective sanctions, as well as incentives, limits the options of parole agents and the courts. A goal of CAPS is to be able to offer more sanctions and incentives options in the future

There is currently no general public support for a needed transitional housing & treatment facility. The need for such a facility has been demonstrated in the past, but efforts to move forward were shot down. Raising public awareness, supported with data, on the issues of reentry and crime reduction are required first. It will take several years to achieve this objective.

Greater knowledge of and partnering with the agencies already providing counseling, health care and support services is required to keep their support and to increase their effectiveness with the parolees. Mutual cooperation is a goal.

Gender
Issues pertaining primarily to the female parolee population (@ 25/year; 50 total caseload) are the common histories of sexual abuse, sexual assault, and domestic violence perpetrated against them. CAPS is inviting domestic violence agencies who have experience helping women to propose programming for the female parolees. The local agencies already have in place transitional, protective shelters, resources and counseling services for women. Funding requested for Domestic Violence Services & Victim Services will be used almost entirely to benefit the female population. Though many of the same issues affect both genders, the evidence shows that women respond better if the services are tailored to them. The community coordinator will assist the local DV agencies in obtaining additional funding sources.

Case Management
CAPS has between 450 & 550 active parole cases at any one time. MPRI services, while focused on the IRU group, will be available to all parolees & those who 'max out'. The numbers involved prevent a parole agent from doing their current duties and providing case management for MPRI. CAPS will utilize a rotating team leader to do case management. The parole agent makes the assignment of who will lead the transition team based on the needs of the parolee. The parole agent is ultimately responsible for deciding when to seek sanctions, including revocation of parole. The team leader will keep current records, work with other team members, and report to the parole agent on a case. The parole agent will receive information from the team leader and the parolee, provide overall leadership, and exercise their authority as appropriate.

Each transition team will be composed of service providers based on the needs of the parolee. Martha Stewart's transition team would have very few members (if any). The parole agent is responsible for determining who is on each

team. Once the team is selected, reentry services can be delivered and monitored without increasing the agent's workload. Compiled data comes from team members and goes to the community coordinator for recording.

All direct MPRI benefits to a parolee will be on a loan basis. Money is expected to be repaid with money or community service.

Effectiveness

The ultimate test for reentry programs is whether a change for the better results. CAPS is constructing a series of measurements to determine what is beneficial, and what is not, to achieving parole success. All service measures will include the number of parolees served, whether they were IRU or not, how many violations the parolee incurs, any new arrests/crimes charged/convictions, sanctions, and whether or not the parole was revoked.

Additional measurements will include information about **jobs** (length of unemployment, type of work, pay, hours, what was services aided in finding the job); **housing** (whether housed with a family or friend, number of nights spent in emergency shelter, placement in transitional housing, length of time before permanent housing is found, distance of housing from job, counseling, and support centers, rent, number of moves); **counseling** (drugs, alcohol, mental health, sex offender, batterers, domestic violence - length of time before services are initiated, number of sessions, individual or group, aftercare provided, number of missed sessions, participation in support groups); **health care** (services received/not received, medications available & taken, health issues impact on parolee in other areas); **adult education** (number of hours of class time, number of tests taken, pass/fail rate, number of GEDs obtained); **support services** (life skills, transportation, family support, victim, entitlement, law enforcement – units of service provided, manner & location of service delivery [volunteer/paid, support center/agency], length of involvement with parolee, gains noted).

Before receiving funding, each bidder must first demonstrate, by way of reliable data, history or qualified research, that it is using effective in achieving positive results, i.e. the use of evidence-based practices is essential to receiving their funding. CAPS will periodically review funded services to insure that they are following the practices which they submit with their proposals. It is the responsibility of the community coordinator to identify those elements of the plan where no progress can be shown and to make recommendations to the steering committee accordingly. It is also the responsibility of the community coordinator to find and obtain additional sources of funding for those programs which function well.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	200	No place to live	Transitional housing is virtually non-existent. These funds will provide transitional housing & assistance obtaining permanent housing
Amount Requested	100,000		
Cost per Parolee	500		
Assessment Process	Inability to obtain shelter independently or from family or friends		
2. Workforce Development Services			
Number to be Served	250	No job, no money	Parolees need jobs to stay out of trouble & to pay bills. These funds will provide interim jobs & job seek assistance
Amount Requested	210,000		
Cost per Parolee	840		
Assessment Process			No job upon release, no job after 10 days of job seek
3. Substance Abuse Treatment			
Number to be Served	192	Identified substance abuse	The inability to detect the abuse of drugs & alcohol stops effective intervention. These funds will assist in identifying the highest risk parolees & assure intervention.
Amount Requested	30,000		
Cost per Parolee	156.25		
Assessment Process	Past or potential substance abuse/alcohol problem identified at any stage		
4. Mental Health Treatment			
Number to be Served	31	Diagnosed or suspected mental health issues	Lack of follow-up & treatment contributes to defeatist attitudes & parole failure. These funds will provide follow-up to the highest risk group & services to lower risk parolees in need.
Amount Requested	20,000		
Cost per Parolee	645		
Assessment Process	Diagnosed parolees will receive a new assessment & treatment as identified. At risk parolees will receive lower levels of treatment to prevent/limit mental health issues.		
5. Transportation			
Number to be Served	250	No means to get around	Public transportation is not free. These funds will provide parolees with bus tokens & taxi fare to meet parole requirements, plus gas reimbursement for volunteers
Amount Requested	15,000		
Cost per Parolee	60		
Assessment Process	Parolee has need of transportation for job seek, appointments and has no funds or other means to get around		
6. Health Care Services			
Number to be Served	200	No $$$ or insurance for health	These funds will provide prescription & OTC medication and basic health care between the time of release and before other programs are accessed, plus co-pays
Amount Requested	18,000		
Cost per Parolee	90		
Assessment Process	Parolee is in need of prescriptions or health care not covered by insurance or assistance programs.		
7. Family Support Services			
Number to be Served	250	Parolees	Parolees often are isolated in the community. These funds

Amount Requested	25,000	in need of	will provide basic clothing & hygiene needs; direct & indirect
Cost per Parolee	100	basic help	services; & assistance to families coping w/ a parolee
Assessment Process	All parolees will be assessed for assets & needs, with support services assigned by the parole agent where needed		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
8. Life Skills programs			
Number to be Served	150	Lacks skills in basics	These funds will provide coaching/mentoring to remedy deficits in basic abilities which otherwise may prevent successful re-entry.
Amount Requested	15,000		
Cost per Parolee	100		
Assessment Process	Screening by parole agent/transition team members to identify gaps in parolee's basic life skills and provide links to available remedies.		
9. Adult Education			
Number to be Served	40	Ability to learn to read/write	These funds will provide a screening tool to identify parolees who still lack a GED/basic literacy upon release and then refer them to local resources.
Amount Requested	1,000		
Cost per Parolee	25		
Assessment Process	Screening by parole agent/transition team to identify parolees in need of GED/basic literacy assistance		
10. Domestic Violence Services			
Number to be Served	50	Female or history of DV	These funds will provide additional screening to identify DV victims; referral and follow-up services to break the cycle of violence; support batterer's counseling for perpetrators.
Amount Requested	25,000		
Cost per Parolee	500		
Assessment Process	Female in IRU or identified for release will be screened for history of violent relationships; 25 batterer's to complete counseling program		
11. Sex Offender Services			
Number to be Served	30	Convicted of sex offense	Additional screening of sex offenders to target the highest risk group for intensive services. These funds will provide a greater level of public safety from higher risk sex offenders.
Amount Requested	5,000		
Cost per Parolee	166		
Assessment Process	Identified as a threat to children or other vulnerable persons		
12. Victim Services			
Number to be Served	25	DV/abuse victim	Long-term issues related to victimization if left unresolved will undercut chance of successful re-entry. These funds will identify needed services & prevent recurring problems.
Amount Requested	1,000		
Cost per Parolee	40		
Assessment Process	Prior history of DV, child or sexual abuse victimization identified at any stage		
13. Entitlement Programs			
Number to be Served	25	Every parolee screened for eligiblity	Eligible persons in need may miss benefits due to inability/lack of awareness to claim them. These funds will provide training & ability to capture benefits which otherwise would be missed.
Amount Requested	1,000		
Cost per Parolee	40		

Assessment Process	**Parole agent to screen for entitlement program eligibility, provide referral for application/claim assistance to those who are likely eligible. 25 are estimated to receive benefits which otherwise would be missed.**		
14. Law Enforcement Services			
Number to be Served Amount Requested Cost per Parolee	**309** **1,500** **4.85**	**Benefits all reentry parolees**	**Mutual suspicion between law enforcement & parolees needs to be replaced with trust & reliance. These funds will support community efforts to establish 1 – 1 relationships.**
Assessment Process	**Each parolee will meet with one local police officer periodically for discussions on goals & progress.**		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
15. Prison IN-REACH & TAP Development			
Number to be Served Amount Requested Cost per Parolee	**100** **15,000** **150**	**In IRU/to be paroled**	**Delays in information gathering, planning & follow-up leads to periods of higher risk of parole failure. These funds will identify, focus & expedite needed service delivery.**
Assessment Process	**In IRU or identified as soon to be released**		
16. Other: Community Information & Recognition			
Number to be Served Amount Requested Cost per Parolee	**309** **5,000** **16.18**	**Benefits all reentry parolees**	**These funds will provide the community with a MPRI newsletter, informational brochures & raised awareness levels; recognition of volunteer & parolee accomplishments**
Assessment Process	**Information & motivation to build & sustain community supports**		
Sub Total Services Request	**$487,500**		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	**70,000**						
Training	**3,000**						
Travel	**2,000**						
Sub Total Management	$ **75,000**						

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Contractual Services							
Supplies							
Equipment							
Training							
Travel							
Other							
Sub Total Adm. Costs & Percent	$**62,500** / **10**%						**$62,500**

SERVICES FUNDS REQUESTED	**$ 487,500**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$ 62,500**
TOTAL REQUEST	$ **625,000**

Genesee County - Summary

Throughout this application, statistics germaine to the "MPRI Pilot Target Population Information" sheet and Genesee County census demographics expand the need for intense programming, treatment and supervision of MPRI re-entry eligible prisoners. But on August 31, 2005 the headline of the Flint Journal was "More poor added to tolres – poverty number up by 20%" from 2003 to 2004. A new report form the Census Bureau – that dedged it's finding by stating survey returns used as a basis for the report were low – revealed that those living in poverty within the county rose from 14.2% (62,095 people) to 17% (74,849 people) – an increase of 20.5%. The number of women in poverty increased 25.2% up from 38,183 in 2003 to 47,823 in 2004. A recent report by the Genesee County Metropolitan Planning Commission states that the population of Flint will decline from 124,943 to 107,663 – 13.8% by the year 2030 based on current economic decline. Social service providers of emergency assistance to county residents have been out of funds for evictions, foreclosures, utility and water since mid-June. For those with identified needs, risks, and barriers build in as an added consequence of being an ex-offender, this is a bleak re-entry environment. The Comprehensive Plan of Genesee County's MPRI Pilot Site is designed to provide a holistic approach to keeping parolees at home.

Beginning with the CRA facilities, the plan has made provisions to endow them with equipment, supplies, and necessary training. This will ensure their TAP 1 and TAP 2 work with the prisoner will have accurate asessment of each individual for every issue that could be an impediment to successful re-entry. The Transition Team has undergone "in-service" training on Policy Directive 06.06.115 issued 4/18/05, which are the Administrative Rules for Intensive Reentry Program. All requisite paperwork for LEIN Clearance and orientation has been completed. Provisions have been made to empower and activate the team with resources and equipment that will supplement their area of experience/expertise, and allow them to schedule accurate and timely programming, services, and treatment based on the TAPs and their own interaction with the prisoners. They are ready to facilitate reunification meetings and to handle unexpected new input from prisoners that may not have occurred or been identified in the TAPs. The Steering Team has most of the necessary members, and those not yet impaneled, will be by the end of September. The Community Coordinators made extensive efforts to bring Law Enforcement, the Prosecutor, and Victim Services to the Steering Team successfully. Service provision has been planed to enfold re-entering parolees in a dynamic series of programs, services, and treatments that meet their needs, reduce their risks, and battle barriers. Community and parolee identified gaps have been addressed from societal, economic, political, and legal approaches to fill them with changes in in-reach programming, benefit and resource policy changes, leveraging of resources, and legal action.

Specific services for high-priority issues like sex offender services, reunification, and gender-specific services have been addressed for parolees as individuals, and with services that include their families and/or supports. The faith-based community has been an intrinsic part of planning and development of the plan as Steering Team Members. Case management procedures and the tasks of the case manager have been specified and coordinated to every staff, team, and partner involved in MPRI for Genesee County. Program measurements have been established using EBP and MPRI measurement goals. Assurance of recording and evaluating the correct data has been planned for through an internet-based output – outcome base MIS System, subject to compatibility with MDOC and PPA needs for data.

The first community forum has been held and was well attended. Plans to draw in all relevant stake-holders and decision makers in the community to form the Community Advisory Council are complete. Provisions have been included to disseminate information in multimedia fashion as outreach for community involvement in MPRI.

In summary, the Genesee County MPRI Pilot Site is ready to initiate a Comprehensive Plan that is workable, has built-in tools and personnel for success, and is expandable in future years.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served Amount Requested Cost per Parolee	40 40,000. 1000.00	Paroled after 8/05 & prior to 9/30/06; Lack of housing, & resources	Several community and faith-based agencies in Genesee County provide emergency assistance for evictions, and move in costs. All of these agencies have been out of funds since June 2005. None of these agencies provide assistance for delinquent property taxes. Expected outcomes are parolees placed in safe, decent housing.
Assessment Process	An assessment of the parolees eligible for re-entry into Genesee County shows that at least 10 will need transitional housing, another 10 will need residential probationary housing for parole rule violations. Costs have been included for an additional 20 for deposits, first month's rent, water deposits, and when the parolee is a homeowner, delinquent property taxes.		
2. Workforce Development Services			
Number to be Served Amount Requested Cost per Parolee	200 40,000 200.00	Paroled after 8/05, & prior to 9/30/06; Will benefit form fewer barriers	Career Alliance, Inc., and MI Rehabilitative Services provide direct and in-direct workforce assessments and services. Expected outcomes are parolees provided employment registration services. More importantly, they will be beneficiaries of the change in the communities' cultural bias against employing this population.
Assessment Process		Parolees needs physical & mental employ-ment rehab.	The local Michigan Works! Office has formed a partnership with the Michigan Economic Development Corp., in collaboration with the local Chamber of Commerce. Their mission is to change the culture of the community's deeply embedded adversity to hiring ex-offenders. Legal assistance when civil rights are violated.
3. Substance Abuse Treatment			
Number to be Served Amount Requested Cost per Parolee	0 0		Community Recovery Services has indicated that funding for FY06 is intact. Expected outcome is timely, accurate treatment/programming for parolees.
Assessment Process	Given the fact that more than 60% of parolees eligible for re-entry into Genesee County are assessed as alcohol or substance abusers, it is prudent to plan for treatment placement for 5% of our parolees.		
4. Mental Health Treatment			
Number to be Served Amount Requested Cost per Parolee	10 10,000. 1000.00	Paroled after 8/05, prior to 9/30/06; Has mental health treatment	Genesee County Community Mental Health has indicated that they have insuffiicient funds to serve the general population that meets their criteria for services. These funds will assist with costs associated with those meeting the criteria that need medications, treatment, and transitional housing placement.

Assessment Process	Ten percent of the Genesee County MPRI population has been assessed as needing intensive, or on-going mental health care.		
5. Transportation			
Number to be Served	182	Parole 8/05 through 9/30/06; Lack transpor-tation or resources	Funding to expedite employment, when ineligible for other community resources. Expected outcomes are parolees able to get to scheduled appointments, treatment, and work.
Amount Requested	45,845.		
Cost per Parolee	252.00		
Assessment Process	Ease of immediate movement will facilitate family, housing, health, and employment stability.		
6. Health Care Services			
Number to be Served	85	Paroleed 8/05 through 9/30/06; Has healthcare needs	Funding for medical service when ineligible for community resources. Expected outcomes are parolees prepared physically for work; decrease in communicable disease.
Amount Requested	55,250.		
Cost per Parolee	650.00		
Assessment Process	Physicals, dental work, eye glasses to facilitate employment. Screenings for communicable disease.		
7. Family Support Services			
Number to be Served	50	Paroled 8/05 through 9/30/06	Financial assistance not available in community; legal assistance not provided through other services, mandatory part of the TAP programming.
Amount Requested	30,000.		
Cost per Parolee	600.00		
Assessment Process	Provision of support and reunification activities and services that strengthen bonds, and eliminate legal barriers.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
8. Life Skills programs			
Number to be Served	565	Paroled 8/05 – 9/30/06; Programming required	All parolees will be mandatory to enroll in one or more life-skill programs – financial literacy; cognitive, anger management, parenting, ext. Expected outcomes greater ability to adjust, coping skills.
Amount Requested	36000.		
Cost per Parolee	64.00		

Assessment Process	Many have been away for years. Services will assist with family reunification, obtaining employment, community safety, and family stability.		
9. Adult Education			
Number to be Served Amount Requested Cost per Parolee	55 10,010. 182.00	Paroled 8/05 – 9/30/06; Lack of education training	Funding to provide transportation, tuition, books, supplies and training material. Expected outcomes are attainment of high school or secondary education, or skill training.
Assessment Process	Fifty-nine percent of Genesee County parolees lacked a GED or diploma at the time of their offense.		
10. Domestic Violence Services			
Number to be Served Amount Requested Cost per Parolee	15 22,500. 1,500.00	Paroled 8/05 – 9/30/06; victim, or abuser is parolee	Funding for domestic violence emergency shelter; move-in costs for relocation, group therapy, anger management, legal assistance for filing PPOs. Expected outcome is safety.
Assessment Process	Forty-seven percent of Genesee County parolees have assault offenses, 23% have more than one assault offense.		
11. Sex Offender Services			
Number to be Served Amount Requested Cost per Parolee	100 23,400. 234.00	Paroled 8/05 – 9/30/06; parolee is a sex offender	Funding for accredited sex offender programming before and after release. Expected outcome is prevention of re-offending, community safety without supervision, and treatment, sex offenders will likely offend again.
Assessment Process	Without supervision, and treatment, sex offenders will likely offend again.		
12. Victim Services			
Number to be Served Amount Requested Cost per Parolee	40 20,000. 500	Paroled 8/05 – 9/30/06; victim or offender is on parole	Funding for victim advocacy services, filing for PPOs. Expected outcomes are compensation, advocacy, and safety.
Assessment Process	Forty-seven percent of Genesee County parolees have assault offenses, 23% have more than one assault offense.		
13. Entitlement Programs			
Number to be Served Amount Requested Cost per Parolee	40 32,000. 800	Paroled 8/05 – 9/30/06; denied eligible benefits	Funding for legal assistance in obtaining benefits when eligible, but denied, or incapable of obtaining alone. Expected outcomes are economic stability and healthcare.

Assessment Process	Demographics of parolees that will be eligible for TANF, Social Security, and Veteran's benefits.		
14. Law Enforcement Services			
Number to be Served Amount Requested Cost per Parolee	30 8665.00 289.00	Paroled 8/05 – 9/30/06; need detainment	Funding for residential probationary housing when jail space unavailable. Expected outcome is continuity of supervision when required.
Assessment Process	Prevention of release when detainment or treatment required during jail over population.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
15. Prison IN-REACH & TAP Development			
Number to be Served Amount Requested Cost per Parolee	565 121,330/ 215.00	Parole 8/05 – 9/30/06; Pilot site preparation	Funding for equipment, supplies, case-manager, and MPRI training and travel.
Assessment Process	Preparation of the MPRI teams, staff, and facilities for program effectiveness.		
16. Other: _____			
Number to be Served Amount Requested Cost per Parolee	N/A N/A N/A	N/A	N/A
Assessment Process	N/A		
Sub Total Services Request	$495,000.00		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	75,0000.00	0	0	0	0	0	75,000
Training	0	0	0	0	0	0	0
Travel	0	0	0	0	0	0	0
Sub Total Management	$75,000.00						75,000

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	0	0	0	0	0	0	0
Contractual Services	55,000.00	0	0	0	0	0	55,000
Supplies	0	0	0	0	0	0	0
Equipment	0	0	0	0	0	0	0
Training	0	0	0	0	0	0	0
Travel	0	0	0	0	0	0	0
Other	0	0	0	0	0	0	0
Sub Total Adm. Costs &	$55,000. / 10%						$55,000.

SERVICES FUNDS REQUESTED	**$ 495,000.00**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000.00**
ADMINISTRATIVE FUNDS REQUESTED	**$ 55,000.00**
TOTAL REQUEST	$ **625,000.00**

Kalamazoo County - Summary

The reentry of ex-offenders into Kalamazoo County has long been the source of concern. Each year more than 10,000 inmates are released from state correctional facilities; 86% are under parole supervision with 14% discharged on maximum sentence. If things remain the same, history says that of the 8,500 inmates paroled, over 1500 will be returned as parole violators within 12 months of release. Over 3,600 of them will return to prison within 4 years. Between June 2004 and May 2005, there were 263 ex-offenders returned to Kalamazoo County. During that same period 233 were returned to prison; 106 for parole technical violations and 69 for new crimes. The problem of recidivism has become a crisis that affects all parts of the community. Recycling parolees in and out of families and communities has a number of adverse effects. It is detrimental to community cohesion, employment prospects and economic well being, family stability and childhood development, and mental and physical health and can worsen such problems as homelessness. The average annual cost of housing a prisoner is more than $30,000 - this figure does not take into account the associated victim, law enforcement, court costs, etc. - the effects on the state budget is disastrous. Kalamazoo County believes this cost is too high.

Since mid March 2003, there has been an intense series of meetings of a very diverse group of persons – approximately 60 from a variety of systems – both governmental and community-based. Importantly, there have been a number of ex-offenders involved in the discussions as full partners. The process was facilitated by the Kalamazoo Criminal Justice Council (KCJC) and the Office of Resource Development on behalf of the residents of Kalamazoo County. This project was named RETURN – **R**e-entry of **E**x-offenders **T**hrough **U**nique **R**esource **N**etworking, which now serves as the Advisory Board to the local MPRI initiative.

The goal of Kalamazoo's MPRI is to build on innovative ideas that reduce the recidivism and thus, reduce the overall amount of crime creating a safe community and better citizens by providing a seamless system of services from the time of entry into prison through transition, reintegration and aftercare.

Returning ex-offenders have the desire to be successful, but they lack the support needed to reintegrate into society where they are valued and can lead productive, law-abiding lives. Much of what ex-offenders encounter upon release to their communities can be anticipated and addressed. The problem is that for too long the standard approach has been to allow ex-offenders to fend for themselves with little or no community support or guidance. Kalamazoo MPRI will focus on the following critical reentry issues:

- Housing
- Employment
- Access to programs, services & supports

Housing

Housing has always presented a problem for individuals returning to their communities following a period of incarceration. Private property owners often inquire into the individual's background and tend to deny housing to anyone with a criminal record.

The federal government rewards public housing agencies points for documenting that they have adopted policies to evict individuals who engage in activity considered detrimental to the public. On the surface this seams to make sense. The design is to ensure public safety by removing a current threat. However housing officials have interpreted this mandate to cover individuals who happen to have a criminal history even though they may pose a current danger.

MPRI Kalamazoo has developed a partnership with local landlords that are willing to set-a-side housing units for the returning ex-offender population. MPRI will establish a Landlord's Damage Pool, which will minimize the landlord's risk. The ex-offender would not be required to pay a damage deposit, but upon leaving the unit, if there are damages, the landlord would have access to the damage pool for repairs.

MPRI Kalamazoo is working with local non-profit housing developers to create units within their developments for ex-offenders as well as advocate for policy change around Fair Housing Laws.

Employment
Based on a focus group with returning ex-offenders it was determined that the majority of inmates leave prison with no savings, no immediate entitlement to unemployment benefits, and few job prospects. The loss of much of the county's industrial base, has limited the job opportunities for parolees. Employers are increasingly reluctant to hire ex-offenders and with the current high unemployment rate they don't have any incentive to do so.

Unemployment is closely correlated to drug and alcohol abuse. Remaining unemployed can lead to substance abuse, which in turn is related to child abuse and domestic violence. Moreover, prisoners who have no job are unlikely to be able to meet court-ordered restitution owed to their victims or child support.

In addition to limitations on access to public housing, felony convictions lead to a number of employment barriers. Throughout the 1980s, in an effort to show a tough-on-crime stance, laws were put in place that restricted the employment opportunities for ex-offenders. These prohibitions generally assume the form of blanket restrictions rather than focusing on employment that might be related to an offense.

Although it is tempting to think of the employment problem in isolation, there is a connection between housing and employment. For example, the difficulty in finding housing also affects the ability of ex-offenders to secure and maintain employment. The relationship between stable housing and seeking and maintaining employment could be described as interconnected. Ex-offenders applying for work need to have an address and telephone number where they can be reached. Once employment, they need stability in order to handle the day-to-day stresses associated with work.

If families cannot or do not provide housing options for those returning from incarceration, such as sex offenders, then options are few. The temporary housing stock consists primarily of homeless shelters. These facilities tend to be crowded and lack any sense of privacy, making it difficult to be regarded as anything other than temporary lodging. This adds to the feeling of instability, which is often impacts employment performance.

MPRI Kalamazoo will create a service center specific to offenders that will create transitional employment opportunities for returning offenders. The service center will be created through an initial partnership with Goodwill Industries, Kalamazoo Valley Habitat for Humanity and County of Kalamazoo. The service center will have four primary goals; 1) Enable ex-offenders to secure employment that will help them attain economic self-sufficiency. 2) Help employers in Kalamazoo County recruit and retain qualified employees from the returning ex-offender population. 3) Build capacity of and cooperation with organizations that provides employment and training services. 4) Advocate for public policies and employer practices that expand employment opportunities for ex-offenders returning to Kalamazoo County and foster economic development for the community.

Access to Programs, Services & Supports
The increase in the number of ex-offenders released from prison has presented some public health challenges. Offenders tend to be sicker on average than the general population. According to the National Commission on Correctional Health Care (NCCHC), the increased occurrence of infectious diseases ranges from four times greater for active tuberculosis (TB) to 9-10 times greater for hepatitis C. In terms of mental illness, the prevalence of schizophrenia and bipolar disorder in the prison population is about 1-5 times greater than in the population as a whole, except for major depression, where the occurrence are roughly equivalent.

While in prison, inmates have State-provided health care, but upon release most cannot easily obtain health care. Returning offenders rely heavily on the public sector for health care services; however, they will be returning to communities and neighborhoods with limited health care resources at a time when the public health system and America's "safety net" are severely strained.

Economic obstacles are complicated by the profound substance abuse and mental health problems that often trouble ex-offenders. Last year of the 263 returnees, 48% had drug problems, 39% alcohol issues, and 34% were identified with drug and alcohol problems. Sixty-two percent were identified with substance dependence issues.

These individuals often face serious, sometimes life-threatening, health problems. Mental disorders are also common among this population. Rates of mental illness are, by some estimates, as high as four times the rate in the general population. Providing more accessible treatment for mental and substance abuse could help stabilize these conditions and enable individuals to maintain housing and employment. However, resources are limited.
Kalamazoo MPRI will use a case management model that is practiced social service providers; the Parole Agent (case

manager) with the support of the Transition Team, assesses the individual offender's service needs, and then arranges, coordinate, and monitor appropriate services. They also evaluate ongoing needs and as necessary, advocate on behalf of their clients.

The Parole Agent with the support of the Transition Team will work to overcome any fragmented social service delivery systems, where services reside in multiple levels of government, community-based organizations and faith-based programs, which all have their own eligibility requirements. This will ensure a seamless system of services through reintegration and after care.

Kalamazoo MPRI will use a strength-based approach to partnership with families, which offers several advantages the community. Families are experts in their loved ones' behavior and motivation. Families have a long history with one another and therefore are often the first to notice an impending relapse or noncompliance with a condition of release. Family members can exert a powerful influence on their loved ones. While incarceration cuts people off from local resources, families have been living in communities during their loved one's absence. Most have connections and contacts already in place. The strength-based model will blend family support and partnership with government. This integrates the micro (family) and macro (government and community) levels. The strong point in this configuration is that it identifies and recognizes existing resources, facilitates collaboration, and coaches the family in tapping those resources.

Kalamazoo MPRI also realizes that the complex social contexts surrounding women transitioning form prison requires unique solution in the case management delivery system. Kalamazoo MPRI will use an approach that is advocacy-oriented and embraces a "stage of change" methodology. The essentials include: a TAP using a strength-based approach, development of a service plan to address needs and interests identified in the TAP, service referrals and service monitoring including utilization tracking.

Evidence Based Practices

Each program provider selected will develop and maintain a system of on going risk screening and needs assessments for returning offender. We will develop and use assessment tools that focus on dynamic and static risk factors, profile criminogenic needs, and have been validated on similar target populations. Each service provider selected will adopt a policy to relate to offenders in a way that is interpersonally sensitive and will enhance their intrinsic motivation. Motivational interviewing techniques will be used to more effectively enhance their motivation for behavioral change.

