



JUSTICE REINVESTMENT INITIATIVE

MAXIMIZING STATE REFORMS REPORT



The Center
for Effective Public Policy
Helping Justice Systems Discover Solutions

Six Participating States' Efforts in FYs 2016 and 2017: Idaho, Nebraska, Ohio, Oklahoma, Oregon, and South Dakota

The Maximizing State Reforms Grant Program bolsters states' investment in and commitment to data-driven and evidence-based decisionmaking.

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OVERVIEW OF THE JUSTICE REINVESTMENT INITIATIVE

MAXIMIZING STATE REFORMS REPORT

The Justice Reinvestment Initiative (JRI) is a data-driven process to improve public safety by helping jurisdictions make more effective and efficient use of criminal justice resources to address the complex factors that drive crime and recidivism. JRI seeks to reinvest cost savings into strategies that enhance public safety, decrease crime, and reduce recidivism.

As a part of the broader JRI portfolio, in FYs 2016 and 2017, the U.S. Department of Justice, Office of Justice Programs (OJP), Bureau of Justice Assistance (BJA) competitively selected grantees under a solicitation designed to “strengthen states’ JRI reform efforts by bolstering their investment and commitment to data-driven and evidence-based decisionmaking.” This grant program focused on the implementation of specific initiatives unlike other state JRI efforts which are focused on broad system reform, often through legislation.

Results in several states have been significant and resulted in numerous changes in sentencing and criminal justice policies, making it possible to reinvest in other criminal justice and human service strategies, programs, and services, with a renewed focus on public safety initiatives.

Specifically, the grant program required the following for implementing new policies and practices:

1. Collaboration between and within key organizations that are attempting to adopt specific changes brought about by JRI.
2. Increased evidence-based decisionmaking.
3. Expanded use of evidence-based programs—particularly programs that reflect local or specific initiatives.
4. The sharing of critical data and information to guide practices.
5. An examination of the methods or approaches utilized to bring about changes in an organization’s policies or practices.

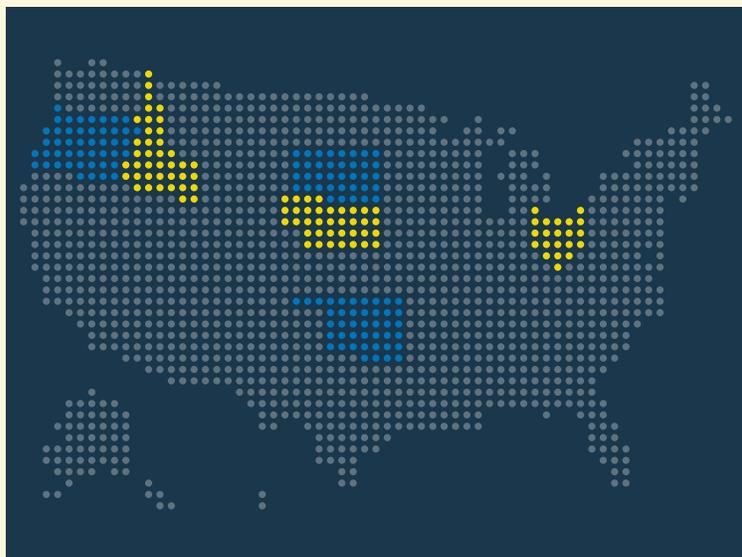


To assist the states selected under this grant program to achieve their JRI objectives in a timely fashion and to build their capacity to be successful, the Center for Effective Public Policy was selected by BJA to provide:

1. A broad range of expertise, technical assistance, and training tailored to each state's needs, delivered both on site and off.
2. Regular onsite and offsite facilitation and site coordination to ensure a high level of teamwork, enhanced collaboration, timely delivery of programs and products, and development of sustainable plans.
3. Guidance in identifying, analyzing, and presenting performance and outcome measures to ensure continued progress toward reinvestment goals.
4. Guidance in building the capacity to implement and sustain successful evidence-based approaches and programs over time.

This report highlights the goals, activities, outcomes, and lessons learned to date from six states: Idaho, Nebraska, Ohio, Oklahoma, Oregon, and South Dakota.¹ Each state received up to \$1.75 million in Maximizing State Reforms funding to advance its particular JRI goals. Since each state's project was designed to address specific gaps or challenges in its JRI implementation plans, the resulting projects are notably different, as summarized below:

Idaho implemented a pilot prison reentry program to provide needed housing, employment, treatment, and mentoring services for individuals returning to District 4 (Boise area), which has the greatest concentration of individuals with moderate to high risk needs. Case managers and probation and parole agents worked collaboratively to "bridge the gap" between incarceration and community supervision to reduce the high rate of recidivism in this population.



Nebraska implemented a pilot project in Douglas County (Omaha) to address the high recidivism rate of homeless, high risk individuals with mental health disorders who were returning to the community from state prison. By providing housing and community programs and services to this reentering population, Nebraska planned to establish a model for housing that can be replicated statewide.

Ohio's initiative focused on implementing an automated telephone reporting system for low risk individuals. Not only did this system follow the evidence-based principle that there should be minimal intervention with those at a low risk to reoffend, but it also reduced the amount of time supervision officers spent with this population, allowing them to focus more attention on higher risk individuals.

¹One additional state, West Virginia, received an FY 2017 Maximizing State Reforms grant, but the work was significantly delayed and did not begin in time to report on in this report.

Oklahoma used grant funds to expand two initiatives: (1) provide presentence screening services statewide, using risk/needs assessment tools, so that individuals held in county jails can be reviewed and recommended for appropriate diversion options more quickly, and (2) expand the capacity of mental health courts in Tulsa and Oklahoma City.

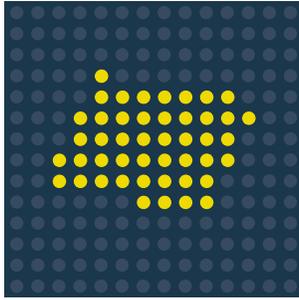
In Oregon, the initiative sought to shore up local criminal justice planning in areas of the state without dedicated staff resources. Six coordinators were hired to staff local public safety coordinating councils in three regions. These coordinators assisted with the planning and implementation of local evidence-based community programs and services that helped the state achieve its JRI goals.

In South Dakota, the number of women committed to the Department of Corrections continued to increase significantly despite the implementation of significant JRI reforms. The South Dakota Maximizing State Reforms Program sought to implement a pilot program in Pennington County (Rapid City) to provide intensive case management and community programs and services targeted at reducing women's further involvement in the justice system and, in so doing, to enhance public safety by reducing their likelihood of recommitment to prison.

The report that follows was compiled in September 2020 and includes detailed case studies for all six states funded by the FYs 2016 and 2017 Maximizing State Reforms Grant Program. Each case study provides context for how the program has supported each state's JRI objectives, the activities and projects that have been implemented, the accomplishments and outcomes achieved so far, and implementation lessons learned. The final section of the report provides a brief overall assessment of the Maximizing State Reforms Grant Program and of the accomplishments and lessons learned across the six states.

For more information about this effort, contact **Mr. Richard Stroker**, Senior Associate, Center for Effective Public Policy, at rstroker@cepp.com.





IDAHO

Idaho's State Justice Reinvestment Initiative

Between 2008 and 2014, Idaho's incarcerated population increased by 11 percent (from 7,338 to 8,120). In March 2014, Senate Bill (SB) 1357, the Idaho Justice Reinvestment Initiative, was enacted to address the increasing prison population as well as mounting correctional costs, and at the same time, ensure that public safety was maintained. The bill included provisions to enhance supervision practices and programs, and mandated the use of validated risk assessment information in parole release decisionmaking, development and implementation of structured responses to parole violations, and the routine tracking of numerous performance measures to gauge the overall impact of JRI over time.

While SB 1357 successfully addressed several factors that were driving prison population growth and costs, there were other issues left unaddressed. For example, releases from prison increased from 450 per month (prior to JRI) to 500 per month (post JRI). At the same time, parole violations increased from an average rate of 31 per 1,000 parolees per month prior to JRI implementation to an average of 45 per 1,000 parolees by year-end 2016. As a result, Idaho Department of Corrections (IDOC) case managers and probation/parole officers have been challenged to assist the increasing number of returning citizens to be successful in the community.

Idaho's Maximizing State Reforms Goal

Reduce the recidivism of 600 moderate to high risk individuals reentering District 4 (Boise area) through the provision of case management and services 60 days prior to and 60 days post release.

Idaho's Maximizing State Reforms funding was used to implement 60/60 Bridging the Gap, a pilot reentry program modeled after the Georgia Department of Community Corrections' Prisoner Reentry Initiative. The idea was to "bridge the gap" between incarceration and parole supervision to assist reentering citizens to be more successful in the community. Community case managers met with individuals within 60 days of release and continued to provide support for 60 days following release. Housing, employment, treatment, and mentoring support were provided. By having them work in tandem, the expectation was that these services would help bridge the gap between case managers working with incarcerated individuals in the facility and probation and parole officers in the community.

The primary goal of the program was to reduce recidivism in all moderate to high risk individuals entering the community in District 4 (Ada, Elmore, Boise, and Valley Counties). District 4 had the greatest concentration of community-supervised



individuals with moderate to high risk needs, including 43 percent of all parolees and 23 percent of all probationers.

First Steps

An IDOC work group was convened to plan for the implementation of the reentry program. A part of this planning included the development of a reentry case manager job description and hiring of six reentry specialists in the first several months of the effort.