The program will prioritize supervision and treatment resources for the higher risk offenders. Interventions will be targeted toward criminogenic needs and individual characteristics will be considered when matching offenders to services. It is the intent of the program to occupy 40% - 70% of the offenders' free time over the grant period.

Only service providers will be used that are trained in cognitive-behavioral strategies. Positive reinforcement will be used to achieve sustained behavioral change. Where appropriate, a ratio of four positive to every one negative reinforcement will be used to encourage behavioral change. However, positive reinforcement will not be used at the expense of nor to undermine administering swift and certain responses for negative and unacceptable behavior.

Kalamazoo MPRI will actively engage pro-social community organizations such as Northside Ministers Alliance, ISAAC, JUSTUS House, Open Door / Next Door for support to ensure successful interventions with the returning ex-offender population. The Steering Committee will monitor and collect data on a monthly basis. The data will be evaluated to ensure that the programs are producing the desired results and that the services are having the greatest impact on the offender's successful reentry. Expenditures will be monitored to ensure that the Kalamazoo MPRI is making the most efficient use of tax dollars. Programs that are not producing the desired results will be replaced.

The measures that will indicate success will include; parolees commit fewer crimes, parolees commit fewer technical violations, time before returning to prison is increased and fewer parolees return to prison. The measures that will be monitored include; technical violation return rate, length of time, returned to prison and the impact on run-out-of-beds date.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	40	Returning offenders that have housing needs upon release.	There is an over all lack of affordable housing in Kalamazoo County and federal barriers prevent felons from obtaining subsidized housing, limiting housing opportunities. MPRI Kalamazoo will provide housing subsidizes for returning offenders whose TAP has identified housing need. This will include the first months rent plus a deposit into a damage liability account from which potential future damage costs to the landlord could be covered.
Amount Requested	$35,000		
Cost per Parolee	$875		
Assessment Process	The Transitions Team will reviewed the ex-offender's TAP and met with each ex-offender to assess their housing needs and the level of service that they would require.		
2. Workforce Development Services			
Number to be Served	80 to 148	Returning offenders that have difficulty obtaining employment upon release	Institutional barriers to employment limit the ex-offender's opportunities. High unemployment in general increases the difficulty to obtain employment. MPRI Kalamazoo will create a service center specific to offenders that will create transitional employment opportunities for returning offenders. The service center will be created through an initial partnership with Goodwill Industries, Kalamazoo Valley Habitat for Humanity and County of Kalamazoo. Goodwill will serve as the employer of record and area non-profits will provide the work site experience. There are four distinct outcomes of this service area. 1) A part time job coach (24 hours/week) providing on the job support to help employed persons maintain jobs at $18,000 and serving 121 individuals. ($149/ea.parolee) 2) Employment related costs such as getting ID's, clothes for interviews or jobs, bikes, watches, alarm clocks and other unique returnee supports - $25,675 serving 148 individuals. ($173 per parolee) 3) Temporary employment of 80 people at $8/H (plus$3/H costs) X 25 H/wk. X an average of 8.5 weeks. Total cost $187,000. ($2,338 per parolee) 4) A full time job developer developing employment options and identifying and engaging "ex-offender friendly" employers at $64,650 and serving 148 individuals. ($437 per parolee) Other factors such as longevity, effectiveness and efficiency will be monitored.
Amount Requested	$255,325		
Cost per Parolee	Varies		
Assessment Process	The Transitions Team will review the ex-offender's TAP and met with each ex-offender to assess their employment needs and the level of service that they would require. Each individual will complete an interview process to ensure highest level of success.		
3. Substance Abuse Treatment			
Number to be Served			

Amount Requested			
Cost per Parolee			
Assessment Process			
4. Mental Health Treatment			
Number to be Served	37	Offenders released that have mental health issues that are otherwise not covered.	Based on the results of the Short Term funding, only a small percentage of returnees emerge with diagnosed mental health issues. Often, those who come home are suffering from co-occurring disorders (mental health and substance abuse, for example). Projected at 15%. Outcomes would include # assessed, # diagnosed, # referred into service, and # of those who do NOT recidivate.
Amount Requested	$18,500		
Cost per Parolee	$502		
Assessment Process	The Transitions Team reviewed the ex-offender's TAP and met with each ex-offender to assess their needs and the level of service that they would require.		
5. Transportation			
Number to be Served	148	Offenders released without the means of transportation	MPRI Kalamazoo will provide bus tokens to the offender participating in the Workforce Development Program to ensure that they have transportation to job interviews, work sites and to make other scheduled appointments. Outcomes would include # of tokens given out for various, average time before individuals are able to secure own transportation, # of parolees who lose jobs for other reasons than transportation.
Amount Requested	$8150		
Cost per Parolee	$55		
Assessment Process	The Transitions Team reviewed the ex-offender's TAP and met with each ex-offender to assess their needs and the level of service that they would require.		
6. Health Care Services			
Number to be Served	40	Returning offenders that have health care needs and lack adequate resources or insurance coverage	Parolees with no resources go without or experience long delays in obtaining needed medications and treatment. There is a lack of knowledge of chronic disease when offenders leave prison. While in theory all returnees have had health assessments, their records are not readily available; local health providers need a current assessment to provide medication. The Kalamazoo County Health Plan-the option that would be available-has very limited enrollment. These funds will cover the initial period following release until other resources are available. Outcomes will include # served, # referred to other systems, barriers that evolve.
Amount Requested	$10,000		
Cost per Parolee	$250		
Assessment Process	The Transitions Team will review the ex-offender's TAP and met with each ex-offender to assess their needs and the level of health services that they might require upon release.		
7. Family Support Services			
Number to be Served	24	Offenders returning that	Incarceration of a parent has profound impact on family dynamics as a whole and upon children in particular. When the
Amount Requested	$8,000		

Cost per Parolee	$333		
Assessment Process	The Transition Team will review the ex-offender's TAP and met with each ex-offender to assess their needs and determine if they want to participate in the family reunification program.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
8. Life Skills programs			
Number to be Served			Cognitive Therapy programming
Amount Requested	$40,000		
Cost per Parolee			
Assessment Process			
9. Adult Education			
Number to be Served	132	Offenders returning without GED	While it is the goal that ex-offenders returning to the community will have at least a GED, many do no not and are in need of educational assessment to determine additional training needs. It is estimated that the 132 returning offenders will need educational screening to fully assess their needs and the level of educational services that they might require. Outcomes could include; #of returnees who secure GED after release, # of returnees who continue on to college or trade school.
Amount Requested	$13,200		
Cost per Parolee	$100		
Assessment Process	The Transitions Team will review the ex-offender's TAP and met with each ex-offender to assess their needs and the level of service that they would require.		
10. Domestic Violence Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
11. Sex Offender Services			
Number to be Served			
Amount Requested			
Cost per Parolee			

Assessment Process			
12. Victim Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
13. Entitlement Programs			
Number to be Served	21	Offenders returning that have a disability which prevents them from maintaining a job	Individual returning from prison with disabilities find it increasingly more difficult to integrate successfully in the community. It is estimated that 21 returning ex-offenders will disabilities and need case management, employment accommodation / accessibility advocacy and vocational training. Outcomes will include: # eligible served by MRS, Type and # of services received, impact of services received.
Amount Requested	$27,000		
Cost per Parolee	$1,286		
Assessment Process	The Transition Team will review the ex-offender's TAP and met with each ex-offender to assess their needs and the level of service that they would require.		
14. Law Enforcement Services			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
15. Prison IN-REACH & TAP Development			
Number to be Served	181-263	Offenders returning to	**30 Days Prior to Release** – The Transition Team lead by the Parole Agent works with ARUS to develop the reentry plan; Share
Amount Requested	$72,325		

Cost per Parolee	varies		
Assessment Process	The Transition Team will review the ex-offender's TAP and met with each ex-offender to assess their needs and the level of service that they would require.		
16. Other: _____			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
Sub Total Services Request	$487,500		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$60,000						
Training	4,500						
Travel	3,500						
Other	7,000						
Sub Total Management	$75,000						$75,000

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Contractual Services							
Supplies							
Equipment							
Training							
Travel							
Other							
Sub Total Adm. Costs & Percent	$62,500 / 10%						$62,500

SERVICES FUNDS REQUESTED	**$ 487,500**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$ 62,500**
TOTAL REQUEST	**$ 625,000**

Kent County - Summary

Assets

Kent County has several advantages as they begin to implement the MPRI model. More than 32 organizations and 80 individuals have had the benefit of being actively involved in the ground work of designing this model. This group has been in collaboration for over three years with the goal of removing barriers to successful re-entry into the community for all ex-offenders. The result is a commitment to a community wide model of re-entry that:

- Results in safer communities due to reduction in crime
- Less cost to tax payers as prison recidivism decreases
- Is built around a vocational model that provides incentives for job retention, rather than just placement
- Is built around the needs of employers to attract and retain a skilled and dependable workforce; and utilizes employers in a key oversight role during training and certification of participants and providers
- Wraps services and supports around the vocational model to minimize barriers that often result in loss of jobs and frustrated employers
- Maximizes all existing resources, and seeks funds (including MPRI) from many sources to fill gaps

There is a great atmosphere of collaboration among our corporate citizen neighbors, community partners, faith-based organizations, public and elected officials and government agencies that are willing to be open minded and educated on meeting the emerging needs and challenges of community reentry.

The Reentry Roundtable is a great resource and important component to Kent County. Already, the Roundtable has been the vehicle for collaborative efforts which have resulted in:

- Grant funds from United Way, and other private foundations for various key components of work such as marketing to employers to join our effort
- Successful U.S. Department of Labor grant funding to ASCET (our Michigan Works! Organization) to fund Faith Based organizations doing the work consistent with our vocational based model (called the Employment Resource Center)

Kent County has many organizations that currently provide services to ex-offenders and have years of experience working with the targeted population. The Kent County community is excited about the MPRI potential, as the MPRI model shares key core values of:

- The need to “supplement not supplant” existing funding of services-in order to fill gaps and not duplicate efforts/services
- Utilizes a fair and open system for selection of qualified providers from public, private and faith based sectors
- Requires a comprehensive community-designed plan and a qualified, experienced fiscal agent, in order to and prior to receipt of any service funding

In summary, there is an on-going collaborative effort (and in fact, a well developed, solid model); which once implemented and refined will reduce crime, create safer neighborhoods and produce better citizens.

Barriers

The community continues to identify barriers to successful re-entry programming. In fact, the Re-Entry Roundtable has created active task forces in the following areas to create plans to address barriers in specific areas. Details about the scope of the work of these task forces are available through Re-Entry Roundtable records. There are active task forces working in the following areas:

- Public Relations/Education
- Policy/Legal
- Employment Resource Center/Vocational and Life Supports (including housing, transportation, employer marketing and more)
- Faith Based Services
- Women's Services
- Funding Acquisition

Gaps

In addition to working to eliminate the barriers noted above, our community hopes to begin to bridge gaps in needed services, utilizing MPRI and other funding sources. The gaps that are **Local Priorities** for our community include;

- Increasing the number of employers willing to employ parolees
- Increasing access to affordable healthcare which is a major issue given the current statistics on Hepatitis C
- Increasing access to affordable housing which is compounded for sex-offenders
- Building solutions to compensate for the lack of public transportation during second and third shift and on weekends
- Carefully funding key services which are less available now due to budget cuts prevalent throughout substance abuse, mental health and health care agencies
- Ultimately, the concept of Corrections and the community working together is relatively new. There is a learning process taking place that will only be accomplished by a collaborative, cooperative effort from all
- Extending the time frames and scope of funding of services and supports from employment and training providers, resulting in better job retention and increased willingness to hire offenders by employers
- The need for increased supervision on the evenings and weekends in transitional housing units. Thus, allowing existing affordable housing capacity to be available to ex-offenders
- The need for gender specific curriculum and services, especially sensitive to the needs of women offenders
- Family Re-Unification where possible – Family Support Services
- Faith –based involvement, Mentoring where requested
- Intensive Vocational Case Management/Retention Services
- Adult Education
- Sex Offender Services
- Victim Services

Plan

Kent County's plan is to begin working with parolees prior to release on issues identified by the Transition Team, In-Reach services, and will coordinate services with community service agencies, using the TAP case management plan as a guide.

- A need assessment will be completed for housing, substance abuse, mental health, healthcare, family re-unification, faith-based involvement, transportation, education and employment/vocational services.
- Parolees will be connected to available community resources
- Parolees will develop significant relationships with Transition and In-reach team members and community service providers
- Parolees will become actively engaged in the development of case management plans and will begin receiving supportive programming prior to release and while in the community.
- Parolees will receive seamless services that will enable them to function is the community as a productive citizen
- Parolees will receive assistance with supports indicated in Transition Accountability Plan, allowing for a successful transition back into the community

Case Management Strategy

The Parole Agent and In-Reach Case Coordinator will work closely with community service providers to deliver seamless support services to parolees who are transitioning back into the community. This will be a joint effort between the Parole Agent, In-Reach Case Coordinator, and Transition team and institution staff.

The transition team or representatives will meet with the parolee at the institution for a face to face interview or via video conference prior to the parolees release to begin the transition process of returning home. This plan will include establishing connections between the Parolee, Transition Team and service providers. It will also provide the framework for developing the staying home plan. This plan will include level of supervision, parole conditions, service and treatment plan agreements that will have input from all participating parties. The goal of this strategy is to fill the gaps in services that could prevent the parolee from successfully transitioning back into the community.

Evidence based practices

Kent County will use methods consistent with the practices outlined in this document and the benchmarks for success established in collaboration with the Department of Corrections and fiscal agent.

Gender Responsive Strategies

There are several organizations noted throughout this document, which have several years of experience programming around gender specific services. We will collaborate and network resources with these agencies to ensure inclusion of gender specific services. These agencies are very knowledgeable of issues that are specific to women; reunification, parenting skills, domestic violence, self-esteem, health and substance abuse issues etc. and address these topics in their programming.

Short and Long Term Goals

Our community is very interested in building a solid evaluation component in our model. A fully developed evaluation component may alter or expand our long and short term goals. However, our community plan must still include the following goals:

Short Term:

By September 30, 2006 we will accomplish the following with MPRI funding;

- 48 parolees who exit the Corrections system without housing, will obtain stable housing
- Create a supervised and secure short term housing alternative
- 95 parolees will engage in employment, with wrap around services in life management skills, coping strategies, employment search assistance, employment retention services, create a vocational resource network that maximizes the community availability of critical areas of family support not otherwise available
- Provide appropriate substance abuse services to 36 parolees with a history of substance abuse that could hinder their ability to obtain and maintain employment, and to secure and maintain stable housing
- Provide appropriate out-patient and mental health services to 19 parolees who do not qualify for
- CMH(network 180) services and who would otherwise not receive mental health services and for whom mental health issues are a barrier to employment and housing retention
- Increase success with meeting conditions of parole and retention of employment by increasing access to transportation through use of traditional and creative, affordable solutions, fund transportation for specific appointments related to parole requirements, and activities to obtain and retain employment

Long Term:

By September 2009, we will have a fully operational model serving parolees and at least one other sub population, funded by non MPRI funds.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served Amount Requested Cost per Parolee	48 $72,000 $1,500	A parolee who is determined homeless through TAP2 information or through the case manage-ment and monitoring	There is an overall shortage of affordable, transitional, and emergency housing in Kent County. Temporary housing is almost non-existent. There is the possibility of free emergency shelter assistance through Mel Trotter or Guiding Light Mission, but a parolee will encounter a wait due to lengthy waiting lists. Expected Outcomes; for parolees to secure temporary housing until a more permanent arrangement can be obtained, create an environment where parolees can focus on successful reentry rather than basic shelter etc.
Assessment Process	Parole Agents and Transition Team will determine through information collected in TAP 2 or from case management of parolee upon release. This information will be used to determine and confirm that no other community placement exists or there are no financial means available to secure temporary or permanent housing.		
2. Workforce Development Services			
Number to be Served Amount Requested Cost per Parolee	95 $127,500 $1,342	Parolees who are determined high risk for employmen t failure i.e. lengthy periods of prison stays, limited or no work history.	High rates of unemployment increase the difficulty of parolees obtaining employment. These difficulties are compounded by lack of employment history, limited social and employability skills, and felon status that could impede the parolee's ability to effectively job search and obtain employment. Participating parolees will receive transitional work experience, job search assistance, case management and retention follow-up. Expected Outcomes; 58% of Kent County parolees (June 1, 2004 through May 31, 2005) were unemployed at the time of their offense. We are proposing to make a significant change by providing the intensive vocational services detailed in Part 2 of this proposal.
Assessment Process	Through in-formation received from TAP 2, individuals who are high risk for employ-ment failure i.e. lengthy in-carceration Limited or no work history/skills will be assessed and prepared for employment.		
3. Substance Abuse Treatment			
Number to be Served Amount Requested	36 $100,000	Parolees who have significant history of chronic drug use and relapse.	Substance Abuse services are limited due to several funding cuts and the parolee's inability to pay. Funding would eliminate the barrier cost due to lack of insurance. It would enable parolees to receive out patient, intake assessments with on-going group therapy. During the period of June 1, 2004 through May 31, 2005 45% of parolees experienced drug problems, 36% alcohol problems, 61% were determined substance dependent (SASS1 3 or 4) in Kent County.

Cost per Parolee	$2,778		
Assessment Process	Through information obtained in TAP 2, parolees that have been identified to have a significant history of recovery relapses and/or a condition of their parole, parolees who indicate a desire or need for substance abuse services will be referred to appropriate service		
4. Mental Health Treatment			
Number to be Served	19	Parolees who have had previous mental health contacts, parolees who have an active mental health diagnosis at the time	Due to several budget cuts in mental health services, and limited funding, additional monies would be necessary to expand mental health services to parolees. During June1, 2004 through May31, 2005 12% of parolees were determined to have previous mental health contacts and 5% had active mental health diagnosis at the time they were paroled. Expected Outcomes; parolees who receive mental health services will decrease their possibility of returning to prison due to not receiving proper care, increase of productivity from parolees that have active mental health diagnosis.
Amount Requested	$15,000		
Cost per Parolee	$789.50		
Assessment Process	Through information obtained in TAP 2, parolees who have had previous mental health contacts and are displaying a need for further treatment, or who has an active mental health diagnosis at the time of his/her parole.		
5. Transportation			
Number to be Served	120	Parolees who do not own vehicles and are solely dependent on others for transportation.	Funding will allow parolees who have no other means of transportation the ability to be self-reliant and accountable with keeping scheduled appointments and accessing services and activities in the community. Expected Outcomes; Improve parolee's ability to make scheduled appointments, to job search and maintain employment independently as it relates to transportation.
Amount Requested	$39,909		
Cost per Parolee	$332.60		
Assessment Process	Information obtained from TAP 2 will serve as a reference, verification of need from Parole Agent, Transition Team, or Mentors.		

6. Health Care Services			
Number to be Served	112	Parolees who require follow-up services for chronic illnesses, parolees who are unable to initially obtain private insurance and are not eligible for	Of the 50,000 uninsured in Kent County, only 10,000 are being served through Kent Health Plan. The rest may or may not be receiving services and end up in the emergency room for care which is much more costly to the community. Hospitals and other clinics do provide services at discounted or free rates if they are at a 150% of poverty level of less. However, there are back logs of community residents who are and have been on waiting lists for these services. That will place parolees at a greater disadvantage. Funding in this area is necessary; given the rate of HCV infection among prisoners (8 to 20 times higher than in the general population) Most safety net providers do not have available funding to provide comprehensive services for HCV. Expected Outcomes; parolees are able to have medical needs met, healthier lifestyles, and the ability to effectively address
Amount Requested	$31,000		
Cost per Parolee	$275.00		
Assessment Process	Information obtained from TAP2, parolees who have been diagnosed with chronic illnesses, those determined unable to provide medical insurance.		
7. Family Support Services			
Number to be Served	111	Parolees who express a need that can be verified by Parole Agent, Transition Team, or Mentors, parolees who have significant issues around family re-unification.	Parolees do not qualify for most emergency services. Funding would allow the parolee to acquire the basic essentials as her or she makes their transition back into the community. If a need for clothing, food, identification, documents or work equipment was determined and verified, immediate assistance could take placed. Expected Outcome; Parolees will have appropriate attire for job search and employment, they will have the ability to maintain acceptable/required identification, maintain appropriate nourishment for healthy lifestyle, parolees re-establishing relationships with families. Funding in this area will also be used to support the role of a mentor who will be working with the parolee on the above expected outcomes.
Amount Requested	$40,800		
Cost per Parolee	$366.66		
Assessment Process	Through consistent case management and communication with Parolees, Mentors, Reentry Parole Agents, and Transition Team, any emergencies that occur and that can be verified will be addressed immediately.		
8. Life Skills programs			
Number to be Served	0	N/A	No funding requested under this service area.
Amount Requested	0		
Cost per Parolee	0		
Assessment Process			

9. Adult Education			
Number to be Served Amount Requested Cost per Parolee	30 $7,000 $233.33	Parolees who have G.E.D. obtainment as a parole condition, or who have expressed an interest in doing so.	All Adult Education programs county wide have faced severe budget cuts and staff reduction. State laws for G.E.D. programs will make it even more difficult for parolees to access these programs. Funding will allow programs the flexibility to work collaboratively on creative ways to accommodate parolees i.e. implement on site programs where parolees are already receiving services, collaborate with the agencies that can expand their existing services/staff with additional funding. Expected Outcomes; increase the number of parolees who have a G.E.D. or Diploma. Statistics show that from June 1, 2004 through May 31, 2005, 55% of parolees in Kent County had less than a G.E.D. or Diploma at the time of commitment.
Assessment Process	Using the information obtained from TAP 2, individuals who have G.E.D. obtainment as a parole condition will be referred and placed in Adult Education services. Others who indicate this as a goal will also receive services.		
10. Domestic Violence Services			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.
Assessment Process	N/A		
11. Sex Offender Services			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.
Assessment Process	N/A		
12. Victim Services			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.
Assessment Process	N/A		
13. Entitlement Programs			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.
Assessment Process	N/A		
14. Law Enforcement Services			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.

Assessment Process	N/A		
15. Prison IN-REACH & TAP Development			
Number to be Served Amount Requested Cost per Parolee	120 $55,000 $458.33	All parolees under the MPRI Pilot program will receive in-reach services and will participate in TAP develop-ment.	Funding in this area will allow compensation for Transition Team expenses. Transition Team will consist of service providers and a community representative that will need to have travel, interview time etc. covered. Expected Outcomes; a well rounded transition team that will contribute to the delivery of seamless services and the development of quality TAP'S and case management plans.
Assessment Process	Parolees will be identified at least 60 days before release for in-reach services. The Reentry Parole Agent will obtain TAP 2 information and provide to Transition Team for review and staffing of needs, appropriate e team members will conduct interview etc. and a team approach will be used for delivery of services and development of TAP 3.		
16. Other: _____			
Number to be Served Amount Requested Cost per Parolee	0 0 0	N/A	No funding requested under this service area.
Assessment Process	N/A		
Sub Total Services Request	$488,209		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$68,000						$68,000
Training	$4,000						$4,000
Travel	$3,000						$3,000
Sub Total Management	$75,000						$75,000

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$47,791						$47,791
Contractual Services	$5,000						$5,000
Supplies	$500.00						$500.00
Equipment	$3,000						$3,000
Training	$1,000						$1,000
Travel	$2,000						$2,000
Other	$2,500						$2,500
Sub Total Adm. Costs & Percent	$61,791 %						$61,791

SERVICES FUNDS REQUESTED	**$488,209**
COMPREHENSIVE PLAN MANAGEMENT	**$75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$61,791**
TOTAL REQUEST	$625,000

Macomb County - Summary

The key asset in place is established relationships with community stakeholders that encompass all of the service areas i.e. housing, substance abuse, mental health, victim services, specialized sex offender treatment, etc. The other vital assets include: 1) Free emergency housing, 2) Temporary employment services, 3) Twelve-step programs for the targeted "High Risk" offenders, 4) Community Mental Health funds mental health services for eligible individuals, 5) Macomb County Health Department has free STD and HEP C testing for eligible individuals, 6) Family orientated community, 7) "Best Practice" Domestic Violence programs, 8) Prison staff, parole agents, community/faith-based organizations, service providers and others involved with the MPRI – MACOMB Project are dedicated to achieving lower recidivism, safer neighborhoods, and better citizens.

Community assessments revealed barriers in housing with low gender-specific placement availability. The currently high unemployment rate in Michigan blocks access to higher-paying jobs for those who lack strong employability skills. Community transportation may not be accessible because of location and/or time schedules. Many offenders have no health/mental health insurance coverage which blocks access to health care, substance abuse treatment, mental health services, family support services, domestic violence counseling, etc.

The first of three primary gaps the community assessment exposed is insufficient funding to apply EBP target intervention principles i.e. dosage, risk/need in service delivery programming within the areas of substance abuse, domestic violence, family support services, In-Reach programs, etc. The second gap is the time lapse between re-entry and access to community-based medical and/or mental health services. The third gap is the lack of personal belongings, monies, transportation, employability skills, community placements with family, and family involvement in re-entry programming. A local issue that causes concern is the possible onset of gaps in available specialized community services for sex offenders and women. The low amount of sex offenders and women that are paroled to this community may result in service delivery gaps in housing, treatment/counseling services, etc. because of a lack of need for these services. Other community concerns include the currently low availability of gender-specific housing for women and children, the high unemployment rates, homelessness, crime, and recidivism rates which directly affect members of the community.

The first of two short term goals for the MPRI – MACOMB Project is to increase our community connections with Faith-based organizations by assisting with the mentor program and support in establishing additional housing opportunities for women and children. The second short term goal is to rekindle and/or establish new community relationships by having an community-based informational gathering followed by personal requests to join the
MPRI – MACOMB Project team. Long term goals include seeking and acquiring additional funding for necessary services, development and implementation of measurement processes and feedback.