Partnerships were also established with the Idaho Supreme Court, the Idaho Criminal Justice Commission, the Idaho Commission on Pardons and Parole, as well as community treatment providers and mentoring volunteers to ensure effective data and information sharing, and to increase understanding of the needs of individuals being released from incarceration.

Program Implementation

Incarcerated individuals were assigned to a reentry specialist based on their security level (medium to high risk with LSI-R scores of 24 or above). They met

with their assigned specialist 60 days prior to release to develop a reentry plan. The reentry specialists helped with housing, set up medical/mental health appointments, provided employment education, and referred individuals to potential employers and agencies that could help with employment; many individuals were able to set up job interviews prior to release. Last, the reentry specialists answered questions and offered additional assistance, as needed.

The reentry specialists worked hand in hand with community case managers on a daily basis answering questions and providing assistance. They met with individuals at least twice in person and at least once on the phone prior to release. Once the individuals were released, they met with them two more times. They may have met with some individuals more frequently (perhaps weekly), depending on their level of needs.

Early on, the IDOC workgroup decided to set up a separate office location in the community for this reentry work. Ultimately, it decided to establish a "one-stop" center at this same location that would provide assistance to individuals who were in the Bridging the Gap reentry program and to other individuals under supervision who needed assistance with a variety of needs such as food, housing, employment, and treatment referrals.

Upon release, individuals met with their reentry specialist at the one-stop reentry center. At the center, returning individuals were offered emergency food, hygiene items, clothing vouchers, and job search assistance. Other community partners were available to assist individuals with employment, education, vocational rehabilitation, food stamps, mentors, medical and mental health referrals, and HIV and hepatitis C testing. At least one community partner was located next door to the center and provided individuals leaving prison transportation to the center and to the probation and parole office to check in with their probation/parole officer.

Key Elements of the Bridging the Gap Program

- 6 reentry specialists, each with average caseloads of about 35 returning citizens.
- Case management, services, and programs provided to address individuals' reentry challenges and needs.
- A one-stop reentry center established to address the many reentry challenges in one location.
- Walk-ins were also encouraged to receive services.

Outcomes to Date and Lessons Learned

To date, both the reentry program and the one-stop center have been very successful in helping individuals under community supervision to solve their problems and be successful after release. Approximately 871 individuals have been assigned to reentry coordinators since the program started. Of these, there have been 387 successful program completions (those employed and doing well in the community after completing 60 days post release). The number of individuals who failed to complete the 60-day post-release portion of the program continues to be very low with 22 cases—less than 3 percent—who returned to prison or jail. Additional individuals also received assistance and services at the one-stop reentry center.

Overall, IDOC has an annual recidivism rate of 34 percent. During the first year of operation (December 2018– December 2019), the program recorded a 24 percent recidivism rate. More recently, IDOC calculated the recidivism rate of individuals receiving 60 days post-release assistance at 18.6 percent annually.

Unfortunately, the COVID-19 pandemic has shifted the landscape considerably. Prior to the pandemic, IDOC’s one-stop reentry center had contact with 200 to 250 individuals per month. An average of 500 to 700 pounds of emergency food, 30 to 35 hygiene bags, and 30 to 40 vouchers for clothing were provided per month. But from April to July 2020, the reentry center saw a decreased number of individuals per month (about 70 to 100), although it continued to provide an average of 700 pounds of emergency food and 30 hygiene bags to returning citizens per month.

IDOC employs a work releasee to staff the reentry center’s reception desk. This has been critical to the center’s success in assisting walk-in individuals, who feel more comfortable interacting with a peer, and in dealing with many administrative issues to support the specialists (for example, scheduling appointments).

Outcomes to Date

As of August 2020, 871 individuals have received assistance from a reentry coordinator:

- 387 (44%) have successfully completed the program.
- 22 (3%) were violated/revoked.
- 230 (26%) were either not released from prison or returned to a different district.
- 232 (27%) were still on an active caseload.

While District 4 Probation and Parole Office leadership has been fully supportive of the program, not all of the probation/parole officers (PPOs) are on board. Building trust and collaborative relationships with all of the District 4 PPOs is an area that will continue to receive attention.

The COVID-19 pandemic has forced many to consider alternate strategies for connecting with clients and partners who are no longer able to meet face to face. IDOC has begun to use technology to communicate with both clients and partners in lieu of in-person meetings and is facilitating video conferencing between partners and clients.

In addition, as IDOC has gained experience with the program and greater knowledge about individuals’ needs, two additional programs and services are being considered: (1) assisting returning citizens with basic financial budgeting, and (2) contracting directly with an employment coordinator who can focus entirely on assisting returning citizens with employment education and job searches.