The priorities for this community are a) Increase public safety and reduce recidivism rates by implementing "Best Practice" strategies to increase offender supervision, b) Increase offender transition success rates by providing
"In-Reach" and community programming with application of appropriate EBP principles in service delivery, staff training, program evaluation, etc. c) Provide specific programming to address targeted populations i.e. unemployed, substance abuse, and assault/aggressive offenders. (Refer to MPRI Pilot Target Population Information sheet)

The responsibilities of all case managers i.e. prison staff, parole agents, service providers, MPRI steering and transition teams etc. will be to ensure a seamless transition from prison to community by providing community supervision and support, accurate TAP 2's (Transitional Accountability Plans) and pertinent feedback in team meetings. To address gender responsive strategies related to EBP principles, the case managers will work with each other to ensure appropriate service delivery i.e. housing, medical, etc. and treatment programming i.e. parenting classes, "women only" 12 step meetings, are encouraged and provided within the community.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	40	No Community Placement, indigent, and identified need.	The identified individual, which includes women and sex offenders, in this service area will have no adequate housing upon release and there are limited community services accessible to them for housing. There are community agencies that provide rooms for rent with immediate occupancy when available. Among these housing units, there are designated places for women with children. Funding for short-term housing for the amount of $90.00 each, per week for 3 months is requested for these offenders. There are individuals that will require assistance in obtaining permanent living arrangements and an amount of 1,400 each for security deposits, first and last month rent payments (typically required for occupancy) is also requested. Providing these services with funding will facilitate a seamless transition into the community with secured housing for an extended period of time if necessary.
Amount Requested	$46, 500		
Cost per Parolee	$1, 163		
Assessment Process	Individuals requiring these services have been and/or will be identified through needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
2. Workforce Development Services			
Number to be Served	40	Identified need, indigent, lack of appropriate clothing/ work equipment.	Identified offenders are without personal clothing, have no personal monies and have no identified services accessible to them in this service area. Clothing vouchers available from the local resale stores such as St. Vincent De Paul, Second Hand Rose, and Salvation Army. Purchasing $2,000 worth of clothing vouchers will provide these individuals with their basic clothing needs. Individuals that possess work ready skills with no available monies for work equipment will require funding. Purchasing the necessary equipment with funds of $3,000 for this population may eliminate the need for further training and/or employment needs. Using the premise of positive reinforcement and intrinsic motivation, purchasing 6 scholarships for $2,500 each to provide inclusive training from local agencies will be awarded to those individuals that exhibit genuine internal motivation evidenced by successful completion of required parole conditions with no sanctions. Other factors such as community involvement will also be the markers for determining scholarship awards. Providing the funding for these services will assist in preparing the identified individuals for a job and/or vocation. Funding the above-mentioned services will be fundamental for successful outcomes while utilizing the EBP principle of Criminogenic need.
Amount Requested	$20, 000		
Cost per Parolee	$500		

Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
3. Substance Abuse Treatment			
Number to be Served	120	Identified high-risk for relapse, identified need, parole condition, No insurance coverage and Insufficient personal financial resources for treatment costs.	Offenders being released during the FY 2006 timeframe and having been identified with a high risk of relapse and/or recidivism, and no available insurance or monies for substance abuse treatment will require upfront services with the EBP principles of dosage and need being utilized. Providing funding for an intake/admission at a cost of $90.00 each to an outpatient substance abuse treatment agency (with qualified therapists in this field and with this population), a one-day TIP (Trigger Identification Program) workshop to be offered immediately after release at a cost of $100.00 each, followed by weekly individual sessions for 2 months, bi-weekly for 2 months, and monthly for 2 months at a cost of $80.00 for each session; each individual in addition to group therapy sessions weekly for 6 months at a cost of $20.00 per session, per individual which will be based on need and correlated with community involvement in twelve-step programs. This treatment regimen will evidence EBP implementation and application of dosage. Providing funding in this service area should result in an expected outcome of less relapse rates in this crucial time-frame which is likely to result in less recidivism. Utilizing the EBP principles of dosage and need, the expectation would be the prevention of a potential relapse and/or return to criminal behavior. Special consideration will be made to address the unique differences relating to women and recovery from addiction.
Amount Requested	$190,800		
Cost per Parolee	$1,590		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to substantiate the required need for service in this area. Utilizing previous substance abuse histories and relapse information for identified offenders will verify the risk/need for this type of intervention.		
4. Mental Health Treatment			
Number to be Served	30	Identified need. No insurance coverage and Insufficient personal financial resources for treatment costs.	Offenders being paroled with an identified mental health disorder which has been diagnosed by qualified Psychiatrists within the prison or in the community prior to incarceration will require immediate upfront services to ensure uninterrupted mental health treatment while assisting them to acquire possible pro bono services offered through community mental health services. The gap exists between the time they are released and the obtainment of community services. To fill this gap efficiently, services requiring funding will include a psychiatric evaluation at $150.00 for each offender and for those identified as requiring medication with reviews, an amount of $60.00 for follow-up medication reviews for 3 months, and prescription coverage at a cost of $100.00 per month for 3 months. Mental health counseling will consist of weekly individual sessions for 2 months, bi-weekly for 2
Amount Requested	$54,600		

Cost per Parolee	$1,820		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to substantiate the required need for service in this area. Utilizing previous mental health histories and medication information for identified offenders will verify the risk/need for this service.		
5. Transportation			
Number to be Served	75	Identified Need, No personal finances for transportation. No Driver's License. Parole Condition of no driving.	An offender returning to the community without sufficient transportation creates a gap in access to employment, treatment, and other community services that have been identified as needs for a seamless transition from prison to community. The public transportation system is effective for commute however; there are instances when the service is unavailable due to location and/or time. Funding to provide bus cards/passes for 3 months at a cost of $50.00 per pass to those offenders with an identified need for transportation and lack of monies will effectively fill this gap which may result in other gaps being filled. There are individuals who may require transportation in the form of a bicycle with lock due to the close proximity of home to work, treatment, and other community services. Providing this form of transportation, when indicated, is advantageous to cost effective solutions. The bicycles will be purchased from resale shops when applicable while others may be purchased new. An amount of $1,000 in funding is requested for this service. The bicycles will become the property of the individual and/or may be returned to the resale shop for recycling purposes (no pun intended!). The outcome of funding of this service will result in offenders obtaining and maintaining employment, ability to access required services such as treatment, and the capability to participate in other community services i.e., 12-step programs. This will promote intrinsic motivation and advance positive reinforcement between the offender and their community.
Amount Requested	$12,250		
Cost per Parolee	$163		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
6. Health Care Services			
Number to be Served	15	Identified need. No insurance coverage for	The identified offenders in this service area will require immediate medical care upon release which will be indicated through prison medical records and/or self-report. Women identified in this

Amount Requested	$10,000		
Cost per Parolee	$670		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
7. Family Support Services			
Number to be Served	50	Identified need for family	The offenders in this service area anticipate family reunification and through the assessment process, family support services

Amount Requested	$41,150		
Cost per Parolee	$823		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area. If necessary, contact with pertinent family members may be arranged by one of the offender's case managers to determine family receptiveness and motivation.		
8. Life Skills programs			
Number to be Served	75	Identified high risk for recidivism. Lack of	Offenders identified as high risk through Transition Accountability Plans (TAP 2) and recognized through diagnosis of criminal/anti-social personalities which assumes an inability to function effectively in a natural environment will require life-skills. One gap
Amount Requested	$13,300		

Cost per Parolee	$177		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigations by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
9. Adult Education			
Number to be Served	25	Identified need. No personal finances, parole condition, and/or lack of employability skills.	Identified offenders in this area are returning to the community without adequate academic knowledge to navigate successfully in the world of technology and advanced skill requirements. Some offenders do not possess sufficient employment skills or academic degrees i.e. GED, High School Diploma, etc. to further their ability to obtain and maintain adequate employment. Funds to be used for the purchase of adult-orientated work/skill development courses offered through community public schools in the amount of $150.00 per course, 3 courses each, (if indicated) is requested. Funding for this service area would increase an offender's employability and promote intrinsic motivation with achievement of a desired goal. The purchase of psycho-social DVD's/Videos that provide adult focused material about employment, social, self-esteem, and goal attainment skills, etc. in the amount of $2,000 that will be utilized at the parole office and correctional facility. Using DVD's/Videos is an inexpensive method of positively reinforcing the necessary corrections/changes that will promote a functional, community orientated, mature lifestyle. Funds in the amount of $1,655 to be used for course completion incentive gifts for the graduates is requested for the purchase of an additional course (recreational), dining, video rental certificates, etc. which will evidence successful application of the principle of positive reinforcement.
Amount Requested	$14,905		
Cost per Parolee	$596		

Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigations by caseworkers and prison records can be utilized to further substantiate the required need for service in this area.		
10. Domestic Violence Services			
Number to be Served	30	Identified assaultive behavior, no personal finances, and high risk for aggression-type setbacks.	There are offenders according to demographic information with a high propensity to violent and/or aggressive behavior. The gap is the lack of immediate service intensity. The inability to provide inclusive and immediate services in this area may result in further victimization. The lack of funding from other sources (insurance coverage) for this population creates another gap in the flow of these individuals' transition back to the community. The amount requested will provide an intake, $100.00 for each individual and 12 weeks, of specific therapeutic and psycho-educational sessions at $20.00 each session per member. The expected outcome is the prevention of future aggression/violence, a reduction in victimization, an increase in the functionality of the offender which will make neighborhoods safer.
Amount Requested	$10,200		
Cost per Parolee	$340		
Assessment Process	Individuals requiring these services have been and/or will be identified through Actuarial risks/needs assessments, TAP 2 information, along with person-to-person interviews involving prisoners and transition team members. Investigation by caseworkers and prison records can be utilized to further substantiate the required need for service in this area. A history of aggressive patterns may be discovered through past treatment involvement and /or prison records.		
11. Sex Offender Services			
Number to be Served	N/A		There are no identified gaps in the delivery of services that haven't been addressed in other areas, which would require additional funding.
Amount Requested	$0.00		
Cost per Parolee			
Assessment Process			
12. Victim Services			
Number to be Served	N/A	Identified need.	As a service to the victims of the identified offenders in this area, an amount of $375 is requested to mail information about community services related to victim services will be provided.
Amount Requested	$375		
Cost per Parolee			
Assessment Process			
13. Entitlement Programs			
Number to be Served	N/A		At this time, there are no identified gaps in the delivery of services for this population that would require additional funding.
Amount Requested	$0.00		
Cost per Parolee			
Assessment Process			
14. Law Enforcement Services			
Number to be Served	150	Identified need.	To provide additional safety for FOA parole agents performing compliance checks with offenders during non-traditional work hours, an amount of $1,000 for the purchase 2 bullet-proof vests at a cost
Amount Requested	$1,000		

Cost per Parolee	$7		
Assessment Process			
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
15. Prison IN-REACH & TAP Development			
Number to be Served	150	IRU-MPRI inmates, identified need.	Providing in-house one-day workshops for incarcerated offenders to reinforce and/or introduce practical perspectives of cognitive behavioral methods of change, altruistic methods for effective living, family relational/role issues (14 workshops will be specific to family reunification issues), and similar psychoeducational workshops facilitated by experts in their respective fields of practice will have a two-fold benefit. The favorable expected outcomes of offender community preparedness, and expert training for prison staff. Having the offender prepared to enter the community again is essential when evidencing the EBP principle of dosage, responsivity, risk, and skill train with direct practice. The workshops will take place within the Macomb Correctional Facility, twice monthly, at a cost of $1,200 per workshop which includes facilitator fees, program materials (pre/post tests, outcome surveys), and travel. Providing the opportunity for prison staff to observe and perhaps participate in the workshop will allow for training in a specific subject area from experts, increasing the specific skill levels of these professionals for no additional cost. The steering team of the MPRI – MACOMB Project voted to hire a contractual employee with the title of, "Community Resource Specialist." This individual will assist the community coordinator and other members of the steering team to perform administrative responsibilities specifically related to MPRI tasks that involve all the facets of community coordination, implementation, and maintenance the MPRI – MACOMB Project, to include the development of Transitional Accountability Plans (TAP). This position has been re/pre- approved from $14.00 per hour to $17.00 per hour with no expense account. All travel, training, etc. will be the responsibility of the selected employee. There will be no other type of benefits offered. The selection of this individual will be the responsibility of the three steering team co-chairs.
Amount Requested	$65,360		
Cost per Parolee	$435		

Assessment Process P	Inmates involved in the MPRI- IRU program within the prison will be assessed for participation in workshops that are directly linked to an identified need i.e., aggression diffusion, family/relationship roles, etc. The TAP 2, face to face interviews, prison records, previous history and other information will be utilized to substantiate an offender's need for this type of programming. Steering team assessed the need for additional help and determined that an additional staff member was necessary to ensure a comprehensive approach to all the components of MPRI – MACOMB Project.		
16. Other: _____.			
Number to be Served Amount Requested Cost per Parolee	 $17,500 		To ensure that service delivery to incarcerated and/or paroled offenders involved in the MPRI – MACOMB Project is provided by skilled professionals as indicated in the EBP principles, a purchase of **7** training workshops, with 25 participants for each workshop at a cost of $100.00 for each workshop participant is requested to offer prison IRU staff and FOA parole agent staff skill training in cognitive-behavioral theories/techniques, motivational interviewing skills, etc. which will be specific to this population (criminal offender). **Other – Fiduciary Administrative Costs** The steering team along with the local MI Workforce Development Board in an effort to establish new community relationships and acknowledge/applaud the efforts of those community stakeholders that has been involved in the MPRI – MACOMB Project since its inception has agreed to host a informative luncheon to provide information regarding the MPRI program to those community stakeholders who may not be involved and to honor all the Macomb County community organizations that have helped to make the MPRI – MACOMB Project a success.
Assessment Process	Self-report from staff expressing the need of additional skill-training workshops to acquire specialized skills to further their ability to effectively influence and positively reinforce the individuals involved in MPRI – MACOMB Project. The need for more community stakeholders to provide services and/or input with regards to their service area.		
Sub Total Services Request	**$ 497,940**		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$71,760						
Training	Included						
Travel/Monthly Expenses	Included						
Sub Total Management	$ 71,760						

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$40,000						
Contractual Services							
Supplies	$500						
Equipment	$ 4,000						
Training							
Travel							
Other	$6,000						
Sub Total Adm. Costs & Percent	$ / 8%						$

SERVICES FUNDS REQUESTED	**$ $498,940**
COMPREHENSIVE PLAN MANAGEMENT	**$ 71,760**
ADMINISTRATIVE FUNDS REQUESTED	**$ 50,500**
TOTAL REQUEST	$ **625,000**

Nine County - Summary

Assets

The Nine County Area pilot has a well developed and cohesive ReEntry Council. This group began meeting over a year and a half ago in anticipation of this pilot. During this time period, we have identified the existing resources for housing, work, education, substance abuse treatment, mental health treatment, health services, and family services within the community.

We are particularly fortunate with the leadership we have received from the Michigan Department of Corrections. Locally, the Field Area Manager (Laura M. Young), the Field Supervisors (Gordon Baas, Bill Cantinella, Mike Turnbull), and the parole agents chosen for the Transition Teams (Chuck Welch, Chuck Kennard, and Gary Andrews) have been very informative, supportive, and encouraging of service providers. In addition, the Pugsley Correctional Facility Staff including the Warden (Thomas G. Phillips), and the Assistant Resident Unit Supervisor (Cynthia Follen) have been instrumental in orienting the ReEntry Council and Transition Teams to the realities of prison.

In a very real way, the membership of the ReEntry Council and Transition Teams are an invaluable asset. The combined knowledge and skill of this group has helped us identify what prisoners and parolees have available as resources and what they need that is presently lacking in our area. They have also helped us identify service providers and other members of our communities who have a vested interest in making MPRI a success.

We have housing assistance in the forms of Transition Housing, rent, deposit, and other types of housing assistance for the majority of parolees. Further, we have well developed workforce development services in the community. These services are flexible in design and are delivered by a staff that was selected because of prior experience working with offenders, a willingness to work with offenders, and a desire to be part of the MPRI ReEntry Council and Transition Teams.

Our Coordinating Agency for substance abuse services, the substance abuse treatment providers, and the MDOC Office of Substance Abuse Services have networked with Goodwill Industries and each other to create a coordinated service program for prisoners who have substance abuse or dependence problems when they re-enter the community.

One of the local community mental health providers has agreed to work with us on a demonstration project, a community clinic has volunteered to help us obtain prescription medications (both psychotropic and allopathic) for parolees, and some of our outpatient providers have agreed to deliver outpatient mental health services when funded. Further, the community mental health program has become actively involved in helping the ReEntry Council formulate the demonstration project and integrate it with their services for persons who are severely, persistently, mentally ill. One of our ReEntry Council members is on the board for the Foundation for Mental Health which has the mission of providing housing and assistance for persons who have these severe conditions.

In addition, we have numerous social service agencies which work closely with the Department of Human Services and run food pantries, community kitchens, and faith-based support for the communities. The Department of Human Services is actively involved with the ReEntry Council and the development of the Comprehensive Plan. They are willing and able to make eligibility determination, access resources too numerous to name here, and help the Transition Teams coordinate the use of services that were previously unknown to parole agents and other service providers in the community.

In short, we have a plan for meeting the basic needs of parolees, structuring their reentry into the community in collaboration with parole agent. That plan involves using existing resources in new ways with a focus on successful completion of parole and community safety.

Barriers

Capacity is our single largest barrier. We have a shortage of affordable housing, employers who are willing to work with offenders, available jobs, Intensive Outpatient Substance Abuse services, mental health care, health care, and transportation.

We live in communities that are known for their conservative values. The Not In My Back Yard (NIMBY Syndrome) is a powerful influence in the Nine County Area.

We also have a lack of understanding about the plight of parolees and how services for parolees may be coordinated with services for other members of the community. In general, we face the same problems many communities face, a

lack of awareness about how to work with offenders. In many instances, agencies are just now learning how parole agents work, what the requirements are for parolees, how parolee accountability and community services can be blended into a step-down treatment approach for individuals who are returning to the community, and what services the different agencies offer that the parolees need.

Gaps
We have a capacity GAP. We need case coordinators to deliver "wrap-around" type services; specialized vocational services including work opportunities; life skills training; mental health treatment; family services; and transportation for parolees. Nearly all of the parolees will need one or more of these services on at least a temporary basis. Some of the parolees will need many of these services for a lengthy period of time.

Our local priorities are:
1. Provide housing and vocational development assistance;
2. Establish and maintain a method parolees can use for meeting their basic needs;
3. Provide substance abuse treatment;
4. Provide crisis intervention;
5. Establish and maintain parolee stability;
6. Involve families when and where appropriate;
7. Involve faith-based service providers as appropriate;
8. Provide women's programming in the form of specialized residential, family, and individual services;
9. Demonstrate how a mental health service model; and
10. Through these efforts *protect the community and increase parolee success*.

Plan
Our plan is to use the TAP model of case planning in conjunction with Transitional Teams, Prison-In Reach Services, and Community Based Services to structure a step down process for prisoners who are becoming parolees and reentering the community.

- We will assess prisoners for housing, vocational, mental health, health, family, and other social services needs;
- We will match those prisoners to available and emerging community based resources;
- We will engage those prisoners in programming while they are still in the institution to prepare them for using those services;
- We will engage those prisoners when they are newly paroled in ways that empower them to use the community based services to continue the personal change work they began while in prison;
- We will orient those parolees to the community values, standards, and practices by structuring the parolees' involvement in community services that help them develop a Transition Accountability Plan that allows them to remain in the community;
- We will assist the parolees in their efforts to improve the quality of their life.

Case Management Strategy
The Parole Agent and Case Coordinator will work closely together and with community service providers to provide a "Wrap-Around" type of support for the offender. This process involves the use of Transition Teams comprised of those social service providers, the Parole Agent, the Case Coordinator, and the Assistant Resident Unit Supervisor.

The Transition Team, or its representatives, meets with the prisoner face-to-face, via telephone, and video conferencing (when available) before the prisoner is released to develop a plan to prepare for going home. This plan includes establishing connections between the prisoner and service providers. The plan also involves setting the stage for the offender to meet with the Transition Team or its representatives when released and developing a plan to stay home. This plan will involve the conditions of parole, service and treatment plan agreements, assessments and their findings, the parolee's input, the supervision of the parolee by the parole agent, and the recommendations of the case coordinator as well as the service providers.

Our aim is to "fill the cracks" so the parolee and the community are more likely to experience the return of the offender as a success.

Evidence-Based Practice
We will use methods consistent with those practices outlined in this document and the bench marks for success established in collaboration with the Department of Corrections.

Gender Responsive Approach
Our service providers include Women's Shelters, Family Service Providers, and the Department of Human Services. Each of these providers delivers services for women and women with children. They are sensitive to issues of victimization, socialization, and health related conditions that necessitate unique services for women. Whether pre-release, early post release, or later during parole after the offender has been in the community for awhile, the service providers will inform women offenders about services available to them to meet their unique needs and encourage them to use those services in ways that empower the women in their own lives.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	232 Housing Assessments; Transition Housing for 12 individuals; and Rental assistance for 10 individuals	All MPRI Participants will receive the Housing Assessment; Rents & Deposit assistance is for Individuals other wise ineligible for funding	The Nine County Area includes two Regional Continuums of Care for Homelessness. One of those spans Grand Traverse, Leelanau, Antrim, and Benzie Counties. The other covers Wexford, Missaukee, Kalkaska, and Crawford Counties. These collectives of housing service providers access HUD and Michigan State Housing and Development Association (MSHDA). Funds to serve homeless populations. As a housing provider, Goodwill operates a homeless shelter in Grand Traverse County and collaborates with the service providers in the continuum of care as well as surrounding areas. Goodwill receives funding for housing assistance for parolees under a contract with MSHDA. That contract provides for assistance with rent and deposits for parolees. The MDOC Office of Substance Abuse Services has contracted with Goodwill for Transition House Services for parolees with substance abuse or dependence problems. These Transition Houses are located in Mancelona, Gaylord, Traverse City, and Cadillac (Antrim, Otsego, Grand Traverse, and Wexford Counties). The homeless shelters do not accept parolees, particularly sex offenders or violent offenders, even if those parolees do not have substance abuse or dependence problems. In addition, the OSAS contract does not provide funds for Transition Housing for parolees who do not have substance abuse or dependence problems. A gap exists for two populations. They are parolees who are not substance abusers and parolees who are sex offenders or severely violent individuals. An additional gap exists for nearly all parolees. The identification and location of affordable, approved housing in the rural communities of the Nine County Area is difficult for several reasons. A shortage of affordable housing exists and normal housing rates are high. Further, it is difficult for known offenders to secure rental agreements and employment to support their use of expensive housing. The Housing Need for the Nine County Area is three fold: 1.) Transition Housing for non substance abusers, 2.) housing for hard to place individuals, and 3.) assistance navigating housing services as well as the housing market. We need a housing specialist whose tasks include assessing parolees' housing needs and helping them access existing housing resources. We also need funding for transition housing for some individuals and assistance with rents and deposits not otherwise met by the MSHDA contract. 232 Housing Assessments and 696 Follow-Ups = $30,600 360 Transition House Bed Days @ $35 each = $ 12,600 68 Individual Sessions @ $35 each = $2,380 Assistance with Deposits 10 Times @ $500 = $5,000 Assistance with Rents 10 persons @ $ 500 = $5,000
Amount Requested	$55,580		
Cost per Parolee	$239.57		
Assessment Process	Prison Records, TAP 2, and interviews with the prisoners pre-release will be conducted to identify prisoner resources for housing, potential funding through entitlement programs that will assist with housing, and the unique housing needs for individuals. This information will be reviewed by the transition team in the prisoner's community pre-release. Short-term, mid-range, and long-term housing plans will be developed, upon return to the community and the revision of TAP when the parolee returns to the community.		

2. Workforce Development Services			
Number to be Served	232	All MPRI Candidates are eligible; candidates for specialized services will be selected on a case-by-case basis after return to the community and re-assessment occurs.	The Michigan WORKS! system provides services in three broad categories: core services (job postings, career research, labor market information, etc.); intensive services (one-on-one employment planning & counseling, in-depth assessment, job development & referral, etc.); training (occupational skills training in the classroom or on the job). The two primary funding sources/programs that are available for parolees within the Michigan WORKS! system are ES (Employment Service) and WIA (Workforce Investment Act). ES provides primarily the core services and WIA provides primarily the intensive and training services. There are no eligibility criteria for ES, but for WIA an individual must be economically disadvantaged. If a parolee is a veteran, there are special job placement services under the ES program. If a parolee has a disability, Michigan WORKS! coordinates with Michigan Rehabilitation Services to provide expanded services related to the disability. This can include accommodation to the workplace, additional testing, additional counseling, and specialized job development services. The biggest barrier by far is capacity. A secondary barrier is the federally mandated ES and WIA performance standards. A third barrier is the fact that most, if not all, Michigan WORKS! staff members lack any kind of experience or special skills related to working with offenders. Another barrier is community attitudes. Northern Michigan is a very conservative area with a reputation for being tough on crime and sentencing. There is not a high degree of sensitivity within the employer community (in general; there are certainly exceptions) to the idea of employing parolees and taking any risk in hiring, particularly for jobs that require customer interactions. There are several gaps: 1) funding availability for longer-term, more intensive employment preparation, counseling, and job training; 2) any kind of temporary work experience component that will provide immediate employment and wages to parolees while job development is being conducted and/or training is taking place; 3) support service funds for work-related tools, clothes, certifications, licenses, testing fees, etc.; 4) specialized staff skills and experience related to working with parolees; 5) development of offender-friendly employment sites; 6) job retention services, such as a work-based Retention Specialist who works with both employee and supervisor to prevent problems from becoming job-loss situations and to intervene when potential job retention issues arise. **Outcome 1:** Increase staffing to include specialty background in working with offenders, and to expand access for 232 more customers in the Michigan WORKS! system. **Outcome 2:** Increase access for on-the-job training and short-term classroom training to make parolees more marketable to employers. **Outcome 3:** Establish a source of funds for employment-related support services, to enhance employability and to enhance success on the job. **Outcome 4:** Develop a Temporary Work Experience program, through which parolees can receive immediate, part-time employment in the private or public sector, for the purpose of ensuring that wages are earned immediately while training, employment preparation, and job development are taking place, and also to provide meaningful experience to enhance the individual's résumé.
Amount Requested	$145,000		
Cost per Parolee	$625		

Assessment Process	Prison Records, TAP 2, and interviews with the prisoners pre-release will be conducted to identify prisoner work skills, experience, and vocational needs. The individual vocational plans will be updated and revised upon the parolee's return to the community and during the revision of the TAP.		
3. Substance Abuse Treatment			
Number to be Served	155	All MPRI Candidates who have a substance abuse or dependence related problem are eligible.	The regional Coordinating Agency for substance abuse treatment services is Northern Michigan Substance Abuse Services (NMSAS). That organization is a member of our ReEntry Council. The substance abuse treatment providers on our ReEntry Council receiving funding from NMSAS are Addiction Treatment Services and Catholic Human Services. The directors of these agencies tell us they already provide services to the parolees returning to the community with their existing funding. They also tell us they will continue to provide those services as members of the ReEntry Council and in support of the MPRI model. The MDOC Office of Substance Abuse Services (OSAS) is providing funding for transition house services for parolees who have substance abuse or substance dependence problems under a separate contract with Goodwill Industries of Northern Michigan, Inc. Both OSAS and Goodwill support the incorporation of the service delivered under that contract into the MPRI model. The ReEntry Council recognizes this and endorses that approach for a step-down phase of reentry for parolees into their communities. Parole Agents and Goodwill employees on the transition teams have developed methods for referring parolees pre-release from prison into this program. That method includes using the TAP2, transition team case conferencing meetings, and DOC approved documentation procedures. **Outcomes:** Eighty-five to ninety percent successful completion of treatment; Fifty to sixty percent will be clean and sober at 90 days after completing treatment.
Amount Requested	Zero		
Cost per Parolee	Zero MPRI $		
Assessment Process	Prison Records, the TAP2, and interviews with the parolee will be used to screen parolees into this array of services. The SASSI instrument and information obtained from the parole agent, court records, and case work will be used to ascertain level and type of services. Information will be shared with MDOC OSAS to establish eligibility for Transition House Services.		

4. Mental Health Treatment			
Number to be Served	20		
Amount Requested	$37,900		The Nine County Pilot project encompasses the area administered by four Community Mental Health organizations and four hospitals. The Community Mental Health organizations provide services to persons who are Severely, Persistently Mentally Ill. Outpatient providers are already overextended with persons who have unfunded mental health treatment needs.
Cost per Parolee	$1,895	MPRI Participants in Wexford and Missaukee Counties who have no other means for psychotropic medication, outpatient mental health treatment. These individuals may have co-occurring conditions, but not be Severely Persistently Mentally Ill.	The number of prisoners who conceal their mental health conditions while in prison is large (per prison staff at Pugsley Correctional Facility). Prisoners do this in order to be moved to lower level security. When parolees return to the community and have mental health needs that they concealed while incarcerated, those symptoms worsen because of the distress associated with relocation and re-integration. An absence of mental health services for these persons exists because they are not Severely Persistently Mentally Ill, the agencies do not have funding for the type of services they need, and because the State of Michigan policies for funding treatment for mentally ill persons places these individuals low on the long list of priorities. We need to fund: 20 sessions for each of 20 people = 400 sessions 400 sessions @ $75 each = $30,000 10 psychiatric consultations @ $200 each = $2,000 40 medication monitoring appointments @ $35 = $1,400 26 Anger Replacement Training Group @ $150 = $3,900 2 Training for ART @ $300 each = $600

			We will use these funds to service parolees with mental illness in two counties, Wexford and Missaukee, as a demonstration of how we can leverage prescription programs, volunteers, and willing mental health providers as an extension of coordinated care in collaboration with Northern Lakes Community Mental Health, Mercy Hospital, and outpatient providers in those communities.
Assessment Process	Prison records, TAP2's, Interviews with prisoners pre-release, TAP3's, Bio-Psycho-Social Assessments with Parolees once they've returned to the community. Consultation with mental health providers such as psychiatrists, psychologists, and MSW's specializing in mental health treatment when indicated by symptomology. The Case Coordinator on the Transition Team will share this information for case processing.		
5. Transportation			
Number to be Served	232	Any MPRI Candidate that does not have adequate transportation to and from work, social service, or treatment appointments.	The Nine County project covers 6,658 square miles. Services are located within a few urban centers (Traverse City, Cadillac, and Gaylord). Transition Houses are located in those cities. An additional Transition House is in Mancelona, a village in Antrim County. Substance Abuse and Mental Health treatment is provided within the cities. Some of the towns scattered across the Nine County Area have "Community Resource Centers" where service providers are provided limited services. Employment opportunities are very limited in the rural villages, especially employment opportunities that pay above poverty level. Paroles need to be able to travel to and from the cities where services, employment, and educational opportunities are available in order to comply with parole orders, receive treatment, and access services in order to improve their chances of successfully completing parole and reintegrating into their communities. This geographical area lacks adequate public transportation to support travel to and from villages, towns, and cities on schedules that support daily routines that include work and treatment, work and education, treatment and education, or all three (work, treatment, and education) concurrently. Community resources to provide transportation are available for families. Existing resources (the Department of Human Services, local coordinating councils, and faith-based organizations assist with transportation to families. When a parolee is not involved with his or her family, he or she is typically ineligible for these resources. We need funds for Gas Cards, Bus Passes, Car Repairs, and other sundries to make travel to and from work, education, and services possible for those who lack family support or other means to pay for their travel. **Outcomes**: Every parolee will have transportation to and from work, social service appointments, substance abuse-mental health-and family treatment appointments. We expect that this resource **will increase parolee involvement** during the first ninety days following their release and make a significant contribution to the **successful re-integration** of parolees into the community by helping them locate and secure gainful employment.
Amount Requested	$18,000		
Cost per Parolee	$77.59 avg.		

Assessment Process	Prison records, TAP2, and interviews with prisoners pre-release will be used as sources for information about each individual's access to transportation and transportation related resources upon release. These same sources of information will learn if the individual is restricted from driving. This information will be shared with the Transition Teams. The Transition Teams (including Department of Human Services workers) will review each individual's circumstances and eligibility for community resources for transportation. When possible, community resources for transportation will be used first for reentering parolees. When the parolee returns to the community, the Transition Team will review the TAP with the parolee and revise the plan according to changing circumstances. In the event the parolee has a need for supplemental assistance for transportation or a documented need to use these resources as the primary means to obtain transportation, the Transition Team will provide gas cards, bus tokens or passes, and other authorized transportation assistance on a case by case basis.

6. Health Care Services			
Number to be Served	30		The Nine County Area spans a large portion of the Department of Human Services Zone One. Four
Amount Requested	$6,000		

Cost per Parolee	$200		
Assessment Process	Prison Records, TAP2 documents, Individual Interviews with the prisoner pre-release from prison will be sources of information about the health care needs of prisoners who are being paroled. This information will be provided to the Transition Teams which include Department of Human Services workers. These teams will review the information and ascertain if the prisoner needs to be qualified for access to local health care resources prior to release. In addition, once the offender is paroled and the new TAP is developed after additional interviews and case coordinating meetings have taken place, the records provided to the DHS worker will be updated. Parolees will be referred for community based health care programs and on an as needed basis, in the absence of health care insurance for the parolee, Federal or State health care programming for the parolee, out of pocket funding by the parolee, or other community resources, these funds will be accessed for emergency dental care.		
7. Family Support Services			
Number to be Served	50		**GAP: There are no specialized social services intended to**

Amount Requested	$18,600	MPRI participants whose parole agent authorizes family interaction and have families that want to re-integrate with them and are identified by family service providers as ready for re-integration and whose families are identified by family service providers as ready for re-integration who do not have another means to obtain these family services	
Cost per Parolee	$372 each		
Assessment Process	TAP2 documents, interviews with prisoners pre-release, authorized contact with the prisoners' families pre-release, parole agent approval, and family service provider recommendation will establish eligibility. Additional information will be gathered post release upon the first contact with families in a supervised setting. This information will be provided to the Transition Team. As the TAP 3 is developed, eligibility may be established if conditions and circumstances warrant.		
8. Life Skills programs			
Number to be Served	80	MPRI Candidates	The Nine County project uses a National Institute of Corrections curriculum and a Goodwill curriculum for training parolees in life skill areas including but not limited to: budgeting, job readiness skills, emotional management, and navigating life
Amount Requested	$9,200		

Cost per Parolee	$115		
Assessment Process	TAP2 documents, interviews conducted with the prisoner pre-release, and revised TAPs post release will be used by the Transition Team to decide if the parolee is eligible for these services.		

9. Adult Education			
Number to be Served Amount Requested

Assessment Process	TAP2 documents and other prison records will be used in addition to interviews with prisoners pre-release from prison. Additional information will be gathered from the parolees upon return to their communities. Parolees will be screened to establish eligibility for adult education programs. Parolees who need adult education services will be referred for those services as part of their Transition Accountability Plan post release.		
10. Domestic Violence Services			
Number to be Served	232		
Amount Requested	None		
Cost per Parolee			The Nine County Area has several domestic violence shelters and numerous family service agencies that provide services to victims of domestic violence. This proposal includes a service category called “Women’s Empowerment” which describes a model for providing transition type housing to women parolees who have an identified substance abuse problem and who also need to re-unite with their dependent children. **Outcomes:** The linkage between MPRI and the Domestic Violence Shelters will be formalized; Victim Notification Strategies will be identified.’ Transition Team Members will be trained in the Victim Notification Procedures and how they fit into community safety plans. It is anticipated many of these women have been victims of domestic violence. Please see that section.
Assessment Process	TAP2 records and other prison records as well as interviews conducted pre-release from prison will be used as source information to learn if the offender needs or wants to enter programming for victims of domestic violence. The Case Coordinator and the Transition Team will continue to monitor the parolee’s needs post release and recommend such services, if they are believed pertinent.		

11. Sex Offender Services			
Number to be Served	20		Historically, treatment for sex offenders was funded using 15% monies. During 2006, we hope this will continue. Those contracts have been submitted. However, we have a knowledge gap. The Transition House Staff, the Case Managers, the Transition Team Members, and the Re-Entry Council are personnel that typically have no training for working with sex offenders. Coordinated care for sex offenders that maximizes the community benefit of the MPRI model is possible with appropriate training for all parties involved. ***A series of eight four hour workshops/in-services for the above personnel*** will provide information about DOC policies, procedures, treatment protocols, risk factors, and strategies for coordinating the care among providers with the supervision by parole officers ***across the Nine County Area***. Each workshop/in-service is approximately three and a half hours in length and provided by a licensed psychologist who specializes in assessing and treating sex offenders. MDOC personnel will also assist in providing the training. **Outcomes:** Service providers and parole agents will have a common understanding of how to monitor sex offenders, what information is important to gather and what to report to whom when and where.
Amount Requested	$4,000		
Cost per Parolee	$200		
Assessment Process	Sex Offender treatment will be funded through contracts using funds from an alternate source. The funds solicited here are for training for service delivery personnel and the creation of a community wide response strategy.		
12. Victim Services			
Number to be Served	232	All MPRI Participants	The Nine County Area has several domestic violence shelters which have good working relationships with the prosecutors in
Amount Requested	None		

Cost per Parolee	None		
Assessment Process	TAP2, Prison Documents, and Interviews conducted pre-release will be used as source information and reviewed with parole agents as well as the transition teams. Joint decisions about the risk to victims of the offenders will be made. Parole agents will lead the team in making TAP decisions on the basis of conditions of parole, community safety, and the unique needs of parolees.		
13. Entitlement Programs			
Number to be Served	232		
Amount Requested	Zero		**Assets** Each community within our service area has numerous programs that can provide income for paroles based upon eligibility or entitlement. In each community there are agencies or systems that will assist individuals applying for these resources. The Department of Human Services will play an instrumental role in establishing eligibility for prisoners or parolees as soon as possible within the context of TAP2 or TAP3 development. The DHS worker will travel to and from Pugsley Correctional Facility to meet with prisoners pre-release to do this, meet with prisoners at the IRU via telephone or video conferencing when it is available, or use the information supplied by the Case Coordinator Level II in the absence of the other options. **Barrier** Program policies that currently do not allow for determination of eligibility for programs while the client is in the prison setting. Distance that staff will need to travel to do eligibility determination, particularly while prisoners are at Cooper Street and in Ypsilanti. **GAP** Funding is so often tied to demographic and other criteria. It is difficult to sort out who is eligible for what pot of money. The end result in many instances is, that the single individual or couples without children are without funding to meet their basic human needs. In each community, our clients will be expected to apply for programs that they may be entitled to or otherwise eligible. This list would include (but not be limited to): Social Security, Supplemental Security Income, Veterans Benefits, Medicare, Medicaid, Family Independence Program, Food Assistance Program, State Disability Assistance, Adult Benefit Waiver Program, local Health Care Initiative programs, and services from Michigan Rehabilitation Services. **Solution** Potential Eligibility for these programs can be assessed prior to release and
Cost per Parolee	Zero		

Assessment Process	The Department of Human Services will play an instrumental role in establishing eligibility for prisoners or parolees as soon as possible within the context of TAP2 or TAP3 development. The DHS worker will travel to and from Pugsley Correctional Facility to meet with prisoners pre-release to do this, meet with prisoners at the IRU via telephone or video conferencing when it is available, or use the information supplied by the Case Coordinator Level II in the absence of the other options.		
14. Law Enforcement Services			
Number to be Served	232		The Nine County Area has numerous Law Enforcement Jurisdictions within it. In addition to nine County Sheriff Departments it has several City Law Enforcement offices; and many Township Law Enforcement centers as well as several State Police Offices. The Rural ReEntry Council will host a series of informational sessions for the Law Enforcement Offices within the Nine County Area. Target Goals: Increase Community Safety Objectives: Create Foundation for future Cooperation Create Foundation for future Collaboration Methods: Establish Line of Communication, Gather Law Enforcement Input; **Outcome** Secure Agreement for Mutual program development Costs during year one will be met by ReEntry Council membership organizations.
Amount Requested	Zero		
Cost per Parolee	Zero		
Assessment Process	None for this stage of pilot development.		

15. Prison IN-REACH & TAP Development			
Number to be Served	232		
Amount Requested	1 FTE CCLII $41,900 3.5 FTE CCLI $32,600 ea Travel Costs To IRUs $9,820 Materials $2,000 Total This Item $156,000 $ 9,820 $ 2,000 $167,820		One full time Case Coordinator Level II will serve as a "lead" case coordinator for the Nine County Area. That individual will travel to the Intensive ReEntry Units on an "at least monthly" basis. As the Nine County Pilot representative, that individual will meet with prisoners at both IRU's prerelease. The Case Coordinator Level II will also meet with prisoners at the Pugsley Correctional Facility prerelease. In all correctional facility settings the Case Coordinator Level II will meet with the prisoners, conduct TAP2s, obtain information from prison records, and obtain signed forms like the release of information documents. The Case Coordinator Level II will return to the Nine County Area and travel to: Mancelona, Gaylord, Traverse City, and Cadillac to meet with the Transition Teams in each of those cities at regularly scheduled intervals to share information obtained in the prison visits. There are Case Coordinators assigned to each of the communities where the MPRI Pilot has a Transition House. These Case Coordinators do not travel to the Intensive ReEntry Units in Jackson or Ypsilanti. This is to reduce travel costs for the pilot. Instead, at the Transition Teams in Mancelona, Gaylord, Traverse City, and Cadillac, the Lead Case Coordinator will meet with the Case Coordinator Level I assigned to that Transition House and surrounding area. They will meet together with the other Transition Team members. At those meetings, information will be exchanged about each prisoner, TAP2's will be reviewed, and plans for the prisoners' initial returns will be made. Appointments will be set for the time period immediately following the prisoners' return as parolees. The Case Coordinators assigned Level I duties will make contact with the prisoners prerelease, introduce themselves, confirm contact with the Lead Case Coordinator, review the appointments, and secure additional information. The Lead Case Coordinator will return to the prisons to meet with the prisoners again and return documents to prisoners already interviewed while meeting prisoners newly referred to the program. Upon release, the prisoners who are newly paroled will meet with the Transition Teams at the Transition Houses. When they do, they will meet with the Lead Case Coordinator (Level II) and the Case Coordinator Level I for the corresponding Transition House. All information will be clarified and the post release phase of the reentry plan for each parolee will commence. At that time, the case will be transferred from the Lead Case Coordinator Level II to the Case Coordinator Level I. **The Case Coordinator Level I in each locale will remain with the parolees as the Wrap-Around Case Coordinator** throughout the duration of parole for each individual assigned.
Cost per Parolee	$732 ea		

			Case Coordinators in the local communities will collaborate with the parole agent assigned to each case. They will assist the parolee establishing eligibility for MPRI funded services, access to services in the community, and information exchange among the service providers. In addition, the Case Coordinators will gather information and data from the parolee, the parole agent, and the service providers. The Case Coordinators will document service delivery, progress, and outcomes. The Case Coordinators will share this information with other service providers during Transition Team Meetings. In addition, the Case Coordinators will provide the information and data to the MPRI Coordinator on a regularly scheduled basis. Case Coordinators will meet with Transition Teams on an at least monthly basis for ongoing case coordination through the development of TAP3 and ongoing case processing. In addition, the Case Coordinators will meet with parolees for case work throughout the parole period. **Outcomes:** 232 TAP 2/ 232 TAP3 Increased success in reentry….fewer returns to prison during the first twenty-four months out of prison. Fewer technical violations.
Assessment Process	All MPRI Participants will participate in an interview with the Case Coordinator Level II prior to their release from the prison. TAP2 documents and prison records will be reviewed; additional specialized assessments conducted post release; TAP3's will be written post release in conjunction with the Transition Team.		
16. Other: Basic Personal Needs			
Number to be Served Amount Requested Cost per Parolee	128 $6,400 $50	MPRI Participants who do not have funding from work or another source for these items or services.	Local programming typically does not fund Clothing, personal hygiene, house ware, application fee, postage, and supplies. Individuals with family involvement are more likely to receive assistance for these items from local agencies. Since many of these items are needed for finding employment, obtaining appropriate identification to establish eligibility for entitlement programs, and to move into supported housing after a stay in the transition houses, additional funds are required to aide parolees who successfully complete the transition house stay when they move into their own approved housing. Approximately 128 persons will need this assistance. **Outcomes expected include:** Improved work readiness; Improved transition into independent living; Improved access and use of community-based services.
Assessment Process	TAP2 documents and other prison records as well as interviews with the parolee after release to learn amount of cash resources for these items available to parolee from other sources. Other sources will be used first.		

17. Other: Women's Empowerment			
Number to be Served Amount Requested Cost per Parolee	16 $8,000 $500	MPRI Participants who do not have funding from work or another source for these items or services.	Women's programming for those with substance abuse problems and children are typically lacking in the Nine County Area. A residential facility that specializes as a transition house for women who have addiction problems and need to be re-united with their children is supported by community service providers. However, sufficient funding for women who may need ninety days or longer to stabilize in their family relationships and assume responsibilities for their children is difficult to secure. Solution: Increase community capacity to assist women with substance abuse problems who have children and who also need to reunite with them and assume responsibilities for those children in a supervised setting. **Outcomes:** Increase community safety; Increase family stability; Increase successful completion of transition from prison to community; Extend the length of sobriety; Increase the likelihood women will acquire adequate social support for living within the community.
Assessment Process	TAP2 documents and other prison records as well as interviews with the parolee after release to learn amount of cash resources for these items available to parolee from other sources. Other sources will be used first.		

18. Other: Faith-Based Services			
Number to be Served Amount Requested Cost per Parolee	50 $5,000 $100	MPRI Participation; Without Adequate Family Support;	**Assets** The Poverty Reduction Initiative (PRI) has undertaken the tasks of developing a training program for mentors, establishing a coordinated network of volunteers, and a pool of resources for mentors. The PRI is in five of the Nine Counties in the pilot project.
Assessment Process	TAP2 documents and other prison records as well as interviews with the parolee after release to learn amount of cash resources for these items available to parolee from other sources. Other sources will be used first.		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Tota**
Salary, Wages, Benefits	$75,000						$75,0
Training	Included						Includ
Travel	Included						Includ
Sub Total Management	$75,000						$75,0

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$49,000						$49,00
Contractual Services							
Supplies							
Equipment							
Training							
Travel	$1,000						$1,00
Other	$12,500						$12,50
Sub Total Adm. Costs & Percent	$$62,50 / 10%						$62,500

SERVICES FUNDS REQUESTED	**$ 487,500**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$ 62,500**
TOTAL REQUEST	$ **625,000**

Wayne County - Summary

Background Structure and Goals:

Wayne County has the highest rates of murder, robbery, and aggravated assaults reported by any community in the State of Michigan. Additionally, more than 3,000 of the men and women are paroled from Michigan's prisons return to communities in Wayne County every year. In 2004, under the leadership of the MDOC, Wayne County service providers, justice and governmental officials, and community problem solvers embarked on a community wide mobilization to address the community safety issues related to returning prisoners.

This effort, The Wayne County Prisoner Re-Entry Initiative (WCPRI), is a pilot site for the larger MPRI. WCPRI benefits from a strong and experienced Re-Entry Council and an active and committed Steering Team. These bodies began meeting in the fall of 2004 to develop a comprehensive reentry plan and drew membership and support from the Walk With Me (WWM) Reentry Advisory Committee. WWM is one of Wayne's key assets in the reentry area, having provided case management services to returning citizens since 2002. Early on, WCPRI adopted the following long term goal: To provide for the safety of Wayne Country citizen through the provision of effective supervision and service to men and women being released from prison.

To gather needed information, WCPRI conducted a community assessment that provided a body of evidence from which the Steering Team could begin to identify service availability and service needs. Based on the results of the assessment the Steering Team determined WCPRI needed to initially focus on enhancing and effectively utilizing existing institutional, community, judicial, familial, and individual assets. This focus lead to the development of four short term goals:

1. To strengthen the reentry process prior to release from prison through the development of comprehensive Transition Accountability Plans (TAP's) for each parolee;
2. To coordinate and manage community supervision and service delivery;
3. To assure parolees access to existing services; and
4. To enhance local capacity to effectively supervise and treat paroled sex offenders.

Assets:

The assessment process combined with the experience of our Council and Steering Team members identified numerous services aimed at parolees and numerous other services that are available but not specifically targeted for parolees. Wayne County has governmental and/or private services that address all service areas identified in this application. Many service areas benefit from programs run by both county and city governments. These areas include employment, substance abuse, workforce development, housing, and health care. Because of an identified gap in employment services for serious and violent offenders, WCPRI has assigned dedicated funds for this population. Non-profit and faith based agencies provide services in all areas, from employment to family support. WWM, JVC, Transition of Prisoners, Goodwill, Women Arise, Elmhurst Homes all have programs geared to the needs of parolees. The breadth of service types available in Wayne County is listed in Attachment No. 1, MDOC Resource Directory. In addition to the money provided through this application, the MDOC is providing Wayne County with $ 2.2 million for MPRI related services. The Steering Team concluded that Wayne County's biggest asset is a strong service infrastructure that provides a solid basis on which to build.

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Barriers:

While the assessment showed that many services exist, it also pinpointed numerous areas that restrict access to these services. The Steering Team determined the most immediate barriers to receiving needed services for successful reentry are: access is cumbersome and repetitive; criteria for acceptance often excludes anyone with a criminal conviction; many services are underutilized by parolees because a complete listing of all available services does not exist; services are not located in the communities where parolees reside; and transportation is often unavailable. An interdisciplinary lack of awareness of services

and respective providers surfaced as a major gap and prompted the call for a clearinghouse and resource center with a virtual one-stop component that could facilitate real time inventories and provide an availability of resources, especially as relates to services driven by bed space e.g. housing and substance abuse treatment. The money provided through this ITB will be used in FY 06 to overcome these barriers. *Common sense indicates that service capacity must be increased. However, this barrier cannot be addressed until full utilization of existing services is realized through removing the barriers listed above.*

Local Priorities and Implementation Strategy for FY 06:

1. Comprehensive reentry plan (TAP's) for 300 parolees: The parole supervisors will determine eligibility for participation in the IRU. The successful bidder's transition team leader will then coordinate with the CFA and FOA supervisors to identify parolees to be assigned for in-reach. The IRU parole supervisor will provide TAP 2's to the transition team. The TAP's will be used as the basis for all subsequent assessment in preparation for release. Transition Team members and respective service providers will visit the IRU as needed to meet with identified parolees. The IRU will be given a two week lead time on notification of scheduled visits to accommodate internal logistics. An annual schedule of regular visitations is recommended. The successful bidder for prison in-reach services and case management will conduct their assessments and receive the TAP's from the prison and parole The identified needs for a successful reentry upon release that must be addressed prior to release will be provided for e.g. identification, forms completion wherein applicable and possible. Placement option choices as determined during assessment will be provided to the respective parole officer for assignment. It will be suggested that the parolee be given the opportunity by the parole officer to choose among their choices for each service delivery area. Choice is proven to be an evidence based best practice that manifests itself in higher success rates for at-risk and hard to serve populations.

2. Comprehensive real-time data base of available services; service access, referral and follow-up (case management) for 300 parolees: The successful bidder will be required to provide a holistic approach to case management. The transition team, having identified the parolees needs during in-reach will prepare a customized success kit which will be comprised of all pertinent information for referral to service providers approved by the parole agent and as selected by the parolee. Their ability to select a provider will empower them to use the community based services to continue their development begun while incarcerated. Upon arrival to Wayne County, case managers will provide for and/or recommend transportation options to get to their parole agent for reporting purposes and then to the contractor for orientation. Concentrated intensive and constructive follow up by the case manager will be the cornerstone of the support provided by the contractor in supportive collaboration with the parole agent to ensure a successful transition back into the community. The successful bidder will develop a comprehensive resource base that will be contributed to by all Wayne County stakeholders. An on-going inventory of assets to serve returning citizens should provide most of the current information for MPRI Wayne County that will be made available to the contractor. This information will be assembled in a central location and will serve as a clearinghouse to be shared with all stakeholders. This concept has been well received and is believed to have significant merit as it relates to saving time and being more effective in the case management process for MPRI parolees. Pervasive interdisciplinary inclusion in the development of the clearinghouse is the reason that the relative cost has been evenly assigned to each service area in the budget.

3. Enhanced capacity for addressing supervision and needs of paroled sex-offenders: The sex offender requires attention from a practitioner with a specialized skill set and training. There are myriad requirements that govern the reentry of a sex offender not the least of which is increased supervision and security. Wayne County recognizes this and has provided for a specialist in this area to engage the returning sex offender in addressing their special needs. We believe this need to be so important in successfully realizing the goal of safer neighborhoods that we are committing ten percent of our applicable resources to this effort.

Evidence based best practices:

In our commitment to realizing the goals of safer neighborhoods and reduced recidivism, Wayne County MPRI is unconditionally committed to the implementation of proven and effective strategies, methodologies and techniques as relate to the delivery of services for this population. Quantified and qualified past performance success in addressing the needs of returning citizens will be critical to the overall success of

the program. The service delivery system must not only be seamless but it must be strong, dependable and reliable. This is essential to maximizing the full benefit of our resources.

Gender Responsive Strategies:
The successful bidder must address how they will meet the specific needs of women returning back to the community. Wayne County service providers include Women's Shelters, Family Service Providers, and the Department of Human Services. Providers with an area of specialization as relates to being gender responsive are DAS II (substance abuse), FIT (assessment and referral), Naomi's Nest (housing), TOP's (day reporting, assessment and employment) and Goodwill (gender responsive employment). Each of these providers delivers services for women and women with children. They are sensitive to issues of victimization, socialization, and health related conditions that necessitate unique services for women. Whether pre-release, early post release, or later during parole after the offender has been in the community for awhile, the service providers will inform women offenders about services available to them to meet their unique needs and encourage them to use those services in ways that empower the women in their own lives.

Michigan Prisoner ReEntry Initiative Request for FY 2006 Funds			
SERVICE AREA	**Costs/ Detail**	**Eligibility Criteria**	**Summarize specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
1. Housing			
Number to be Served	300	Variable	Funds will be used for temporary housing placement for a period of 60 days, not to exceed 90 days.
Amount Requested	$50,000		
Cost per Parolee	$167		
Assessment Process	Housing needs will be identified by the transition team during in-reach and correlated with the TAP. Housing recommendations and options will be shared with the parole agent who will determine placement.		
2. Workforce Development Services			
Number to be Served	300	Variable	Funds will be used to provide job training, job placement, job retention services, specialized skills training, and work-readiness.
Amount Requested	112,500		
Cost per Parolee	$375		
Assessment Process			Employment and training needs will be identified by the transition team during in-reach and correlated with the TAP.
3. Substance Abuse Treatment			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Substance abuse treatment needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine placement if necessary.		
4. Mental Health Treatment			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Mental health treatment needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine placement if necessary.		
5. Transportation			
Number to be Served	300	Variable	Funds will be used to provide parolees with bus tokens, or other specific transportation to and from service providers, and the parole offices.
Amount Requested	$10,000		
Cost per Parolee	$33		
Assessment Process	Transportation needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent.		
6. Health Care Services			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Health care needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
7. Family Support Services			
Number to be Served	300		Funds will be utilized to provide comprehensive, skill-building family

Amount Requested	$30,000	Variable	support services, including reunification, life-coping skills, and
Cost per Parolee	$100		positive family development.
Assessment Process	Family support service needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
8. Life Skills programs			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Life skills needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
9. Adult Education			
Number to be Served	300	Variable	Funds will be utilized to provide comprehensive, skill-building, basic education training, including practical living skills and self-sufficiency.
Amount Requested	$35,000		
Cost per Parolee	$117		
Assessment Process	Education needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
10. Domestic Violence Services			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Domestic violence service needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
11. Sex Offender Services			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Sex offender needs will be identified by the specialized staff person on the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
12. Victim Services			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to appropriately refer ex-offenders to currently State-funded resources, and/or Wayne County stakeholders.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Victim service needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
13. Entitlement Programs			
Number to be Served	300	Variable	Funds will be utilized to help secure basic identification including, birth certificates, driver's licenses, state identification, and social security cards.
Amount Requested	$20,000		
Cost per Parolee	$67		

Assessment Process	Entitlement program needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
14. Law Enforcement Services			
Number to be Served	300	Variable	No funds are requested in the area in that full coordination efforts will take place to work in partnership with local law enforcement agencies.
Amount Requested	$0		
Cost per Parolee	$0		
Assessment Process	Law enforcement resources will be identified by the transition team to the parolee during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine need and referrals.		
SERVICE AREA	**Costs**	**Eligibility Criteria**	**Describe specific gaps in services this funding will address, the purposes of funds and expected outcomes.**
15. Prison IN-REACH & TAP Development			
Number to be Served	300	Variable	Funds will be used to conduct intensive, comprehensive in-reach assessment and complimentary case management services.
Amount Requested	230,000		
Cost per Parolee	$767		
Assessment Process	Needs will be identified by the transition team during in-reach and correlated with the TAP. Recommendations and options will be shared with the parole agent who will determine referrals.		
16. Other: _____			
Number to be Served			
Amount Requested			
Cost per Parolee			
Assessment Process			
Sub Total Services Request	$		

Comprehensive Plan Management Community Coordinator ($75K Max MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits	$75,000						$75,000
Training							
Travel							
Sub Total Management	$75,000						$75,000

Fiduciary Administrative Costs (10% MAX MPRI Funds)	**Funding Sources**						
	MDOC - MPRI	**Federal**	**State**	**Local**	**Private**	**Other**	**Total**
Salary, Wages, Benefits							
Contractual Services	$62,500						$62,500
Supplies							
Equipment							
Training							
Travel							
Other							
Sub Total Adm. Costs & Percent	$62,500 / 10%						$62,500

SERVICES FUNDS REQUESTED	**$ 487,500**
COMPREHENSIVE PLAN MANAGEMENT	**$ 75,000**
ADMINISTRATIVE FUNDS REQUESTED	**$ 62,500**
TOTAL REQUEST	$ **625,000**

Safer Neighborhoods, Better Citizens: The Michigan Prisoner ReEntry Initiative

A Collaborative Effort of the Governor's Office and the Departments of Corrections, Community Health, Labor and Economic Growth, and Human Services

Mentally Ill Inmate ReEntry Demonstration Project

The goal of the Mentally Ill Inmate ReEntry Demonstration Project is to provide mentally ill prisoners who are returning to society - either on parole or upon discharge on the maximum sentence - with improved access to the care needed to make a seamless transition back to the community as a specialized target subpopulation under the Michigan Prisoner ReEntry Inititiative (MPRI). The services offered will be provided to returning prisoners who are diagnosed with serious and persistent mental illness and also to those with lesser but still significant mental illness diagnoses. The latter population is shown to have a greater risk of more rapid failure to a statistically significant degree. It is believed that case-management intervention even for returning prisoners with less serious mental illness will significantly improve their chances of successful parole and aftercare while they re-adjust to living in the community. Cases already on parole may also receive services when warranted.

Mentally Ill Inmate ReEntry Demonstration Project work has been contracted to Lifeways Community Mental Health Authority in the amount of $2,427,100.

This addendum contains the program statement and description of the Mental Health ReEntry and Community Integration Services: Targeted Case Management Program. That document describes the selection, assessment, and approval process by which prisoners will be selected for participation in the Mentally Ill Inmate ReEntry Demonstration Project and eventual parole and discharge, as well as timetables for the process between selection and parole/discharge.

This addendum also contains the statement of work, extracted from the contract, defining the qualifications, description of service, and performance criteria and expectations for the performance of the contract.

This addendum also contains the memorandum detailing the Department's justification for the selection of Lifeways Community Mental Health Authority as the contractor for the MDOC Mentally Ill Inmate ReEntry Demonstration Project.

Michigan Prisoner ReEntry Initiative

MPRI

Creating Safer Neighborhoods & Better Citizens

Mental Health ReEntry

and

Community Integration Services

Targeted Case Management

MENTAL HEALTH REENTRY AND COMMUNITY INTEGRATION SERVICES: TARGETED CASE MANAGEMENT

PROGRAM STATEMENT/DESCRIPTION

Introduction

This program statement is consistent with the Department of Corrections Policy Directive 03.02.100 Michigan Prisoner Reentry Initiative (MPRI) and Public Act No. 154 of 2005, Enrolled House Bill No. 4831, specifically pages 24-62, Michigan Department of Corrections budget for Fiscal Year 2005-2006: General Section 439. (1) and (2), Executive Sec. 405 (1)and Sec. 407 (5). (Attachment A)

The mission of this program is to provide targeted case management and mental health treatment services for prisoners with mental health disorders as a seamless transition to the community. The program will engage the prisoner in a service delivery plan (Transition Accountability Plan or TAP) that meets his/her pre-identified needs upon release. The expected outcome is that fewer mentally ill prisoners will return to prison and fewer crimes will be committed. This meets the vision, mission and goals of the MPRI.

Using the MPRI Model (Attachment B), the program will provide a sustainable approach for mentally ill prisoners in conjunction with local Multi-Purpose Collaborative Bodies[1]. A prisoner's Earliest Release Date (ERD) is the earliest date they may be considered for parole and, consistent with the MPRI Model, is the targeted date for release to the community. An additional focus will be on mentally ill prisoners reaching their maximum time served date per Policy Directive 03.02.100, Item G, which states, "MPRI shall extend to all prisoners and parolees under the jurisdiction of the Department; however initial emphasis shall be placed on prisoners approaching their parole eligibility date."

The Mental Health ReEntry and Community Integration Services: Targeted Case Management Program consists of three phases for the returning prisoner. These stages are: Phase One; "Getting Ready": the Institutional Phase where identification and assessment of eligibility will occur; Phase Two; "Going Home": the Re-Entry Phase where 90-day in-reach and transition planning are completed; and Phase Three; "Staying Home": the Community Supervision and Discharge Phase where successful transition to the community including stable housing and, where possible, sustained employment occurs.

1 Multi-Purpose Collaborative Bodies are designated planning entities that are in place throughout Michigan to address interagency service delivery approaches for "at risk" and "in need" special populations.

The program will deliver targeted case management services for referred offenders with an identified mental illness for a minimum of 12 weeks. Targeted case management services will be delivered in prison facilities as directed by the MDOC, Monday through Friday, during regular business hours. The program will work in concert with designated facilities to determine appropriate dates/times. At the conclusion of the enrollment period, participants will be linked to needed community resources, providing a seamless transition to community placement services. These services will be provided through a contract between the MDOC and a partnership between Life Ways and New Passages (Attachment C – Contract).

Target Populations

I) Paroling Prisoners

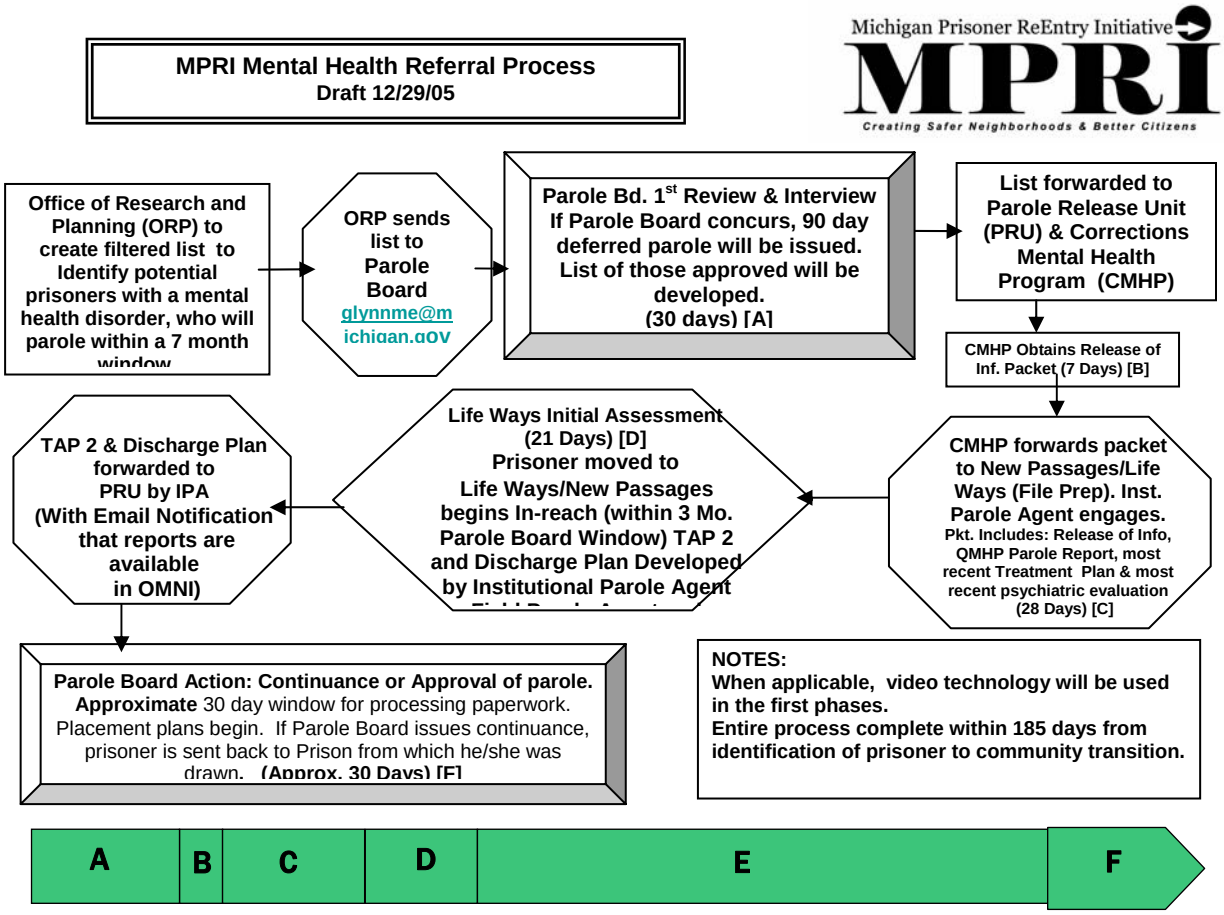
Prisoners are identified based on the presence of a) an active mental health record or b) a history of mental health treatment at some point during the period of incarceration, including those with dual diagnosis, by county of return initially within the eight First Round Pilot Sites. Other considerations will be made per Parole Board policies regarding parole eligibility, PD 06.05.140 “Parole Process”.

II) *Technical Parole Violators – Technical Rules*

Prisoners who are at risk of return to prison as Technical Rule Violators (TRV) may be referred by the Field Parole Agent if there is indication the parolee is in imminent danger of failure without immediate intervention. A referral directly to the contractor will be made. Information will be provided to Parole Agents from Field Office Administration which will specify referral process. The program will work closely with the Field Parole Agent to facilitate an appropriate response to the needs as indicated by the returned prisoner. When this referral occurs, the program will notify the contract administrator of the referral and acceptance of the individual into the program.

II) *Prisoners who Serve their Entire Sentence (Max Out)*

Every attempt will be made to identify prisoners who will be maxing out on their sentences with enough advance notification to provide the contractor opportunity to interview and assess the prisoner’s desire to participate in the program. If the prisoner desires to participate, he/she should be given every consideration regarding transition needs and be assisted by program staff at the correctional facility from which the release will occur. Referrals of this type will be made through the Correctional Mental Health Program (CMHP) and flow through the Program Support Services Division as outlined in the following chart:



Days in Cycle A-30, B-7,C-28,D-21,E-69,F-30

Classification Transfers and Placement

Classification, transfers, and placement are in accordance with Policy Directives 05.01.130 "Prisoner Security Classification" and 05.01-140 "Prisoner Placement and Transfer".

> *05.01.130 N. "Determining Actual Placement Level": (Paragraph N)*
> *"Prisoners shall normally be placed consistent with their true security level, however, there may be reasons unrelated to security, (e.g., medical/mental health needs; lack of bed space at the appropriate level) which preclude such placement. When that occurs, the prisoner may be waived to a higher or lower actual placement level."*

And;

PD 05.01.140 H. "Prisoner Placement and Transfer": (Paragraph H)
"A Transfer Order shall be used for routine transfers and emergency medical, psychiatric and security transfers. The Transfer Order shall include the purpose of the transfer, program information, special problem offender notice information, Security Threat Group (STG) designation, assaultive and property risk designations, current security screening designations, current special accommodation notices
or medical details and any pertinent information as to special precautions which should be taken with the prisoner."

Prisoners identified by the Parole Board as potential parolees, shall be transferred once the Corrections Mental Health Program (CMHP) has been notified of their status. CMHP will collaborate with MDOC Classification staff to ensure an expedient transfer to the facility identified as appropriate to meet the secure Level of custody and programming needs required by the mental health prisoner.

Mental Health Treatment Team

The services will be provided by a program selected through bid process, by an accredited and licensed contractor in conjunction with the CMHP outpatient, Residential Treatment Services, Residential Treatment Programs, or Acute Care team, which is comprised of a core group of clinicians, Resident Unit Manager or Counselor, a Transition Team from the site the prisoner will return to, and Institutional Parole Agent (IPA) and, as needed, Health Care staff. This core group is the recommending body regarding the prisoner treatment, management and Transition Accountability Plan (TAP). The final decision regarding parole rests within the purview of the Parole Board. Team members are committed to consistent therapeutic interactions in a humane and goal focused manner with prisoners participating in treatment which will result in a streamlined and seamless transition to the community.

Program Organization and Services Offered

Prisoners enrolled in the MH-MPRI are expected to participate in all aspects of programming and transition planning including, but not necessarily limited to:

- Psychiatric evaluations
- Successful completion of the 90-Day In-Reach
- Increased responsibility for their behavior and identifying triggers to criminal behavior
- Developing behavioral alternatives to criminality and substance abuse
- Increasing constructive expression of emotional, listening and parenting skills
- Developing personal support systems
- Enhancing employability skills to attain viable employment
- Increasing his/her understanding of family unification, child care and money management
- Psychopharmacology review
- Case management
- Psychosocial rehabilitation (i.e., medication management, symptom management, cognitive skills training, problem-solving skills training, social skills training, anger management, stress management, etc.)
- Dual Diagnosis Mental Health/Substance Abuse Education and Treatment
- Positive recommendation from the Treatment Team and Parole ReEntry Unit to the Parole Board

MPRI Phase One – Getting Ready: The Institutional Phase

- Identification and interview by the Parole Board (if approved)
- Intake assessment by the Contractor (whenever possible, video technology will be used)

MPRI Phase Two – Going Home: The ReEntry Phase

- 90-Day In-Reach in conjunction with the Treatment Team
- Identifying needs and matching to the assets in the community of return

MPRI Phase Three – Staying Home: The Community Supervision and Discharge Phase

- Community placement, case management and collaboration with various aspects of transition as identified in the TAP2 in conjunction with the Field Parole Agent

Special Programs and Management of MPRI Prisoners in Custody

Participation in MH-MPRI as a Result of Misconduct Ticket

Whenever a charge of misconduct is made for a prisoner in MH-MPRI, procedures for implementing Policy Directive 03.03.105, "Prisoner Discipline," must be followed. A request to consider whether the individual may not be responsible due to mental illness must be addressed to the Unit Chief or designated Qualified Mental Health Professional (QMHP)

Management

If the prisoner is determined responsible for his/her behavior, the QMHP must make a recommendation whether the prisoner's ongoing participation in the program should be continued. The Treatment Team reviews all major misconducts and recommends that sanctions be limited to those that will allow the prisoner to continue treatment for his/her mental illness or removal from the program. These sanctions would provide consequences for the behavior, but be flexible enough to allow treatment. If found guilty program removal may be the result, versus detention to allow the prisoner's mental health treatment needs to be met.

If found not responsible for his/her actions and removed due to inability to complete the program, the prisoner may be transferred to a treatment program, treatment level upgrade, a Crisis Stabilization Program or an Acute Care Psychiatric Unit for further evaluation and treatment.

Daily reports for prisoners in this program must be made in the unit logbook, the health record and the TAP2 Plan.

Program Resources

Supportive program materials and equipment must be in compliance with equipment approved by MDOC and under use by the CMHP. A-V hardware, video and audiotapes, books, training manuals, and other materials approved for programming by the Treatment Team must receive final approval by the Warden of the facility.

Physical Setting

Suitable and safe space for necessary activities must be provided in the prisoner housing unit between 8:00 a.m. and 4:30 p.m., Monday through Friday, including areas for one-on-one therapy.

Recommended sites are: (Male – Outpatient and RTP) Gus Harrison Correctional Facility, (Male Acute and RTS) Huron Valley Men's and (Female) Women's Huron Valley. These sites have active mental health components existing at the site; therefore, collaboration and merger of services will enhance the likelihood of success. Secondly, placing an Institutional Field Agent would be more suited to the sites due to the close proximity to each other.

Staffing

Resident Unit Officers (RUOs) work closely with prisoners and staff and may participate in transition planning meetings and discussions. The CMHP staff have professional experience and have cultivated positive working relationships with members of the MDOC team based on cross culture involvement and program facilitation at numerous prisons across the state. The cooperative effort of custody/housing, school and mental health staff will be an essential component to the success of this initiative. Each profession will contribute its expertise (within the roles and scope covered by licensure, laws and policy) to the Transition Accountability Plan. It is the strength of this team that will contribute to the likelihood of the success of the prisoner.

Those who successfully complete the two phases of the three-phase program (Getting Ready and Going Home), may be recommended for parole approval to the Parole Reentry Unit. As permitted by the Transition Plan and management plan, MH-MPRI prisoners may have access to institutional programs and services available at the institutions including education, general health services and employment/vocational training.

In the event of a non-bondable assaultive or major destructive ticket occurring during the prisoner's participation in this program, the situation will be evaluated by the team and determination made whether to continue the individual in the program or return them to the previous placement or an appropriate treatment program based on the level of care needed.

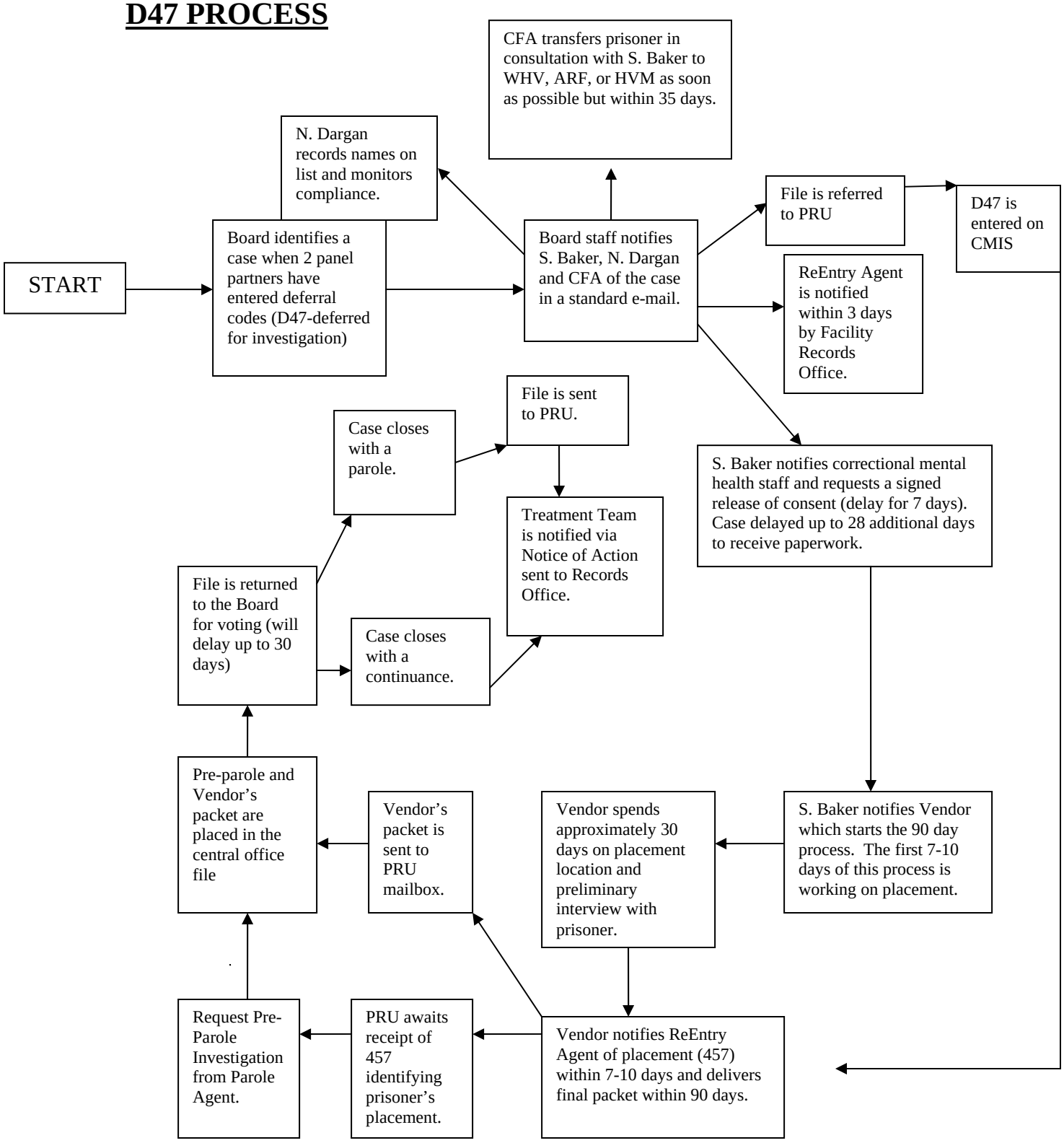
ATTACHMENTS

FIELD OPERATIONS TIMELINE

&

D47 PAROLE BOARD FLOW CHART

D47 PROCESS


START
Board identifies a case when 2 panel partners have entered deferral codes (D47-deferred for investigation)
N. Dargan records names on list and monitors compliance.
CFA transfers prisoner in consultation with S. Baker to WHV, ARF, or HVM as soon as possible but within 35 days.
Board staff notifies S. Baker, N. Dargan and CFA of the case in a standard e-mail.
File is referred to PRU
D47 is entered on CMIS
ReEntry Agent is notified within 3 days by Facility Records Office.
S. Baker notifies correctional mental health staff and requests a signed release of consent (delay for 7 days). Case delayed up to 28 additional days to receive paperwork.
File is sent to PRU.
Case closes with a parole.
Treatment Team is notified via Notice of Action sent to Records Office.
File is returned to the Board for voting (will delay up to 30 days)
Case closes with a continuance.
Pre-parole and Vendor's packet are placed in the central office file
Vendor's packet is sent to PRU mailbox.
Vendor spends approximately 30 days on placement location and preliminary interview with prisoner.
S. Baker notifies Vendor which starts the 90 day process. The first 7-10 days of this process is working on placement.
Request Pre-Parole Investigation from Parole Agent.
PRU awaits receipt of 457 identifying prisoner's placement.
Vendor notifies ReEntry Agent of placement (457) within 7-10 days and delivers final packet within 90 days.

MENTALLY ILL – FIELD OPERATIONS

II) DAY -

0	
1	Parole Release Unit (PRU) Receives D-47 case from Parole Board
2	PRU enters action into CMIS
3	PRU distributes Notice of Action to CFA Records Office
35	Prisoner arrives at ARF, WHV, or HVM
40	Re-entry agent is notified of prisoner's arrival at facility by Records Office Supervisor
45	CMHPT and vendor begin TAP 2 initiation with re-entry agent
65	Re-entry agent receives assessment/placement information from vendor. First ½ of TAP 2 is in OMNI for review
75	CFJ-457 is completed and forwarded to the PRU via email from the re-entry agent
80	PRU routes Preparole Investigation to field
110	• Re-entry agent receives Parole Aftercare Packet, via electronically, from vendor. Re-entry agent forwards to PRU via email. Re-entry agent uses packet to work on completing TAP 2. • Completed Preparole is due from field agent
120	• Re-entry agent completes TAP 2 in OMNI. • Parole Aftercare Packet and completed Preparole forwarded to Parole Board by PRU
	If Parole Board votes to parole:
WITHIN 5 DAYS AFTER PAROLE BD. VOTE:	o PRU enters Notice of Action in CMIS o PRU distributes Notice of Action to CFA and field o PRU distributes Notice of Decision to Prosecutor and victim
(AFTER 5-DAY PERIOD)	o PRU enters OFP o PRU distributes OFP and victim letters o Parole occurs at least 28 days later
180	Parole Release

Statement of work as attached to Lifeways Community Mental Health Authority contract.

ATTACHMENT A – Amended

SECTION 2 – SPECIFIC INFORMATION REQUIRED

II.2.A LifeWays and the subcontractor, New Passages agree to undertake, perform, and complete the following in accordance with the terms and conditions of this agreement:

II.2.B The subcontractor, New Passages will prepare a participant profile, prior to enrollment in the targeted case management program, based on information provided by the MDOC, which includes, but is not limited to:

i) A Transition Accountability Plan (TAP) if one has been created by the MDOC
ii) The most current psychiatric and medical assessment
iii) Academic and vocational skill levels and accomplishments
iv) Substance abuse history and treatment
v) A family assessment

II.2.C LifeWays will act as an Administrative Service Organization (ASO) for the purpose of managing the statewide capacity of returning prisoners with mental illness to their local community.

II.2.D LifeWays (ASO) will be responsible for developing/maintaining the local community network in coordination with multi-purpose collaborative bodies and the locally responsible mental health providers. Preliminary work is underway.

II.2.E LifeWays (ASO) will establish the supportive service array (including development and management of eligibility criteria), assure application of other entitlements, and work with DHS (or other applicable agencies) to assure application occurs prior to release and is appropriately transitioned to the final county of residence. LifeWays will tap into the expertise of our 211 call center staff and will explore the possibility of using our on-site DHS worker for this purpose.

II.2.F The subcontractor, New Passages will enroll referred offenders with mental illness in targeted case management services for a minimum of 12 weeks. Targeted case management services will be delivered in prison facilities as directed by the MDOC, Monday through Friday, during normal business hours. New Passages will work in concert with designated facilities to determine appropriate dates/times. At the conclusion of the enrollment period, participants will be linked to needed community resources, providing for a seamless transition to community placement services. These services will be provided consistent with the Michigan Prisoner Re-Entry Initiative.

II.2.G The subcontractor, New Passages agrees to provide offender participants with a program orientation. This orientation will be conducted on site at prison facilities as designated by MDOC where the offender is housed.

II.2.H The subcontractor, New Passages will complete a comprehensive assessment for each offender enrollee. A summary report will be developed from the assessment and shared in a clear and understandable manner with the Michigan Department of Corrections, offender participants, and others on a "need-to-know" basis. The comprehensive assessment will address the acquisition of supportive or permanent housing, employment, and services to respond to identified needs in the areas of alcohol and/or substance abuse, mental health, physical health and any other identified needs that will hinder success on parole.

II.2.I Based on the comprehensive assessment, LifeWays and the subcontractor, New Passages will form a "Re-Entry Transition Team" consisting of representatives of LifeWays, Michigan Department of Corrections, participating State of Michigan agencies, and other service providers identified in the Plan. This will include establishing lines of communication with Correctional personnel in both the Jackson facility and in the Jackson community.

II.2.J LifeWays and the subcontractor, New Passages will work with designated MDOC personnel to develop a Transition Accountability Plan (TAP) for each offender participant. The Plan will address identified needs in the areas of: mental health, alcohol and/or substance abuse, physical health, supportive/permanent housing, employment, income, and any other identified needs that unless addressed will hinder success on parole. The Plan will include transitional goals/objectives achievable while participant is in MDOC custody, and goal/objectives pertaining to integration achievable after release back into the community. The Michigan Department of Corrections and other service providers identified in the Plan shall each receive a copy of each Transition Accountability Plan (TAP).

II.2.K LifeWays will modify existing Care Management and Utilization Management Criteria to determine/authorize appropriate types of treatment and supports to address the needs of this population, producing:

i) Service Continuum description
ii) Standards and Best Practice Guidelines
iii) Level of Care guidelines
iv) Risk criteria
v) Release and discharge criteria

II.2.L The subcontractor, New Passages will prepare a Discharge Report prepared prior to the offender's scheduled completion of the program and provided to MDOC and other service providers identified in the Plan 15 days prior to the discharge. The discharge report shall include the initial parolee goals as outlined in the TAP, a summary of progress toward those goals, and recommended follow up as appropriate. The recommendations shall address the need for additional follow up support as established in

item #7. LifeWays will also establish processes for discharge from transitional service, and develop planning transfer specifications to home community.

II.2.M LifeWays will develop and manage a local Re-Entry network that has special competency and capacity to address the needs of parolees with mental illness. This will include performance of credentialing and competency reviews.

II.2.N LifeWays will utilize its strong relationships with other Community Mental Health agencies across the state to develop statewide community capacity through multi-purpose collaborative bodies to support development of housing and employment options and supports. This will include

i) Building community collaboration models in other target communities.
ii) Clarifying re-entry referral and reporting relationships with target communities.
iii) Building supports with local CMH's to coordinate with regional transition centers.

II.2.O LifeWays and the subcontractor, New Passages will facilitate the transfer or referral of offender participants being released to follow up treatment and/or services pursuant to the TAP.

II.2.P LifeWays will develop the following performance measures for the re-entry and targeted case management program for offenders with mental illness:

i) Enrollments
ii) Successful application for entitlements
iii) Program Completions
iv) Placements
v) Increase parole approval rates for offenders with Mental Illness
vi) Reduce recidivism
vii) New Crime
viii) Technical Violations
ix) Successful transition to home community
x) Sustained Employment
xi) Stable housing

II.2.Q LifeWays will expand existing mechanisms for performance/outcome measurement, monitoring and reporting to include the above measures.

II.2.R LifeWays will develop a payment/funding model where service dollars follow the person throughout the process.
i) This will include maximizing other entitlements for which parolees are eligible

II.2.S LifeWays will set up the structure to serve as the fiduciary Agency. This will include:

i) Establishing mechanisms to disperse funds
ii) Providing regular financial reports to MDOC

II.2.T LifeWays will provide monthly Progress Reports to Michigan Department of Corrections.

II.2.U LifeWays will provide a final report to MDOC on accomplishments and performance of the pilot project, including identification and evaluation of major system strengths and weaknesses in connection to the re-entry for offenders with mental illness.

II.2.V LifeWays and the subcontractor, New Passages will establish and monitor the following service performance measures:

i) Enrollments:.....Number of enrollees to be determined.
ii) Program Completions:..... 90% of enrollees .
iii) Placements:..... 85% of program completers.
iv) Recidivism: ..... 12% or less for those who become employed.

II.2.W LifeWays and the subcontractor, New Passages shall at all times during this agreement maintain and comply with the appropriate license(s) if applicable.

II.2.X The subcontractor, New Passages shall provide a plan for transportation to and from the aftercare program for participants requiring transportation.

II.2.Y The subcontractor, New Passages shall provide a lunch meal appropriate to scheduling considerations.

II.2.Z The subcontractor, New Passages shall at all times provide services through counselors who:

i) Have life skills assessment experience.
ii) Have one year of prior experience in life skill counseling.

II.2.AA LifeWays and the subcontractor, New Passages and employees will have no active police warrants.

II.2.AB LifeWays and the subcontractor, New Passages shall seek and receive state approval for any counselor prior to using them for this project.

II.2.AC LifeWays and The subcontractor, New Passages shall only appoint employees to work on a contract if they have cleared the LEIN and other security checks.

II.2.AD LifeWays and the subcontractor, New Passages shall obtain permission for LEIN checks of all prospective workers on a contract. The permission slip will include:

i) Employee’s Full Name
ii) Social Security Number
iii) Date of Birth
iv) Michigan Drivers License Number or State ID Number
v) Employees Signature

II.2.AE LifeWays and the subcontractor, New Passages shall continue to administer services to the parolee during the period of parole until the following objectives have been met and consultation has taken place with the referring agent:

i) Increasing the parolees' responsibility for their behavior and identify triggers to criminal behavior.
ii) Developing behavioral alternatives to criminality and substance abuse.
iii) Increasing constructive expression of all emotional, listening, and parenting skills.
iv) Developing personal support systems.
v) Enhancing employability skills to attain viable employment.
vi) Increasing his/her understanding of family unification, child care, and money management.

II.2.AF The subcontractor, New Passages shall testify at Parole Violation Hearings at the request of the referring agent (should the need arise) to provide the Parole Board with pertinent information relative to the parolee's participation in LifeWays' assessment and treatment program.

II.2.AG LifeWays and the subcontractor, New Passages shall prepare and submit monthly vendor invoices for parolees in the aftercare program. The vendor invoice shall be submitted to the Michigan Department of Corrections Contract Compliance Inspector by the 10th day after the end of each monthly billing period. Each vendor invoice must be reviewed by the Contract Compliance Inspector or designee to certify and authorize that the offenders listed on the vendor invoice are eligible male parolees. At a minimum, the vendor invoice shall include the following information:

i)The name of the referring parole agent.
ii) The name of the parolee in the program.
iii) The parolee's prison number.
iv) The number of days the parolee has been attending the aftercare program by date.

II.2.AH LifeWays and the subcontractor, New Passages will attach to the invoice a copy of the Department of Corrections' CFJ-140, Offender Referral Enrollment Term and sign-in sheets that verify the daily offender count that is being billed for.

MICHIGAN DEPARTMENT OF CORRECTIONS

"expecting Excellence Every Day"

MEMORANDUM

DATE: October 19, 2005

TO: Laura Campbell, Contracts Manager
Bureau of Fiscal Management

FROM: Milton Shoup, Department Analyst
Office of Research and Planning

SUBJECT: Justification: Targeted Case Management Services for Mentally Ill Parolees Contract

The following bid was received in response to an Invitation to Bid posted on August 5, 2005.

Lifeways Community Mental Health Authority	Jackson County, MI	$2,427,100

Policy and Strategic Planning Administration chooses to award this contract to Lifeways Community Mental Health Authority which will subcontract for service delivery with New Passages Behavioral Health and Rehabilitation Services on the basis of location, program capacity, and capability for a complete package of service delivery. This bidder was the only bidder; the bid was reviewed by Dennis Schrantz, Deputy Director, Policy and Strategic Planning, John Rubitschun, Chair, Parole Board, and Clayton Straseske, Manager, Mental Health Services, and found to be exemplary.

A recipient of the Eli Lilly and Company Behavioral Health Care National Leadership Award, LifeWays is recognized as a state-wide and national leader in public managed behavioral health care. LifeWays is accredited under the Rehabilitation Accreditation Commission's Business Services Management Network standards, and has well developed, sophisticated ASO capabilities, including:

- Provider network development and management
- Credentialing
- Standard setting/evidence-based practices
- Care and utilization management
- Outcomes Tracking and Reporting

LifeWays has demonstrated success in managing large-scale pilot projects that test new and innovative methods for the delivery of mental health services. As the Michigan Department of Community Health made plans to alter mental health service delivery from a fee-for-service to a pre-paid managed care system, LifeWays was the only community mental health agency selected to service as a pilot site for two years to test managed care capabilities prior to state-wide implementation. The agency has a rich history of successfully managing large-scale pilot projects and continuing to support them once funding has expired. Examples include: telemedicine, co-occurring (mental health and substance abuse disorders) project, and the pharmaceutical best practices initiative.

Lifeways will be utilizing New Passages as primary subcontractor. Currently New Passages operates 62 programs spanning across thirteen counties in Michigan. New Passages provides services in Jackson/Hillsdale, Macomb, Genessee, Oakland, Bay, Clinton-Eaton-Ingham, Lapeer, Saginaw, Livingston, and Sanilac counties. Their annual budget for Fiscal Year 2005 is $20,000,000, with services being delivered to over 8,000 persons by more than 600 employees. Services include: Targeted Case Management (ACT Team), Standard Case Management (over 500 persons being handled at all times), Mobile Crisis and Stabilization, 4 Crisis Residential Clinics, 1 Transitional Boarding Home for Homeless, 3 Psychological Service Clinics, 3 Psychosocial Rehabilitation Clubhouse programs inclusive of employment services, 42 licensed specialized residential group homes, 2 portable support programs providing independent living services to persons with disabilities living independently in their own homes, and a homeless outreach program. All three Outpatient Clinics are licensed by the State of Michigan to provide Substance Abuse services. Because of the diversity of programs and services offered, New Passages is well positioned to address the varied needs of parolees with severe and persistent mental illness.

These broad experiences and knowledge bases give Lifeways and New Passages distinct perspectives, embracing the idea of a continuous path toward self-sufficiency, regardless of where a person is along the continuum.

Cc: Dennis Schrantz

Attachments

Contract: Mental Health Services
Contract Justification: Mental Health Services
Contract Abstract: Mental Health Services

Safer Neighborhoods, Better Citizens:
The Michigan Prisoner ReEntry Initiative

A Collaborative Effort of the Governor's Office and the Departments of Corrections, Community Health, Labor and Economic Growth, and Human Services

Parolee Reintegration Services Summary

The Michigan Department of Corrections recognizes that approximately 30% of all Michigan parolees return to home communities within Wayne County. Wayne County was selected as one of the first eight Michigan Prisoner ReEntry Initiative (MPRI) pilot site locations. While the initial work of defining the organization and structure of the MPRI sites was in progress, efforts were made to begin reentry services in Wayne County over and above those that were to be offered by the soon-to-be implemented MPRI Wayne County pilot site.

The additional support services were arranged in three areas: Residential Transitional Housing & Services for female returning prisoners, Employment Services for females, and Day-Reporting for male and female returning prisoners. These three avenues of service were selected to meet critical needs for returning prisoners in Wayne County.

Residential Transitional Housing has a capacity of 64 beds for female offenders. This service supplies a controlled living environment in the community for females whose transition into community living is hampered by substance abuse issues coupled with a lack of appropriate housing. The program was designed specifically to utilize gender- responsive strategies for life skills improvement, family reunification activities, and parenting skills. The contracted services operate in phases reflecting the graduation to independent drug-free community living.

A Residential Transitional Housing contract continues with Elmhurst Home Inc. for the FY06 amount of $1,395,760.00.

Employment Services are to provide vocational and employment services to female returning prisoners housed in the Residential Transitional Housing program, with a goal of 12-month employment retention following the start of participation. The program is intended to provide real-life employment and job-seeking skills for the female returning prisoners. The contract is intended to provide service to 100 individuals throughout FY2006.

An Employment Services Contract has been awarded to Goodwill Industries of Greater Detroit for the amount of $100,000.00

Day Reporting Services for male and female returning prisoners are designed to fill a gap for those prisoners who need to improve various skills for successful transition to the community, including soft-skills programming, improvement of job-seeking and educational skills, and guidance via participation of community-based mentors. These two programs operate at a capacity of 25 females and 35 males.

Day Reporting Services Contracts have been awarded to Transition of Prisoners, Inc. for the amounts of $226,000.00 for the male program and $207,950.00 for the female program.

Table of Contents

Parolee Reintegration Services Summary 1

Females In Transition – Elmhurst Home, Inc. 3

Employment Services Contract: Goodwill Industries of Greater Detroit 12

Day Reporting Services Contract for Female Parolees: Transition of Prisoners, Inc..... 18

Day Reporting Services Contract for Male Parolees: Transition of Prisoners, Inc. 23

Females In Transition – Elmhurst Home, Inc.

A Proposal to the Michigan Department of Corrections

Executive Summary

Elmhurst Home, Inc. (EHI), a 501©3 community agency located in Wayne County, proposes to provide Half Way House services to 44 paroled female offenders at a time in a program lasting six months. The proposed program was developed specifically in response to design considerations outlined by the U.S. Department of Justice, National Institute of Corrections detailed in its publication Research, Practice, and Guiding Principles for Women Offenders: Gender Responsive Strategies, and by the Michigan Department of Corrections in its Issue Brief Design Considerations for a Half Way House Program for Female Parolees. A comparison of the proposed program to these principles is both attached and discussed below. The Half Way House Program is a partial solution to issues raised in the MDOC Five Year Plan to Control Prison Growth. It is the intent of EHI to fully meet the state's requirements as outlined in Design Considerations for a Half Way House Program.

Submitting Agency

Elmhurst Home, Inc. is a fully accredited licensed facility licensed to provide residential, outpatient, and prevention services at its site at 12010 Linwood Avenue in Detroit. The current facility provides services to up to 165 men and women in two adjacent buildings.

Elmhurst currently serves men and women in separate, gender-specific treatment. Elmhurst Home and its organizational predecessor, Recovery Movement, has been treating those addicted to alcohol and other drugs since the late 60's, becoming a funded substance abuse treatment center in 1978. We served both men and women on an outpatient and residential basis from 1974 to 1988, when Elmhurst focused its efforts on men only. In 1999 Elmhurst Home opened a separate 29 bed Intensive Residential program for women. Elmhurst Home is licensed for Prevention, Outpatient, and Residential services and currently provides Intensive Residential, Residential Therapeutic, Residential Half Way House, Intensive Outpatient-Domiciliary, and Intensive Outpatient services to varying populations. We believe that our continued growth is a testament to both our program excellence and our ability to successfully implement programs.

Elmhurst has provided services to clients who are addicted offenders on probation or parole since its inception. In 1997 we provided services to the County through its contract with the City of Detroit Health Department. We have been under contract with Wayne County Department of Community Justice to provide probation residential services since 1998. In 2000 Elmhurst began providing services to Wayne County DCJ operating the Target Cities three phase jail-based treatment program and in 2001 Elmhurst began providing male Probation Residential and Detention Halfway House Services under the Wayne County Coordinated Jail Use Plan, as well. EHI is the largest provider of female Probation Residential Services in Wayne County. EHI was recently rated by the University of Cincinnati's Criminal Justice Institute on the Correctional Program Assessment Inventory and received a 69.3% rating (only 8% of programs nationally rank at 70% or higher). EHI continually strives to be a Center of Excellence and has already put in place plans which will bring about ranking at the 70+ level in 2004. EHI is aware that the best practices in the treatment of offenders has been evolving over time and will continue to do so as further research takes place. We are committed to a process of

staff development which will continually, to the extent resources make it possible, train staff and the Clinical Director and Supervisors in these best practices.

The contracts between EHI and WCDCFS for provision of various services, as described above, have resulted in the development of additional community agency linkages and collaborations with corrections system components. The EHI Clinical Director is a 2001 graduate of the National Drug Court Training Institute and a 2000 graduate of a five-day training program of the International Community Corrections Association on cognitive skills programming for offenders. He has a Ph.D. in Psychology and 30+ years experience in the addictions field. EHI works collaboratively with 3rd Circuit judges and several judges from that court are in regular communication with the Clinical Director to provide treatment services to Wayne County's current drug court cases. EHI is a participant in a project with the WCDCFS and Goodwill Industries to provide a more focused approach to job training and finding for PA 511 eligible offenders. EHI is also a partner with the Detroit-Wayne County Community Mental Health Agency in providing mental health services as well as substance abuse treatment services to dually diagnosed PA 511 eligible offenders to reduce jail/prison recidivism.

EHI has acquired a building at 245 Pitkin in Highland Park. It is a large, relatively new (fully air conditioned, for example) building which is being completely renovated inside and brought up to code. The building is a handicapped-accessible, one-story former FIA office. It is in this building that the offender interventions proposed here would take place. There will be 104 beds available plus space for outpatient programming. There is a large park and recreation field immediately across the street from this building.

All EHI's facilities are fully insured, as are the program elements through a general umbrella liability policy. There will be two security staff on duty at all times and exit from the facility is closely controlled by a double-approval pass system. All residents are subject to search, and residents must be accounted for at a minimum of 8 head counts per day. Transportation is readily accessible because four major bus lines run close by (Woodward, Puritan, Hamilton, and Schoolcraft).

Program Design Summary

The Michigan Department of Corrections, in its Issue Brief Design Considerations for a Half Way House Program for Female Parolees (December 2003), has noted 8 critical points which must be covered in any design. These are, briefly: correspondence with U.S. Department of Justice recommendations for gender-responsive services; close operational integration with MDOC Field Operations Administration staff; full involvement of parole agents on misconduct issues; delivery of Life Skills Development programming with continuity to that currently in MDOC facilities; continuation and intensification of family reunification efforts; involvement of MDOC female correctional facility staff in developing individualized service and release plans; a centrality of programming focus on education and vocational training; and a program design which addresses alcohol, drug abuse, and mental health issues integrated within the Half Way House program.

The Females in Transition (FIT) half way house program proposed by EHI has been designed in accordance with N.I.C. principles to meet all critical points outlined by the Department. An MDOC work group including Correctional Facilities Administration and Field Operations Administration has been involved in planning the program design. CFA will provide all necessary pre-release planning and assessment and will forward all necessary records including educational records, to ensure continuity of services. An FOA staff member will be housed in the Half Way House facility with full access to program records and it is EHI's understanding that the Agent will have Department computer data base access and immediate apprehension capabilities.

The FIT program uses a cognitive restructuring approach that reflects a gender specific trauma informed model which is strength based. This approach does not focus on behavior. Instead it focuses on the thoughts which drive the individual's behavior. Cognitive behavioral programming will help the offender understand what she thinks about herself, and how her thinking exacerbates her problems. As the National Institute of Corrections notes, the prevalence of trauma among this population requires an awareness of the impact of the abuse in the lives of women offenders and the adaptation of programming to prevent inadvertent re-traumatization.

The program will be delivered in four phases, the first being assessment and family reunification programming prior to release from an MDOC facility, the second through fourth in the community in residence in the FIT facility in Wayne County. In Phase 2, lasting 60 days, the focus will be on intensive service delivery within the facility, including cognitive skills, Life Skills, educational development, and programming specifically addressing the prevention of relapse to alcohol and drug use and of recidivism to criminal conduct. This programming will be gender specific, delivered in a gender-sensitive environment. The Michigan Council on Crime and Delinquency (MCCD), under contract to EHI, will provide family reunification services to program participants beginning in Phase 1 but intensifying in Phases 2-4. In Phase 3, lasting 30 days, parolees will begin to focus more heavily on their transition to the community including employment, housing, and the development of positive community connections. In Phase 4, lasting up to 90 days, parolees will be even more heavily focused on their transition into the community ideally, whenever possible, employed at a position which will continue after they leave the Half Way House.

Program Description – Females in Transition

In all phases the services and the environment in which they will be provided will, as closely as possible, follow the recommendations detailed in the U.S. Department of Justice National Institute of Corrections publication Research, Practices, and Guiding Principles for Women Offenders: Gender Responsive Strategies. A chart comparing NIC guiding principles with the program design is attached. All staff in the facility and all staff providing regular services to the women in the program including security/monitoring staff will be female. Should male maintenance workers be required on site they will be escorted. Staff will be chosen who have the interest and qualifications required to work with women under criminal justice supervision and they will be trained in gender responsive principles. The Clinical Supervisor has training in working with women under supervision who have substance abuse, trauma, and mental health issues. The use of a computerized corrections specific risk-needs assessment which has been validated for women will facilitate population and program specific research in accordance with both NIC and Department requirements.

Phase 1: Prior to release from an MDOC facility.

Women will participate in an initial orientation prior to release. Information on the type of programming provided through the initiative as well as the expectations and requirements for participation will be explained. MDOC staff will prepare an assessment that will culminate in development of a reentry plan for each woman.

Included in this profile will be information reflective of:

- a current medical assessment as well as identification of potential governmental funding options for health care needs (e.g. Medicaid)
- academic and vocational skill levels and accomplishments
- trauma history

- substance abuse history and treatment
- family history
- a COMPAS risk-needs assessment if possible

During Phase 1, there will be an initiation of visits between the incarcerated offender mothers and their children. As the children begin visiting, MCCD staff will conduct a family assessment involving the mother, current caregiver. The focus of this assessment will be planning for a positive child/mother reunification which provides stability for the family and addresses the individual needs of the child and mother.

A minimum of one child-centered visit per month will take place in the prison or camp for those for whom it is appropriate. Within two weeks of the first family reunification visit, FIT/MCCD will conduct a child-centered family assessment (mother, caregiver, child, other family members) that will pinpoint issues and problems and develop remedial plans in the following areas:

1. Mother/child interactions and relationships.
2. Caregiver/mother interactions and relationships; and
3. The needs of the mother and child necessary to a successful reunification.

This assessment will be continually updated throughout the women's stay at FIT .

Phase 2: Return to the community – placement at EHI. Typical length 60 days.

Primary attention in this phase also will be given to cognitive restructuring and life skills development. However, a goal of this and succeeding phases of the program is also to assist the parolee in locating and developing positive connections in the community which will support a crime free lifestyle after return to the community. Outside funding will be sought to develop a closely and professionally supervised mentoring program. This program will match each parolee with a community volunteer who will provide positive socialization, and assist in the development of community connections. Also included in the case management plan will be identification of possible co-occurring disorders.

In this and succeeding program phases, practices will be fully integrated with MDOC parole supervision policies and procedures. An office on-site will be provided to Field Operations Administration. All incoming women will sign releases acknowledging that FOA staff will have full access to all records and will function as a full member of the treatment team. FOA will be responsible for the provision of appropriate corrections-related training to program staff. They will exercise appropriate oversight over such issues as visitation, and in later phases, community re-entry (passes, job placement, housing placement) developed by program participants in conjunction with their case managers. Immediate apprehension of program violations will be arranged by parole agents as necessary.

Primary programming time will give attention to:

- Life skills and cognitive restructuring including
  - Self Efficacy
  - Problem Solving
  - Stress Management
  - Anger Management
  - Healthy and Safe Living
  - Communication
  - Negotiation

Employability
Money and Time Management

- Substance abuse education and treatment, as needed
- Community service.
- Family/child reunification and relationship building
- Development of the recidivism and relapse prevent plan begun in Phase 1

During all residential half-way house phases, programming and staff training will specifically address issues of emotional and physical safety. This will be evident to the women entering in both policies related to conduct and misconduct and basic programming (Principle 2). EHI practices a cognitive/behavioral focus rather than a classic therapeutic community focus and thus aggressive confrontation is not acceptable. All staff will receive training on the significance of child and adult trauma to understanding and working with female offenders. Elements of the gender specific cognitive skills program by Najavits, Seeking Safety, along with a gender-adjusted version of Milkman and Wanberg's program Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change will form the basis of the cognitive skills curriculum (Principles 2 and 4). Seeking Safety has been used with women in the past by MDOC. Milkman and Wanberg's general program is in widespread use in Michigan with offenders. The gender-specific adaptation was only recently been released and may not, as yet, be in general use elsewhere in Michigan. The EHI Clinical Director, Dr. Blumberg, has been trained directly by Milkman and Wanberg to deliver the program and has received additional training to be a trainer from Jim Kendricks. The FIT Clinical Supervisor has also been trained by Mr. Kendricks. Dr. Blumberg will train FIT staff in the program and, as well, work with staff and the Clinical Supervisor in their use of the adaptation unless MDOC prefers and is able to provide training in this specific area.

Phase 2 is the most staff-intensive phase of the program (see attached services schedule). The program participants will be divided into two service teams. Each team will have assigned to it a case manager and a counselor. The case managers will typically have an Associate's Degree or a Bachelors level preparation in criminal justice or social work. They will be responsible for life skills lectures and for developing and maintaining educational, vocational, and housing referrals that are assessed as needed on the basic individualized service and release plans that take place in Phase 3 and Phase 4.

During Phase 2, the Bachelor's or Master's prepared counselors will each provide a two-hour small group session teaching the cognitive skills programs. This will take place each morning M-F. Each participant will attend three such morning groups per week plus an additional cognitive skills related session Saturday morning and Sunday evening. Depending upon final scheduling arrangements, in the afternoon participants will receive one parenting session per week, provided by MCCD for those on their caseload until they have received the eight provided by MCCD as a part of their plan. Parenting/adult responsibility will be provided by the National Council on Alcoholism, as it is currently for all EHI program participants and those FIT participants who are not serviced by MCCD or who have finished their eight-week program.

Life Skills and cognitive skills practice sessions will be provided by FIT staff both morning and afternoon (see schedule). Healthy and safe living sessions will be provided, as they are now, by Community Health Awareness Group (C.H.A.G.) and FIT staff. FIT participants will be able to utilize the Destinations educational software on one of the five computer work stations to follow through with progress begun while in prison during available weekday morning or afternoon time and time on Saturdays and Sundays. Their

educational progress and Destinations plan status will be established by MDOC while in custody and a disc will accompany them to FIT.

The counselor associated with each team will not only provide cognitive skills training in small groups, and assist in life skills training, but will also provide individualized expert attention to substance abuse, trauma, and mental health so important to this population. Services will be provided on both an individual and small group basis as the needs of the women indicate. Every woman will receive a copy of at least one, and in some cases two or three workbooks, and will be expected to work in them as a function of their personal growth and individual plans. Their work in these books will be reviewed on a weekly or bi-weekly basis with the counselors during this phase. This written work will include the participant manual of Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change. The manual or material from Gorski's Relapse and Recidivism prevention workbook, and for those who are dual diagnosed, a workbook or material from a workbook will be provided.

Every program participant will be required, by the time she leaves the program, to have completed all assignments given, including a written comprehensive plan detailing risk factors and avoidance and coping strategies for both criminal behavior and substance abuse. The detailed personalized plan should be of value not only to the program participant but also to the supervisory parole agents who will follow her after she leaves the program. Of course the FOA staff involved with participants while they are residing in the FIT program will have the opportunity to make appropriate input into the development of all plans, and have the ultimate authority to approve or disapprove aspects of the plan's supervision which is legally mandated. That is, for example, approval of a housing plan, yes, approval of cognitive or meditative stress management to be used, probably not the legal purview of FOA, though input can be made.

The counselors will be cross-trained and will provide professional services or make appropriate community referrals in the area of substance abuse, trauma, and mental health and act as specialized resources to manage necessary referrals to the community. For example, they will follow up with Catholic Social Services of Wayne County, which currently provides incest/sexual trauma and domestic violence group sessions to EHI women, to provide for special service needs arising from these groups. The Wayne County Department of Children and Family Services and the Detroit-Wayne County Community Mental Health Board have jointly contracted with Northeast Guidance Center to provide onsite psychiatric consultation and medication for EHI's probation corrections clients. We have been told by WCDFS, but have no written documentation of this, that this service will be extended to those on parole, as well. This will clearly need to be explored more thoroughly and service arrangements negotiated.

During phase 2, and continuing during phases 3 and 4, FIT (provided by MCCD) will continue its family re-unification efforts including, as appropriate, supervised mother and child visits, which focus on resolving conflicts which might prevent successful re-entry of the mother into the extended family and reunification between mother and child (Principle 3).

Phase 3: Community focus, skill building focus – continuing placement at EHI.
Typical length 30 days.

This phase will focus on skill building and preparation for community re-entry. Attention to and participation in individually designated academic programming and vocational training will continue. Intensive cognitive and life skills education will continue on the phase 2 schedule if other appointments are not scheduled. There will be a continuation of money and time management lessons, and women will open a bank account if they have not done so. Problem solving will be stressed. FOA staff will be involved in all issues related to community involvement including home visits and all normal supervisory functions. Any co-

occurring disorders must be stabilized through both medication (if necessary) and behavior modification prior to the completion of Phase 3.

Vocational training and the opportunity to get meaningful employment are critical to participant's success, yet legal barriers and decreased funding of training opportunities are common and growing problems to offenders leaving prisons statewide. EHI has developed relationships with Michigan Works, SER – Metro, Goodwill Industries, Focus Hope, L.I.F.T, and others for our Probation clients. We have participated, along with Region 1 FOA staff, in a pilot program for offenders run by Detroit Works. We will explore every available opportunity for FIT participants. It would be naïve to say this will be an easy process for every woman. Our probation clients are experiencing rejections, because of their felony records, where our City clients are finding employment (Budd Co., for example, near our facility). Because the FIT program participants will have access to five computer workstations, and Destinations software, we expect that strong gains will be made in literacy during phases 2-4 for those for whom this is necessary. The availability of keyboarding software will assist the women in learning basic office support functions at EHI without the need to seek outside support. A State Certified teacher oversees the development of individualized plans for all those in educational training at EHI facilities.

Case managers will direct all employment and hiring efforts by program participants in this phase, including their referral to local volunteer community resources to obtain clothing for work, when EHI cannot supply this need itself from the clothing which is donated to it (so much women's clothing has been donated to EHI in the past that at various times it has been necessary to cut off the acceptance of donations). EHI has relationships with both the city of Detroit and SEMCA employment programs and will further develop and codify these as the FIT program and the new EHI women's Target Cities program are put in place at the new facility. Since all Target Cities women (a subset of our womens probation residential treatment) are required to be in school or working for 30 days before program completion, this is an issue of highest priority, which receives full attention. All women will register at the appropriate Michigan Works site the first week they enter phase 3, or sooner with the approval of FIT and FOA staff. They will have already prepared resumes to take with them during Phase 2 with the assistance of the case managers.

According to the Deputy Director of the Rhode Island Department of Corrections and a N.I.C./MDOC consultant at the design stage of the F.I.B.I.R, the development of a volunteer mentor program has shown substantial success in the re-entry process for women parolees. EHI will recruit volunteer mentors from the community to provide mentoring, and initial efforts thus far have resulted in interest expressed by women members of the Wayne County Sheriff's Department with whom EHI works at the William Dickerson Detention Facility. Recruits are also being sought in the faith community and in the women's sorority community. These mentors (screened and approved by FOA according to department policy) will be able to assist in the process of reintegration into the community. It is hoped that they will assist in the housing and employment search process as well as provide general support in locating and developing positive connections in the community that will support a drug and crime free lifestyle after a return to the community. The mentoring program will begin in this phase of the FIT program and continue thereafter.

The Family Reunification program will continue during this phase of the FIT program. For those for whom this is part of the individualized plan, visits between the women, their children, and caregivers will continue. MCCD will help arrange and monitor these family visits. This will include preparation of mother, child, and caregiver prior to the visit and debriefing of all parties after the visit.

Phase 4: Increased Community Involvement – Typical length 90 days.

The focus of this phase is on employment or training, money management, family reunifications, and community reintegration including housing. During this phase, the amount of unsupervised time the women spend in the community will increase. However, in this phase, as in all phases, when the FIT program participants are in the facility, they will be expected to be involved in regularly scheduled activities unless given specific permission to do otherwise. They will be able to move into the community more rapidly than 90 days if all elements of their individual plan are in place. They must have been fully employed for at least 30 days, have a budget for the post FIT phase, have approved housing, and have no significant misconduct write-ups to even be considered at 30 or 60 days. All elements of all plans to leave the halfway house and move into the community must be approved, in writing, in advance by the supervising FOA staff member.

Staffing for this phase will be primarily the case managers and secondarily the counselors. Because active movement in the community is taking place, including the possible earning of up to 24-hour weekend passes to an approved placement, very active FOA involvement will be even more necessary.

If a woman is employed, she will be required to pay 20% of her wages to the program, after all legally and Departmentally required costs are met. These monies will be returned to her at the time she leaves FIT to use for housing costs or other uses approved by her supervising FOA agent.

Services and activities during this phase include: continued monitoring and support to insure continued employment, when employment has been found; evaluation and monitoring of skills learned related to money and time management; earning of 24-hour passes to an approved housing placement with the advance approval of FOA; and family reintegration efforts will intensify moving toward a specific plan to be put in place when participants leave the Halfway House. During this phase, mentoring will continue and will ideally intensify, assisting in employment searches and housing searches. If identified as a component of her re-entry plan, the offender will be encouraged to participate in 12 step program meetings in the community where she will live. Program services in general will continue, but at a lower level of intensity. Substance abuse education and treatment will continue, as needed.

Participants will attend all services being provided by FIT at those times they are in the facility. If high quality vocational education training is available, it will continue (instead of employment) in order to assist parolees in ultimately entering a position paying a substantial living wage. Before program completion, the re-entry plan will be reviewed with the offender, program staff, and FOA staff. A final decision on housing must be reached and specific arrangements made. After leaving the Halfway House program, it is anticipated that active involvement between the parolee and her community support system will occur. Parolees will be monitored by FOA staff and referral to outpatient substance abuse services will be made, as appropriate as a part of the aftercare plan.

Comparison of Program to National Research

See attached " Program Design Compared to U. S. Department of Justice Gender Responsive Strategies Guiding Principles"

Budget Narrative

The attached budget displays both the full facility budget and several ways to prorate costs. The column on the extreme right represents the proposed FIT budget prorated to 42.6% of total costs. The costs allocated to Administration do not exceed the MDOC 15% limit. The family reunification program which will be contractually provided by the Michigan Council on Crime and Delinquency is represented by a line item of $63,875 calculated based on an estimation of 35 of the 44 parolees in the program at any given time needing services. The cost of this service is $5.00 per person per day. It should be noted that the equipment cost item of

computer leases includes five computers that will be equipped with Destinations software corresponding to that used in MDOC facilities.

The proposed daily per diem rate, including all costs, is $59.74.

Employment Services Contract: Goodwill Industries of Greater Detroit

Contract Extracts: Statement of Work and Compensation

Section 2 - STATEMENT OF WORK

The CONTRACTOR agrees to undertake, perform, and complete the following in accordance with the terms and conditions of this agreement:

The CONTRACTOR shall provide the following services for offenders referred by the STATE:

1. The CONTRACTOR will deliver, at a minimum, the following services to female parolees who will be enrolled in programming by the CONTRACTOR while co-enrolled in a residential program that may be operated by the CONTRACTOR with a separate agreement or may be operated by another contractor with a separate agreement:

    a. Prior to release from a STATE facility, the CONTRACTOR agrees to provide each female offender referred by the STATE and found within an acceptable range of risk as indicated by a risk assessment of the offender with a program orientation in partnership with a designated transitional housing provider. This orientation will be conducted on site at the STATE facility where the offender is housed.

    b. The preparation of a participant profile, prepared prior to enrollment in the program, based on information provided by the STATE and the transitional housing provider, which includes, but is not limited to:

        i. A Transition Accountability Plan if one has been created by the STATE.
        ii. The most current medical assessment.
        iii. Academic and vocational skill levels and accomplishments.
        iv. Substance abuse history and treatment.
        v. A family assessment.
        vi. A customized vocation plan for training, placement, and sustained employment.

2. Program enrollment for 9 weeks of vocational training, academic remediation, and transitional employment. This program should operate at least 5 days per week for 6 hours per day. Following successful program completion, participants should receive placement services resulting in employment and up to one year of retention support. These services must be provided consistent with the Michigan Prisoner Re-Entry Initiative.

3. A continuously running employment, re-entry program for a period of time specified in the inmate's Transition Accountability Plan (TAP) provided by the STATE but for no more than 1 year duration.

4. Participation in a "Re-Entry Transition Team" consisting of representatives of the CONTRACTOR, the STATE, residential program providers and any other service providers identified in the Re-Entry TAP.

5. Upon an offender's arrival at the program site, an orientation to the program rules.

6. The CONTRACTOR will participate with the residential staff in the determination of the need and appropriateness for CONTRACTOR'S vocational services. The residential program will recommend referrals which will become enrollees in the 12 month minimum employment retention for female parolees co-enrolled in transitional residential placement program. The employment program will be operated in support of the overall TAP and consistent with programming received in the residential environment.

7. The CONTRACTOR will participate in the development of a case management plan for each offender, developed by the Transition Team that addresses the acquisition of supportive or permanent housing, employment and services to respond to identified needs in the areas of alcohol and/or substance abuse, mental health, physical health and any other identified needs that will hinder success on parole. The STATE shall receive a copy of each case management plan. The CONTRACTOR will directly provide the employment, training, placement, and retention services for mutually served offenders. Pursuant to the TAP and/or the case management plan developed for each offender, CONTRACTOR will provide on site programming in the areas of employability skills, transitional employment, academic remediation skills, case management support, and placement services which will lead to sustained employment.

8. Performance measures for full services during the agreement period (October 1, 2005 - September 30, 2006) include:

   a. Program Completions: 90% of enrollees.
   b. Placements: 85% of program completers.
   c. Recidivism: 10% or less for those who become employed.
   d Sustained Employment: (i.e. Remain steadily employed for one year, 80% of placements.

9. A discharge report prepared prior to the offender's scheduled completion of the program and provided by the STATE 15 days prior to the discharge. The discharge report shall include the initial parolee goals as outlined in the TAP and/or the case management plan, a summary of progress toward those goals, and recommended follow up as appropriate. The recommendations shall address the need for additional follow up support to assist in maintaining sustained employment for one year post placement. The discharge report shall explain the

reasons that needs continue to exist in the areas of employment if such needs exist.

a. Facilitation of the transfer or referral of offenders being discharged to follow up treatment or services pursuant to the discharge plan.

b. Monthly progress reports developed in concert with the STATE for each offender in the program.

10. The CONTRACTOR shall schedule services and training so they are optimally available to all parolees.

11. The CONTRACTOR will design and implement the services, training, and employment in accordance with the Department of Justices' Gender Responsive Strategies as summarized below and in full as Attachment A:

- Acknowledge That Gender Makes a Difference
- Create an Environment Based on Safety, Respect, & Dignity
- Develop Policies, Practices, and Programs That Are Relational and Promote Healthy Connections to Children, Family, Significant Others, and the Community
- Address Substance Abuse, Trauma, and Mental Health Issues Through Comprehensive, Integrated, and Culturally Relevant Services and Appropriate Supervision
- Provide Women With Opportunities To Improve Their Socioeconomic Conditions
- Establish a System of Community Supervision and Reentry With Comprehensive, Collaborative Services

12. The CONTRACTOR may, in consultation with the referring agent, expel a parolee for continual denial, minimization, lack of progress or disruptive behavior.

13. The CONTRACTOR shall develop with the STATE a female employment services and vocational training contract which shall include a waiver of confidentially for the STATE. No parolee shall be admitted into the program who refuses to sign the contract and waiver of confidentiality.

14. The CONTRACTOR shall issue to the agent a written report for each parolee outlining their progress in the employment services and vocational training program on a monthly basis. The report shall include, but is not limited to, report of attendance, evaluation of the quality of offender participation and overall progress in life skills, discharge/exit summary, and the offender's individual precursors to offending.

15. The CONTRACTOR shall assign each parolee a primary counselor upon admission to the program. The primary counselor is responsible for the provision of required services to each parolee on his/her caseload. In the event the primary

counselor is unable to attend the regularly scheduled session, the CONTRACTOR shall ensure that a suitable alternate counselor is provided to conduct the session.

16. The CONTRACTOR shall at all times during this agreement maintain and comply with the appropriate STATE license(s), if applicable.

17. The CONTRACTOR shall provide a plan for transportation to and from the aftercare program for participants requiring transportation.

18. The CONTRACTOR shall provide a lunch meal as appropriate to scheduling considerations.

19. The CONTRACTOR shall at all times provide services through counselors who:

    a. Have life skill assessments experience.
    b. Have at least one year of prior experience in life skill counseling.

20. The CONTRACTOR and employees will have no active police warrants.

21. The CONTRACTOR shall seek and receive STATE approval for use of any counselor prior to using them for this project.

22. The CONTRACTOR shall only appoint employees to work on this agreement if they have cleared the LEIN and other security checks, and do not have pending criminal prosecution, not under the supervision of a criminal justice agency for a felony or misdemeanor, and do not have any prior felony or misdemeanor convictions without prior written approval from the STATE before performing any services under this agreement. Ex-offenders will not be considered as a contracted staff until they have been discharged from all sentences, including parole and probation, for a minimum of five years.

23. The CONTRACTOR shall obtain permission for LEIN checks of all prospective workers on an agreement. The permission slip is to include:

    a. Employees Full Name.
    b. Social Security Number.
    c. Date of Birth.
    d. Michigan Drivers License Number or State ID Number.
    e. Employees Signature.

24. The CONTRACTOR shall continue to administer services to the parolee during the period of parole until the following objectives have been met and consultation has taken place with the referring agent:

    a. Increasing the parolees' responsibility for their behavior and identify triggers to criminal behavior.

b. Developing behavioral alternatives to criminality and substance abuse.

c. Increasing constructive expression of all emotional, listening, and parenting skills.

d. Development of personal support systems.

e. Employability skills are at a level of attaining viable employment.

f. Increasing her understanding of family unification, child care, and money management.

25. The CONTRACTOR shall testify at Parole Violation Hearings at the request of the referring agent (should the need arise) to provide the Parole Board with pertinent information relative to the parolee's participation in the CONTRACTOR'S assessment and services program.

26. The CONTRACTOR shall prepare and submit monthly vendor invoices for parolees in the aftercare program. The vendor invoice shall be submitted to the Michigan Department of Corrections Contract Compliance Inspector by the 10th day after the end of each monthly billing period. Each vendor invoice must be reviewed by the Contract Compliance Inspector or designee to certify and authorize that the offenders listed on the vendor invoice are eligible female parolees. At a minimum, the vendor invoice shall include the following information:

a. The name of the referring parole agent.
b. The name of the parolee in the program.
c. The parolee's prison number.
d. The number of days the parolee has been attending the aftercare program by date.

27. Attached to the invoice must be a copy of the Department of Corrections' CFJ-140, Offender Referral Enrollment Term, and sign-in sheets that verify the daily offender count that is being billed for.

Section 5 - COMPENSATION

1. The STATE agrees to pay to the CONTRACTOR the sum of $1,000.00 per parolee at the end of 30 days of continuous parolee program enrollment for the services provided pursuant to this agreement. The maximum amount payable, including travel expense reimbursement, to the CONTRACTOR under this agreement shall not exceed $100,000.00.

2. The CONTRACTOR shall be responsible for any travel expenses incurred in the execution of this agreement. Travel reimbursement shall be allowed solely in compliance with the State of Michigan's standardized travel regulations.

3. This agreement is subject to availability of funding from the Legislature.

4. Payment shall be contingent upon receipt of proper documentation from the CONTRACTOR.

Day Reporting Services Contract for Female Parolees: Transition of Prisoners, Inc.

Contract Extracts: Statement of Work and Compensation

Section 2 - STATEMENT OF WORK

The CONTRACTOR agrees to undertake, perform, and complete the following in accordance with the terms and conditions of this agreement:

1. The CONTRACTOR agrees to undertake, perform, and complete the following in accordance with the terms and conditions of this agreement:

2. The CONTRACTOR shall provide an assessment of female parolees who have been referred to the CONTRACTOR by the STATE.

    a. The assessment process shall include, but not be limited to, consultation with the referring agent, a review of relevant records: a comprehensive clinical interview, detailed analysis of the criminal behaviors and their precursors, social functioning, specific interests, current skills, level of education, substance abuse, mental and physical health status, and behaviors. The Initial Assessment (Intake) interview with the offender should last no more than one session.

    b. Assessment Reporting: The outcome of the assessment shall be forwarded in a legible report to the referring agent, within ten business days of the referral, and shall include, but not be limited to, summary information concerning the following issues:
        i. Classification of the offender's current status regarding the elements of analysis of assessment regarding criminal behaviors and their precursors, social functioning, specific interests, current skills, level of education, substance abuse, mental and physical health status, and behaviors.
        ii. Offender's amenability to life skills training.
        iii. Specific social adjustment recommendations.
        iv. Offender's degree of danger to the community and probability of committing similar offenses again.

3. The CONTRACTOR shall provide the following treatment for offenders referred by the STATE.

    a. The CONTRACTOR shall provide group/individual programs for female parolees referred by the STATE. Groups/individuals shall meet eight hours daily, Monday-Friday in the least restrictive environment necessary to conduct the day reporting aftercare program.

    b. Group Purpose/Objectives: The CONTRACTOR'S aftercare program will assist in the following:
        i. Provide an interpersonal group therapy and classroom training in which offender and offense dynamics are examined.

ii. Offer participant specific behavioral strategies or interventions to prevent relapse or re-offending.

iii. To provide programming centered on cultural awareness, sensitivity, comprehensive treatment for drug abuse and trauma recovery, education and job training, family reunification, and addressing other societal and legal barriers to re-integration as they emerge.

iv. To draw on the resources and strengths in various communities and institutions, such as churches, universities, and other community based organizations to assist the women in reaching their goals, as well as serving as a means to educate the public on the importance of successful reintegration.

v. Provide the employment, training, placement, and retention services including on-site programming in the areas of employability skills, transitional employment, academic remediation skills, case management support, and placement services which will lead to sustained employment

vi. To design and implement the services, training, and employment in accordance with the Department of Justices' Gender Responsive Strategies as summarized below and in full as Attachment A:

- Acknowledge That Gender Makes a Difference
- Create an Environment Based on Safety, Respect, & Dignity
- Develop Policies, Practices, and Programs That Are Relational and Promote Healthy Connections to Children, Family, Significant Others, and the Community
- Address Substance Abuse, Trauma, and Mental Health Issues Through Comprehensive, Integrated, and Culturally Relevant Services and Appropriate Supervision
- Provide Women With Opportunities To Improve Their Socioeconomic Conditions
- Establish a System of Community Supervision and Reentry With Comprehensive, Collaborative Services

4. Employment services performance measures shall include:

a. Enrollments: Number of enrollees to be determined.
b. Program Completions: 90% of enrollees.
c. Placements: 85% of program completers.
d. Sustained Employment[1]: 80% of placements.
e. Recidivism: 10% or less for those who become employed.

[1] "Sustained employment" means remain steadily employed for one year

5. The CONTRACTOR shall schedule groups and individual programs so they are optimally available to all parolees.

6. The CONTRACTOR shall explain during an orientation that attendance in the day reporting aftercare program is mandatory. The Parole/Probation Agent, prior to referral, may request a special condition from the Parole Board.. Any absence, shall be reported within two days to the referring agent. Parolees shall also be informed that they are expected to actively participate individually and in the group. Failure to do so will be reported to the referring agent.

7. The CONTRACTOR may, in consultation with the referring agent, expel a parolee for continual denial, minimization, lack of progress or disruptive behavior.

8. The CONTRACTOR shall develop with the STATE a female day reporting contract which shall include a waiver of confidentially for the STATE. No parolee shall be admitted into counseling who refuses to sign the treatment contract and waiver of confidentiality.

9. The CONTRACTOR shall issue to the agent a written report for each parolee outlining their progress in the aftercare program on a monthly basis. The report shall include, but is not limited to, report of attendance, evaluation of the quality of offender participation and overall progress in life skills, discharge/exit summary, and the offender's individual precursors to offending.

10. The CONTRACTOR shall assign each parolee a primary counselor upon admission to the program. The primary counselor is responsible for the provision of required services to each parolee on his/her caseload. In the event the primary counselor is unable to attend the regularly scheduled session, the CONTRACTOR shall ensure that a suitable alternate counselor is provided to conduct the session.

11. The CONTRACTOR shall at all times during this agreement maintain and comply with the appropriate STATE license(s) if applicable.

12. The CONTRACTOR shall provide a plan for transportation to and from the aftercare program for participants requiring transportation.

13. The CONTRACTOR shall provide a lunch meal.

14. The CONTRACTOR shall at all times provide services through counselors who have considerable experience as follows:

    a. Life skill assessments.
    b. No active police warrants.
    c. One year of prior experience in life skill counseling.

15. The CONTRACTOR shall seek and receive STATE approval for use of any counselor prior to using them for this project.

16. The CONTRACTOR shall only appoint employees to work on an agreement if they have cleared the LEIN and other security checks.

17. The CONTRACTOR shall obtain permission for LEIN checks of all prospective workers on an agreement. The permission slip is to include:

    a. Employees Full Name
    b. Social Security Number
    c. Date of Birth
    d. Michigan Drivers License Number or State ID Number
    e. Employees Signature

18. The CONTRACTOR shall only appoint employees to work on this agreement if they have cleared the LEIN and other security checks, and do not have pending criminal prosecution, not under the supervision of a criminal justice agency for a felony or misdemeanor, and do not have any prior felony or misdemeanor convictions without prior written approval from the STATE before performing any services under this Agreement. Ex-offenders will not be considered as staff until they have been discharged from all sentences, including parole and probation, for a minimum of five years.

19. The CONTRACTOR shall continue to administer services to the parolee during the period of parole until the following objectives have been met and consultation has taken place with the referring agent:
    a. Increasing the parolees' responsibility for their behavior and identify triggers to criminal behavior.
    b. Developing behavioral alternatives to criminality and substance abuse.
    c. Increasing constructive expression of all emotional, listening, and parenting skills.
    d. Development of personal support systems.
    e. Employability skills are at a level of attaining viable employment.
    f. Increasing her understanding of family unification, child care, and money management.

20. The CONTRACTOR shall testify at Parole Violation Hearings at the request of the referring agent (should the need arise) to provide the Parole Board with pertinent information relative to the parolee's participation in the CONTRACTOR'S assessment and treatment program.

21. The CONTRACTOR shall prepare and submit monthly vendor invoices for parolees in the aftercare program. The vendor invoice shall be submitted to the Michigan Department of Corrections Contract Compliance Inspector by the 10th day after the end of each monthly billing period. Each vendor invoice must be reviewed by the Contract compliance Inspector or designee to certify and authorize that the offenders listed on the vendor invoice are eligible female parolees. At a minimum, the vendor invoice shall include the following information:

    a. The name of the referring parole agent.
    b. The name of the parolee in the program.
    c. The parolee's prison number.
    d. The number of days the parolee has been attending the aftercare program by date.

22. Attached to the invoice must be a copy of the Department of Corrections' CFJ-140, Offender Referral Enrollment Term and sign-in sheets that verify the daily offender count that is being billed for.

Section 5 - COMPENSATION

1. The STATE agrees to pay to the CONTRACTOR the sum of $31.99 per parolee per day for the services provided pursuant to this agreement. The maximum amount payable, including travel expense reimbursement, to the CONTRACTOR under this agreement shall not exceed $207,950.00.

2. The CONTRACTOR shall be responsible for any travel expenses incurred in the execution of this agreement. Travel reimbursement shall be allowed solely in compliance with the State of Michigan's standardized travel regulations.

3. This agreement is subject to availability of funding from the Legislature.

4. Payment shall be contingent upon receipt of proper documentation from the CONTRACTOR.

Day Reporting Services Contract for Male Parolees: Transition of Prisoners, Inc.

Contract Extracts: Statement of Work and Compensation

Section 2 - STATEMENT OF WORK

The CONTRACTOR agrees to undertake, perform, and complete the following in accordance with the terms and conditions of this agreement:

4. The CONTRACTOR shall provide an assessment of male parolees who have been referred to the CONTRACTOR by the STATE.

    a. The assessment process shall include, but not be limited to, consultation with the referring agent, a review of relevant records: a comprehensive clinical interview, detailed analysis of the criminal behaviors and their precursors, social functioning, specific interests, current skills, level of education, substance abuse, mental and physical health status, and behaviors. The Initial Assessment (Intake) interview with the offender should last no more than one session.

    b. Assessment Reporting: The outcome of the assessment shall be forwarded in a legible report to the referring agent, within ten business days of the referral, and shall include, but not be limited to, summary information concerning the following issues:
        i. Classification of the offender's current status regarding the elements of analysis of assessment regarding criminal behaviors and their precursors, social functioning, specific interests, current skills, level of education, substance abuse, mental and physical health status, and behaviors.
        ii. Offender's amenability to life skills training.
        iii. Specific social adjustment recommendations.
        iv. Offender's degree of danger to the community and probability of committing similar offenses again.

5. The CONTRACTOR shall provide the following treatment for offenders referred by the STATE.

    a. The CONTRACTOR shall provide group/individual programs for male parolees referred by the STATE. Groups/individuals shall meet eight hours daily, Monday-Friday in the least restrictive environment necessary to conduct the day reporting aftercare program.

    b. Group Purpose/Objectives: The CONTRACTOR'S aftercare program will assist in the following:
        i. Provide an interpersonal group therapy and classroom training in which offender and offense dynamics are examined.

        ii. Offer participant specific behavioral strategies or interventions to prevent relapse or re-offending.

iii. To provide programming centered on cultural awareness, sensitivity, comprehensive treatment for drug abuse and trauma recovery, education and job training, family reunification, and addressing other societal and legal barriers to re-integration as they emerge.

iv. To draw on the resources and strengths in various communities and institutions, such as churches, universities, and other community based organizations to assist the women in reaching their goals, as well as serving as a means to educate the public on the importance of successful reintegration.

v. Provide the employment, training, placement, and retention services including on-site programming in the areas of employability skills, transitional employment, academic remediation skills, case management support, and placement services which will lead to sustained employment

23. Employment services performance measures shall include:

a. Enrollments: Number of enrollees to be determined.
b. Program Completions: 90% of enrollees .
c. Placements: 85% of program completers.
d. Sustained Employment[2]: 80% of placements.
e. Recidivism: 10% or less for those who become employed.

24. The CONTRACTOR shall schedule groups and individual programs so they are optimally available to all parolees.

25. The CONTRACTOR shall explain during an orientation that attendance in the day reporting aftercare program is mandatory. The Parole/Probation Agent, prior to referral, may request a special condition from the Parole Board.. Any absence, shall be reported within two days to the referring agent. Parolees shall also be informed that they are expected to actively participate individually and in the group. Failure to do so will be reported to the referring agent.

26. The CONTRACTOR may, in consultation with the referring agent, expel a parolee for continual denial, minimization, lack of progress or disruptive behavior.

27. The CONTRACTOR shall develop with the STATE a male day reporting contract which shall include a waiver of confidentially for the STATE. No parolee shall be admitted into counseling who refuses to sign the treatment contract and waiver of confidentiality.

28. The CONTRACTOR shall issue to the agent a written report for each parolee outlining their progress in the aftercare program on a monthly basis. The report shall include, but is not limited to, report of attendance, evaluation of the quality of offender participation and overall progress in life skills, discharge/exit summary, and the offender's individual precursors to offending.

[2] "Sustained employment" means remain steadily employed for one year

29. The CONTRACTOR shall assign each parolee a primary counselor upon admission to the program. The primary counselor is responsible for the provision of required services to each parolee on his caseload. In the event the primary counselor is unable to attend the regularly scheduled session, the CONTRACTOR shall ensure that a suitable alternate counselor is provided to conduct the session.

30. The CONTRACTOR shall at all times during this agreement maintain and comply with the appropriate STATE license(s) if applicable.

31. The CONTRACTOR shall provide a plan for transportation to and from the aftercare program for participants requiring transportation.

32. The CONTRACTOR shall provide a lunch meal.

33. The CONTRACTOR shall at all times provide services through counselors who have considerable experience as follows:

    a. Life skill assessments.
    b. No active police warrants.
    c. One year of prior experience in life skill counseling.

34. The CONTRACTOR shall seek and receive STATE approval for use of any counselor prior to using them for this project.

35. The CONTRACTOR shall only appoint employees to work on an agreement if they have cleared the LEIN and other security checks.

36. The CONTRACTOR shall obtain permission for LEIN checks of all prospective workers on an agreement. The permission slip is to include:

    a. Employees Full Name
    b. Social Security Number
    c. Date of Birth
    d. Michigan Drivers License Number or State ID Number
    e. Employees Signature

37. The CONTRACTOR shall only appoint employees to work on this agreement if they have cleared the LEIN and other security checks, and do not have pending criminal prosecution, not under the supervision of a criminal justice agency for a felony or misdemeanor, and do not have any prior felony or misdemeanor convictions without prior written approval from the STATE before performing any services under this Agreement. Ex-offenders will not be considered as staff until they have been discharged from all sentences, including parole and probation, for a minimum of five years.

38. The CONTRACTOR shall continue to administer services to the parolee during the period of parole until the following objectives have been met and consultation has taken place with the referring agent:
    a. Increasing the parolees' responsibility for their behavior and identify triggers to criminal behavior.
    b. Developing behavioral alternatives to criminality and substance abuse.
    c. Increasing constructive expression of all emotional, listening, and parenting skills.
    d. Development of personal support systems.
    e. Employability skills are at a level of attaining viable employment.
    f. Increasing his/her understanding of family unification, child care, and money management.

39. The CONTRACTOR shall testify at Parole Violation Hearings at the request of the referring agent (should the need arise) to provide the Parole Board with pertinent information relative to the parolee's participation in the CONTRACTOR'S assessment and treatment program.

40. The CONTRACTOR shall prepare and submit monthly vendor invoices for parolees in the aftercare program. The vendor invoice shall be submitted to the Michigan Department of Corrections Contract Compliance Inspector by the 10th day after the end of each monthly billing period. Each vendor invoice must be reviewed by the Contract Compliance Inspector or designee to certify and authorize that the offenders listed on the vendor invoice are eligible male parolees. At a minimum, the vendor invoice shall include the following information:
    a. The name of the referring parole agent.
    b. The name of the parolee in the program.
    c. The parolee's prison number.
    d. The number of days the parolee has been attending the aftercare program by date.

41. Attached to the invoice must be a copy of the Department of Corrections' CFJ-140, Offender Referral Enrollment Term and sign-in sheets that verify the daily offender count that is being billed for.

Section 5 - COMPENSATION

1. The STATE agrees to pay to the CONTRACTOR the sum of $24.84 per parolee per day for the services provided pursuant to this agreement. The maximum amount payable, including travel expense reimbursement, to the CONTRACTOR under this agreement shall not exceed $226,000.00.

2. The CONTRACTOR shall be responsible for any travel expenses incurred in the execution of this agreement. Travel reimbursement shall be allowed solely in compliance with the State of Michigan's standardized travel regulations.

3. This agreement is subject to availability of funding from the Legislature.

4. Payment shall be contingent upon receipt of proper documentation from the CONTRACTOR.

Evidence Based Practices Summary

The Michigan Department of Corrections is committed to the implementation of programs that have clear and substantial support from credible research. Such an evidence-based approach is a keystone of the Michigan Prisoner Reentry Initiative (MPRI). The principles behind Evidence Based Practices and keys to implementing such an approach are discussed in an attachment to this summary (Exhibit 1). In short, the principles call for targeting programs where they will have maximum impact, ensuring that programs are consistently and appropriately delivered, monitoring service delivery and outcomes and utilizing feedback for continuous improvement.

The idea that correctional practices can and should be based on high quality research is not new. The nineteen-sixties, seventies, and eighties were busy times in corrections and criminal justice research. In fact, the Office of Research and Planning in the Michigan Department of Corrections was originally formed to conduct and collect such research. Under the pressure of time and budget constraints, this purpose became secondary to research that informed the Department's more pressing need to conserve beds quickly. Fortunately, the larger corrections and criminal justice communities have caught up to us. There is a re-awakening of the idea that pro-active research into the causes of crime reduces the incidence of crime and the need for prison beds in the long term. 'Evidence Based Practice' and 'Best Practices' have become watchwords for contemporary corrections.

Given the early stages of MPRI implementation, there has not been an opportunity to compile research findings that specifically relate to the Michigan experience. Specifically, it is not yet possible to reliably determine the long term impact that programs delivered under the integrated MPRI approach will have on reducing offender recidivism and improving their integration into society as productive law abiding citizens. Plans and preparations to conduct the necessary research are already under way as part of MPRI implementation, and will be publicized as they become available. Until that time, MDOC has engaged in an exhaustive search of available research to assist us in identifying programs whose performance justifies their designation as correctional best practices.

Today, there is both more and better research about what works, and research on how to best implement the results of that research, than existed 20 to 40 years ago. Twenty years ago, government optimistically believed that if only research were done and made available, organizational change would automatically follow. Unfortunately, there was a lack of understanding about how to implement research at an organizational level, and some of the research was not ready for implementation. This has changed. We now have more research, better research, and we understand the process of implementing change much better. We don't deceive ourselves into thinking we have all the answers; but we have much better answers than 20 years ago.

The most recent, rigorous study summarizing research findings across multiple jurisdictions and programs was recently published by the Washington State Institute for Public Policy (WSIPP), a nationally recognized agency that specializes in the assessment of program impact and cost effectiveness. A summary of the findings from the WSIPP study is attached (Exhibit 2). Based on their review of hundreds of quality research studies, they concluded that there are numerous programs for which credible evidence of recidivism reduction exists. Among the programs with the greatest estimated effects are Drug Treatment, Cognitive-Behavioral programs, treatment oriented intensive supervision and vocational education.

It is important to note that several programs, although showing promising results, are in need of further research before definitive conclusions about their impact may be reached. These include Faith Based programs, work release programs and Therapeutic Communities (although the limited finding on Therapeutic Communities indicates a very strong effect). Finally, as the authors of the WSIPP report note: "...a program that has no statistically significant effect on recidivism rates can be cost-beneficial if the cost of the program is less than the cost of the alternative." The Boot Camp and Electronic Monitoring programs may be very good examples of that principle.

In addition to the summary documents regarding Evidence Based Practices (Exhibit 1) and the WSIPP study (Exhibit 2), extensive reference lists are provided in this Addendum for those who need information about what works (Appendix A) and information about how to implement the organizational changes needed to implement the results of that research (Appendix B).

Basing our practices on well researched practices can help us save money and be more effective in spending the money that must still be spent. It gives a rational foundation to organizational choices and treatment recommendations. Research into effective treatment shows that, for some problems, cognitive-behavioral therapy works better than traditional insight-oriented therapy. Research into the effects of basic education shows that Adult Basic Education is not only the foundation needed to enable further achievements, but also significantly reduces recidivism rates. Vocational and Prison Industry programs not only make prisons safer to manage by reducing idleness and enhancing operational efficiency; they also reduce recidivism. Knowing that treatment-oriented intensive supervision works to reduce recidivism, but intensive supervision that only focuses on surveillance does not, means we are wasting money if we don't spend the money to include treatment in intensive supervision programs. The same can be said of drug treatment. Locking up substance abusers without treating the substance abuse problem is a waste of money.

Research into implementation of evidence based practices shows that departments of corrections cannot do the job alone. All departments of state and local government and other stakeholder partners must work together to implement the results of research that suggests how to effectively reduce the incidence of criminal behavior in a cost effective manner. Departments of corrections need the support of the larger community in the form of collaboration, information about the needs of citizens, and information about how well efforts are working. This is precisely the type of collaborative approach being promoted via MPRI.

Exhibit 1
EIGHT PRINCIPLES OF EVIDENCE BASED PRACTICES[i]

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 two[ii]. These 7 Guidelines provide insight into implementation.

Limit new projects to mission-related initiatives[iii]

- 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.

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[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.

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Exhibit 2

Adult Corrections: What Works?

Estimated Percentage Change in Recidivism Rates (and the number of studies on which the estimate is based)

Example of how to read the table: an analysis of 56 adult drug court evaluations indicates that drug courts achieve, on average, a statistically significant 10.7 percent reduction in the recidivism rates of program participants compared with a treatment-as-usual group.

Programs for Drug-Involved Offenders		
Adult drug courts	**-10.70%**	(56)
In-prison "therapeutic communities" with community aftercare	**-6.90%**	(6)
In-prison "therapeutic communities" without community aftercare	**-5.30%**	(7)
Cognitive-behavioral drug treatment in prison	**-6.80%**	(8)
Drug treatment in the community	**-12.40%**	(5)
Drug treatment in jail	**-6.00%**	(9)
Programs for Offenders With Co-Occurring Disorders		
Jail Diversion (pre- and post-booking programs)	**0.00%**	(11)
Programs for the General Offender Population		
General and specific cognitive-behavioral treatment programs	**-8.20%**	(25)
Programs for Domestic Violence Offenders		
Education/cognitive-behavioral treatment	**0.00%**	(9)
Programs for Sex Offenders		
Psychotherapy for sex offenders	**0.00%**	(3)
Cognitive-behavioral treatment in prison	**-14.90%**	(5)
Cognitive-behavioral treatment in the community	**-31.20%**	(6)
Behavioral therapy for sex offenders	**0.00%**	(2)
Intermediate Sanctions		
Intensive supervision: surveillance-oriented programs	**0.00%**	(24)
Intensive supervision: treatment-oriented programs	**-21.90%**	(10)
Adult boot camps	**0.00%**	(22)
Electronic monitoring	**0.00%**	(12)
Restorative justice programs for lower-risk adult offenders	**0.00%**	(6)
Work and Educational Programs for the General Offender Population		
Correctional industries programs in prison	**-7.80%**	(4)
Basic adult education programs in prison	**-5.10%**	(7)
Employment training and job assistance in the community	**-4.80%**	(16)
Vocational education in prison	**-12.60%**	(3)

Program Areas in Need of Additional Research & Development

(The following types of programs require additional research before it can be concluded that they do or do not reduce adult recidivism rates)

Case management in the community for drug offenders	**0.0%**	(12)
Therapeutic community" programs for mentally ill offenders	**-27.4%**	(2)
Faith-based programs	**0.0%**	(5)
Domestic violence courts	**0.0%**	(2)
Intensive supervision of sex offenders in the community	**0.0%**	(4)
Mixed treatment of sex offenders in the community	**0.0%**	(2)
Medical treatment of sex offenders	**0.0%**	(1)
COSA (Faith-based supervision of sex offenders)	**-31.6%**	(1)
Regular parole supervision vs. no parole supervision	**0.0%**	(1)
Day fines (compared to standard probation)	**0.0%**	(1)
Work release programs	**-5.6%**	(4)

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Appendix A
What Works and What Doesn't: References

(Grouped by Program Type)

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This article was supported under cooperative award #03C05GIW2 from the National Institute of Corrections, Community Corrections Division, U.S. Department of Justice.
Points of view in this document are those of the authors and do not necessarily represent the official position of the U.S. Department of Justice.

SAFER NEIGHBORHOODS
BETTER CITIZENS
The Michigan Prisoner ReEntry Initiative

REDUCING CRIME IN MICHIGAN

The Vision of the Michigan Prisoner ReEntry Initiative is that every prisoner released to the community will have the tools needed to succeed

Michigan Prisoner ReEntry Initiative
The Mission: Reducing Crime

The MISSION of the MPRI is to reduce crime by:

- **Implementing a seamless plan of services and supervision**
- **Developed with each offender**
- **Delivered through state/local collaboration**

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

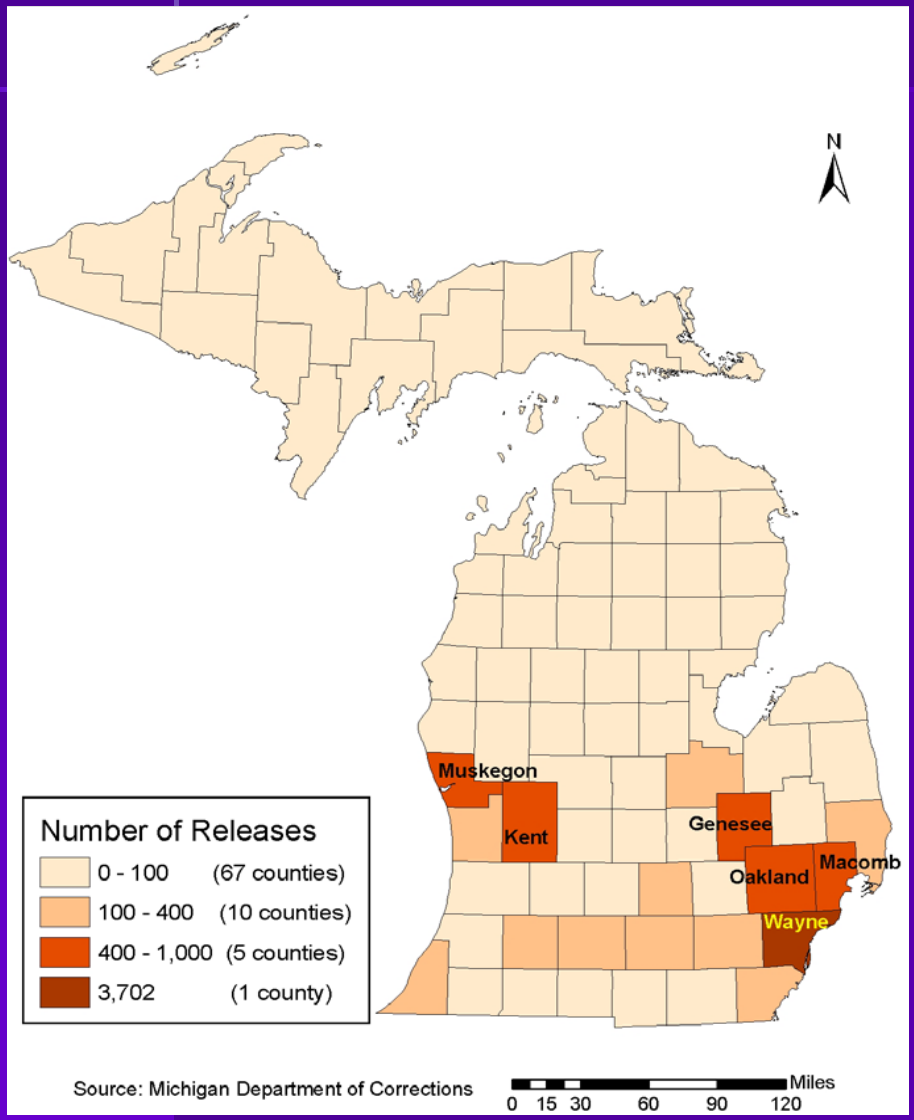
Michigan Prisoner ReEntry Initiative
IMPACT

- ✓ Reduced Crime
- ✓ Fewer Victims
- ✓ Safer Neighborhoods; Better Citizens
- ✓ Fewer returns to prison
- ✓ Reduced Costs

PRISONER REENTRY IN MICHIGAN

Geographic Distribution of Released Prisoners

Number of Prisoners Released to Parole by County: 2003

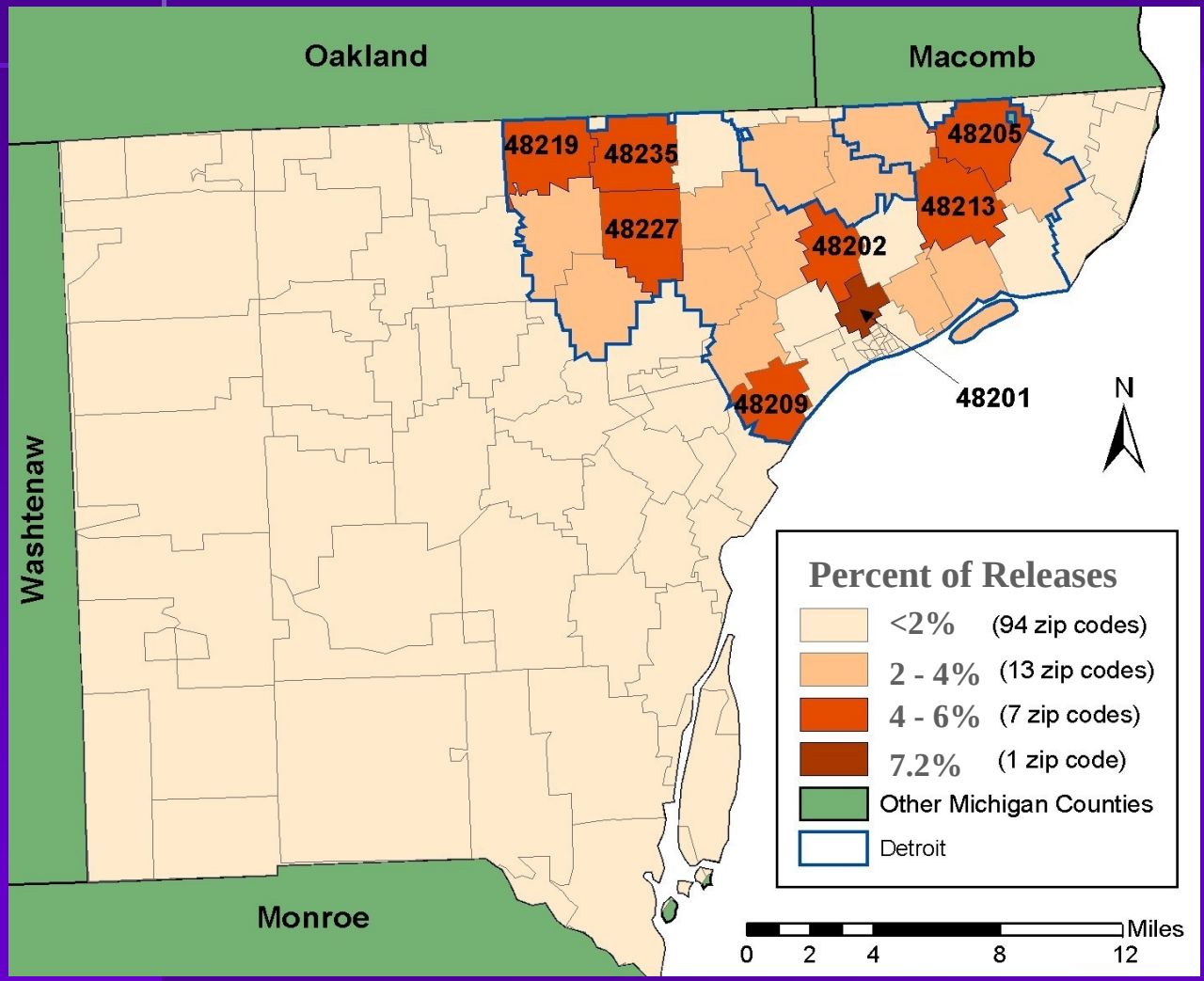


- Total releases in 2003*: 13,045
- Total releases to parole in Michigan = 10,771 (shown on map)
- 63% returned to the six counties labeled on the map
- 34% (3,702) returned to Wayne County
- 4 to 8% returned to Oakland, Kent, Genesee, Macomb and Muskegon Counties

* Total releases include paroles and discharges on the maximum sentence.

Geographic Distribution of Released Prisoners

Percent of Prisoners Released to Parole in Wayne County by Zip Code: 2003



- 3,702 (34%) of the prisoners released to parole returned to Wayne County
- 80% of the prisoners released to parole in Wayne County returned to Detroit
- 41% returned to the eight zip codes labeled on the map
- Those 8 zip codes accounted for 17.5% of Wayne County's population

Costs to Taxpayers

- 48% OF MICHIGAN PAROLEES RETURN TO PRISON WITHIN TWO YEARS
- PAROLE FAILURES COST THE STATE $117 MILLION PER YEAR
- MICHIGAN'S PAROLE FAILURE RATE IS HIGHER THAN COMPARABLE STATES – ALTHOUGH LOWER THAN THE NATIONAL AVERAGE

Statistics for 10 Largest Parole Population States in 2003 (vs. Nationwide)

State	2003 Year-End Parole Population	2003 Parole Population Per 100,000 Residents	Percent Successful Among 1999 Parole Discharges	Percent Parole Violators Among 1999 Prison Admissions*
California	110,338	**424**	**21.3**	67.2
Texas	102,271	**639**	**54.9**	21.0
Pennsylvania	102,244	1,084	*Not reported*	36.1
New York	55,853	**386**	**54.9**	31.5
Illinois	35,008	**374**	**62.9**	27.3
Louisiana	25,065	766	46.9	53.1
Georgia	22,135	**344**	**63.4**	20.5
MICHIGAN	**20,233**	**271**	**51.9**	**36.8**
Oregon	19,769	733	50.6	25.1
Ohio	18,427	**216**	**43.6**	17.6
NATIONWIDE	774,588	**317**	**41.9**	**34.8**

* Prison admissions include parole violator technical returns.

Source: DOJ Bureau of Justice Statistics

Comparative Parole Outcomes

Michigan vs. Nationwide & Other Large Parole Systems

- Michigan's number of parolees per 100,000 adult residents is lower than the national state average, and is 2nd lowest among the 10 largest state parole systems.
- While Michigan's percentage of successful parole discharges is currently 10% above the national average, it is lower than comparable states such as New York, Illinois and Georgia.
- Since better parole plans result from the MPRI, the parole approval rate will increase modestly and the parolee success rate will increase as the MPRI is implemented and expanded statewide. The goal is to increase the parole approval rate by 2% each year and the success rate of MPRI participants by 6% by the end of FY 2006 and eventually by as much as 10% statewide when the MPRI Model is fully implemented.
- An indicator of the potential improvement is Ohio's experience where the percentage of successful parole discharges has improved 10% in two years, from 44% in 1999 to 54% in 2001.

The Investment: Cost Avoidance after Statewide Implementation

If the parole approval rate increases 2% each year and parolee success rate increases by 6% statewide as a result of the MPRI, after full implementation in FY 2008, cost avoidance could exceed:

- $42.7 million at end of 1st year of full implementation
- $64.3 million at end of 2nd year
- $75.9 million at end of 3rd year

These figures do not include:

- Savings from reduced costs of crime in communities
- Savings from reduced jail time for former prisoners
- Processing costs for courts and MDOC
- Human service delivery system emergency costs
- The “human costs” of the impact of crime on families

Goals of the MPRI

To promote public safety by reducing the threat of harm to persons and property by released offenders in communities to which they return

To increase the success rate of offenders who transition from prison by fostering

- **Effective risk management and treatment programming**
- **Accountability for both offender and system official**
- **Community and victim participation**

MPRI Strategies

- Collaboration and Partnerships
- Interagency Information Sharing
- Performance-Based Management
- System reforms based on “What Works” literature, also known as Evidence-Based Practice

The Process

- Improved prisoner transition planning must include key stakeholders represented by the MPRI State Policy Team:
  - Health, Mental Health, Substance Abuse Treatment
  - Family and Child Welfare
  - Housing
  - Workforce Development
  - Adult Education

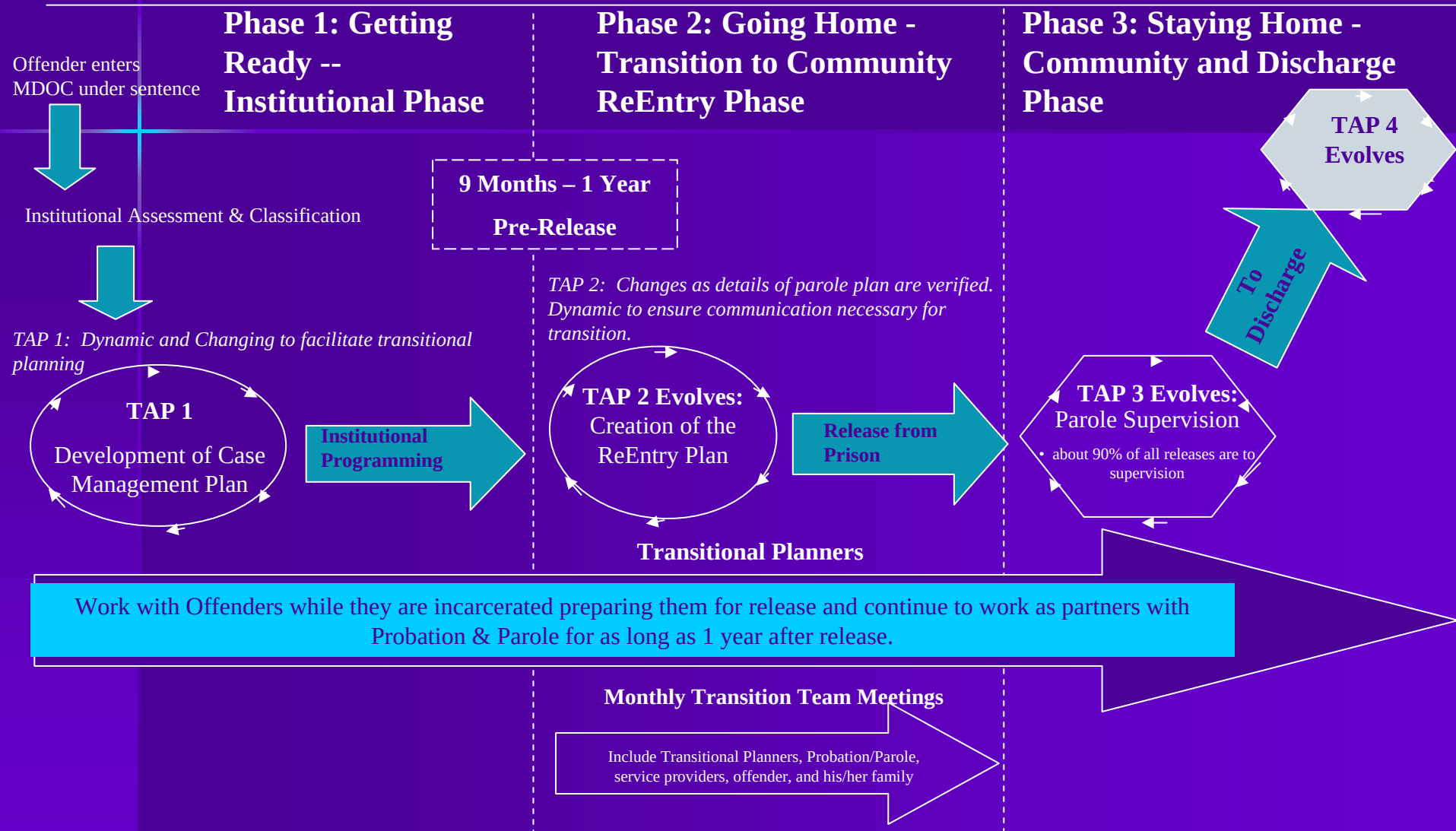
The Process

- The Departments of Corrections, Community Health, Labor and Economic Growth, Human Services, and Education - along with local law enforcement and victim's advocates - are all stakeholders in the MPRI and in the local prisoner transition process

- Partners identify and examine:
  - Common clients across agencies
  - The practice and procedures that govern the transition of these clients back to the community
  - Using improved practices at each of the seven decision points in the Three Phase MPRI Model

Transition Accountability Plan (TAP)

Process Flowchart



Performance Measures

Goal	Strategy	Success Measures	Monitoring Measures
Reduce crime by improving prisoner re-entry into Michigan's communities	Implement Intensive ReEntry Prison Units Implement Prisoner ReEntry Pilot Sites Implement Mentally Ill Inmate ReEntry Program	Parolees Commit Fewer Crimes Fewer Technical Violators Return to Prison Time Before Return to Prison is Increased Prison Bed Run Out Date is Postponed	•Technical Violation Return Rate •PV New Sentence Rate •Length of time, return to prison •Impact on run-out-of-beds date

Performance Measures: Status

Goal	Strategy	Success Measures	Status February 28, 2006
Reduce crime by improving prisoner re-entry into Michigan's communities	Implement Intensive ReEntry Prison Units Implement Prisoner ReEntry Pilot Sites Implement Mentally Ill Inmate ReEntry Program	•Parolees Commit Fewer Crimes •Fewer Technical Violators Return to Prison •Time Before Return to Prison is Increased •Prison Bed Run Out Date is Postponed	**1st IRU Cohort (2005 cases)** **687 IRU releases:** • **6% returned to prison so far (43)** • **<14% violation hearings pending (92)** • **10% improvement in returns** • **Fewer crimes, Fewer violations** • **On pace to save nearly 300 prison beds** **2nd IRU Cohort (2006 cases to date)** **719 cases so far – 274 released to date:** • **0% returned to prison so far (0)** • **6% violation hearings pending (16)** **1st Pilot Site First Cohort*** **154 MPRI Prison Facility Cases:** • **121 paroled through February** • **100% positive status** **1st Mentally Ill Inmate Cohort** **66 to parole – 1 currently released** • **100% positive status** • **7 to discharge on max** * This number of parolees increases every 4 to 6 months and each "wave" of prisoners becomes another cohort that will benefit from services closer to the full MPRI Model

MPRI Statewide Implementation Plan

PROMISES MADE, PROMISES DELIVERED

- ✓ Began Phase I "Getting Ready" in FY2005
- ✓ Began Phase II "Going Home" at select prison sites in FY2005
- ✓ 1st 8 Pilot Sites Established in FY2005
- ✓ 1st Round Comprehensive Plans Funded in FY2006
- ✓ 2nd Round 6 Pilot Sites Established in FY2006

IMPLEMENTATION PLAN NEXT STEPS

- 2nd Round Comprehensive Plans Funded in FY2007
- All Urban Counties (80% of all parolees) Implemented by the End of FY2006
- Remaining Rural Counties Established in FY2007, Funded in FY2008

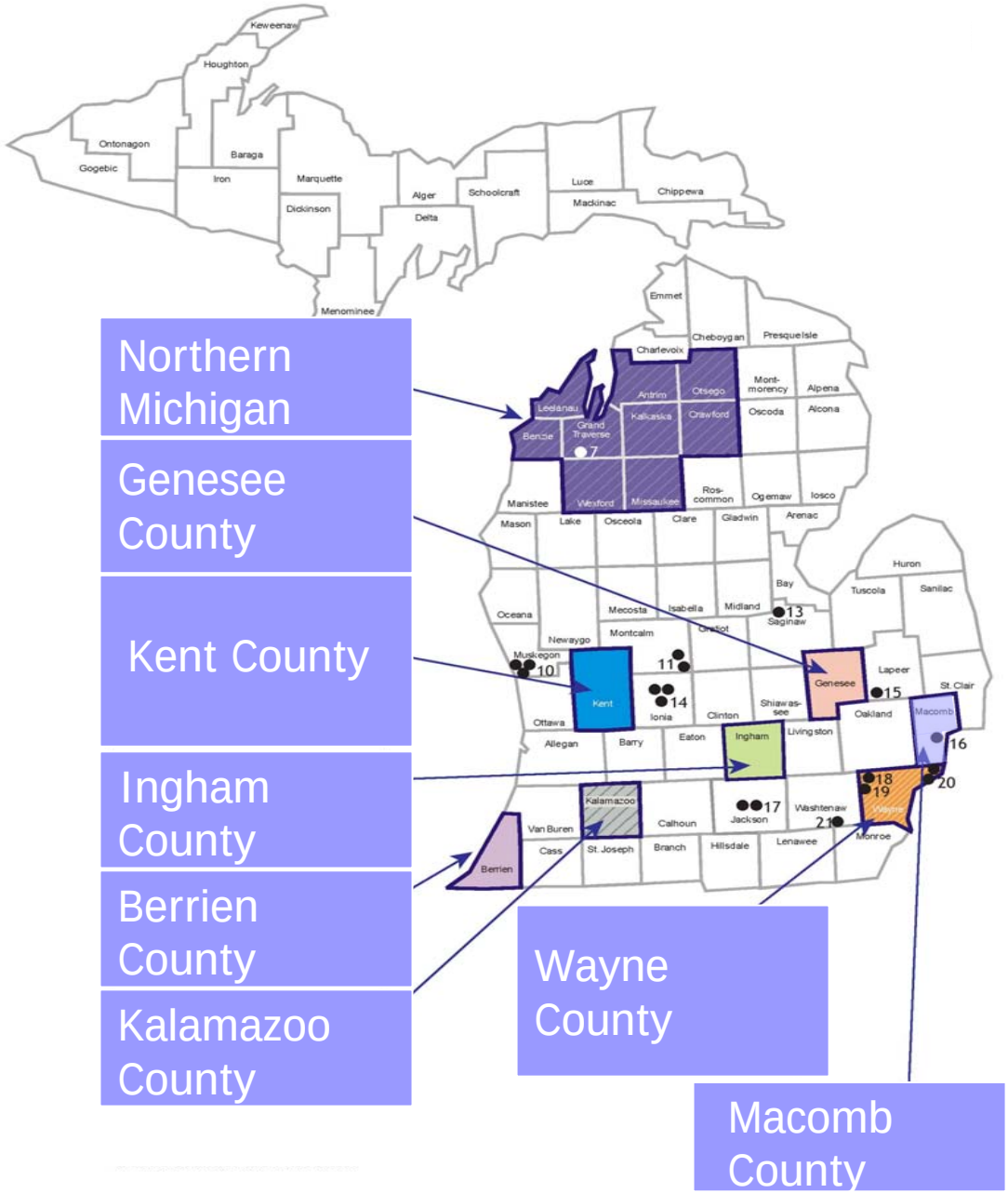
MPRI Intensive ReEntry Prison Units

Beginning in late FY2005, select inmates were moved to prisons closer to their homes as part of the MPRI Model. In the meantime:

- Male & Female Intensive ReEntry Prison Units (IRU) were implemented in Cooper Street and Huron Valley Complex - Women facilities
- 480 Male Beds, 52 Female Beds
- Being used to “test” the MPRI Phase II Model – Programming, Staffing, and Interaction with Pilot Sites

1st Round Pilot Sites FY 2006

- Macomb County
- Wayne County
- Kalamazoo County
- Kent County
- Ingham County
- Genesee County
- Berrien County
- Northern Michigan



FY2006 Funding

- **1st Round Pilot Sites: $5 Million for 8 Sites ($625,000 each), up to 1,800 felons targeted & 1,000 served in FY 2006**

  Comprehensive Prisoner ReEntry Plans Use Assets, Reduce Barriers & Fund Service Gaps in Eleven Service Areas including:

  - Employment, Housing, Alcohol & Substance Abuse
  - Implementing Phase II and Phase III of MPRI Model

- **Mentally Ill Inmate Demonstration Project: Statewide target population, $3 Million; up to 300 participants in FY 2006**

  Test Protocols; Test Models; Test Service Delivery Approach

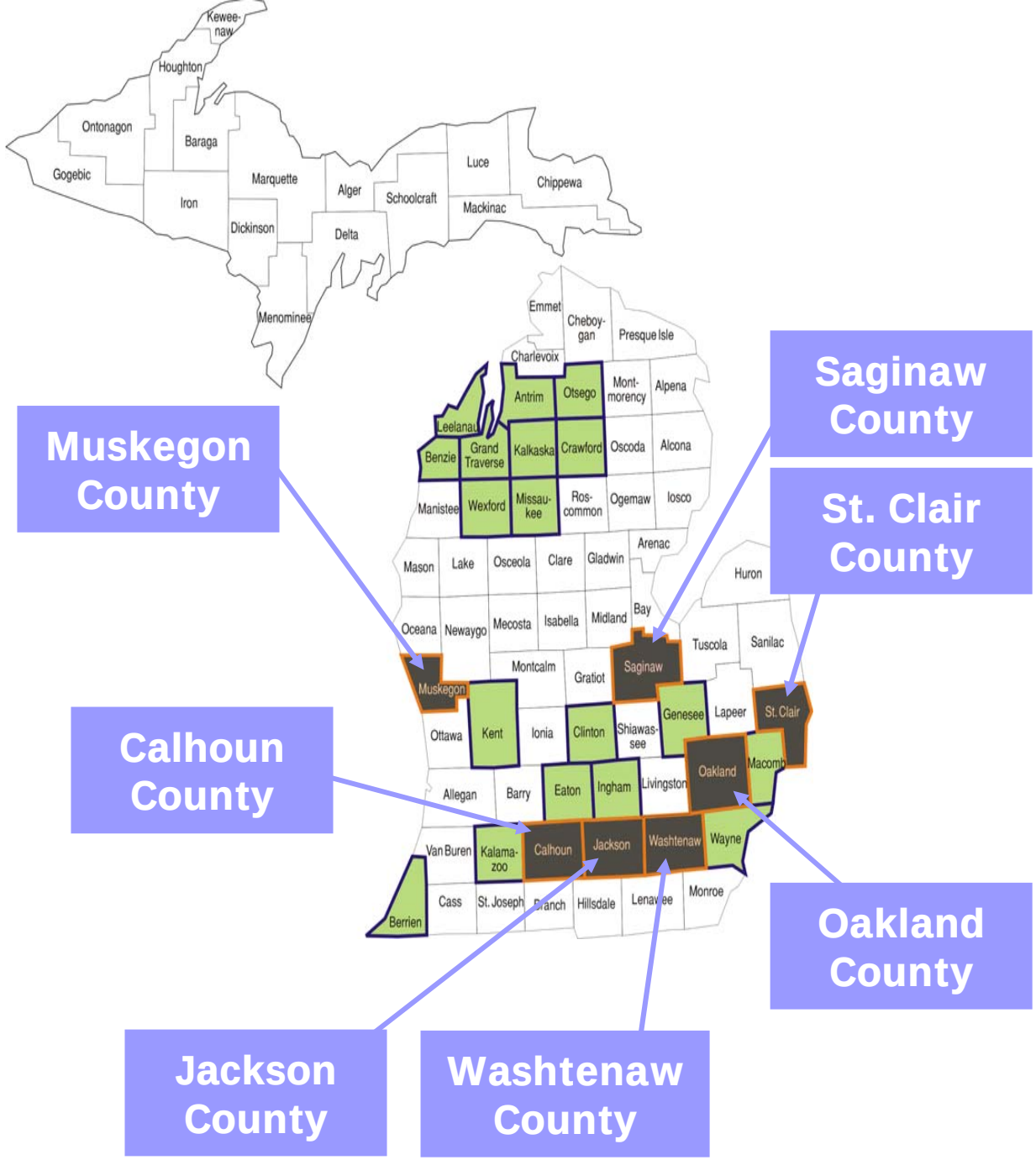
  - Implementing Phase II and Phase III of MPRI Model
  - Work with mentally ill parolees as funding allows

- **MPRI Service Contracts: $3 Million, at least 227 project participants:** Continuation of Service Contracts in Wayne County and other MPRI related services for Training, Public Education, etc.

2nd Round Pilot Sites

FY 2007

- Oakland
- St. Clair
- Saginaw
- Washtenaw
- Jackson
- Calhoun
- Muskegon



STAYING OUT IS A LOT HARDER THAN GETTING OUT

Michigan Prisoner ReEntry Initiative

Web Site:

www.michigan.gov/corrections

Select MPRI