Next Steps

In the short time the program has been operating, IDOC leadership has realized the benefits of providing specialized reentry services to returning

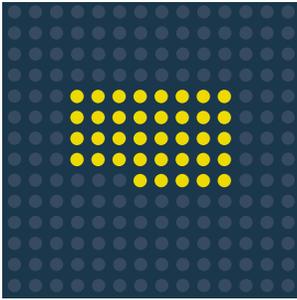


citizens. As a result, an additional reentry specialist position has been implemented in one other district. Ultimately, IDOC hopes to fund reentry specialists in all its seven districts.

In addition, IDOC has realized the value of the one-stop reentry center in providing multiple services and programs to returning citizens in one location. IDOC developed this into the Community Intervention Station (CIS) and plans to have CISs in various geographic areas around the state. Both the Board of Correction and the legislature have been receptive to the idea, and a contract to establish CISs was in the process of being awarded as of the date of this report.

Lessons Learned

- Use technology to enhance partner and client interactions.
- Work to build collaborative relationships with reentry coordinators, PPOs, and community partners from the beginning.
- Expand program offerings over time to address identified reentry challenges.



NEBRASKA

Nebraska's State Justice Reinvestment Initiative

Despite decreasing crime and arrests, Nebraska's prison population was at 159 percent of capacity in 2014, just prior to initiating a state JRI process. In 2015, justice reinvestment legislation (LB 605) was passed. Among several provisions, LB 605 required the use of probation rather than incarceration for most individuals convicted of nonviolent, low level offenses; post-release supervision for most individuals upon release from prison; and strengthened parole supervision. It was estimated that the legislation, once implemented, would help the state avoid \$306 million in prison construction and operations costs. To date, more than \$15 million has been reinvested in additional probation officers, community-based programs and treatment, improvements to parole supervision, quality assurance measures, and financial assistance to county jails to support the state's efforts to enhance public safety and reduce recidivism.

The state identified lack of housing as a significant barrier to individuals successfully reentering the community from both prisons and jails. Many individuals leaving these institutions do not have the funds to pay for housing or are ineligible for supportive and public housing because of the nature of their crimes. In addition, research conducted by the Nebraska Department of Correctional Services (NDCS) revealed significant rates of mental health and substance use disorders in the population

Nebraska's Maximizing State Reforms Goal

Create a model, evidence-based housing program (Project Integrate) in Douglas County for higher risk reentering individuals in need of housing and wraparound services that can be replicated throughout the state.

leaving prisons and jails. Without expanded availability of housing that also included access to substance use and mental health treatment, the state believed that its ability to meet the JRI goal of enhanced public safety and more effective use of correctional resources would be threatened. The Maximizing State Reforms grant of \$1.75 million allowed the state to address this critical gap.

First Steps

Project Integrate was a collaboration consisting of Probation, Parole, NDCS, and Douglas County (Omaha) Department of Corrections. Its primary purpose was to provide housing and wraparound services to high risk individuals with mental health and substance abuse issues returning to Douglas County.

As a first step, an oversight committee was formed to guide the planning and implementation of the pilot project in Douglas County. Douglas County



was selected as a pilot site because it was one of the primary contributors to the state prison system. In 2014, 39.7 percent of male inmates and 35.5 percent of female inmates were from Douglas County (Metro Omaha).²

Workgroups were also formed to address specific implementation issues. The Research and Evaluation workgroup was tasked with gathering data to better understand the characteristics of the target population and to identify key program performance measures. The Target Population workgroup was tasked with developing an assessment form and eligibility matrix to aid in identifying eligible individuals and matching them with appropriate housing and services. These tools helped determine which individuals (1) have been sentenced to a felony and assessed as high risk; (2) have had an identified substance use and/or mental health issue;

(3) have had one or more risk factors (in addition to substance use and mental health issues), including antisocial associates, antisocial attitudes/behaviors, and antisocial personality; and (4) are homeless, near homeless, or unable to obtain housing because of the nature of their offense. Last, the Providers and Services workgroup was tasked with identifying and soliciting the support of local housing and treatment providers.

Once the initial program planning was completed, training regarding eligibility criteria, the referral process, available housing, and project resources was conducted with providers and with supervision and corrections staff. In addition, Project Integrate procedures were documented and shared with all participating agencies.

Characteristics of Douglas County Ex-Offenders

- In 2015, 75% of individuals exiting the Douglas County Department of Corrections jail were reincarcerated.
- In Region 6 (which includes Douglas County), a University of Nebraska Medical Center study of individuals incarcerated in state prisons from 2005 to 2009 found that:
 - 72% of individuals were diagnosed with co-occurring disorders.
 - Individuals with a behavioral health history were twice as likely to have a jail admission.
 - Individuals with substance use disorders were seven times more likely to have a jail admission.

Program Implementation

Implementation of Project Integrate was significantly delayed due to an inaccurately assigned OJP Vendor Number which took over a year to correct. Project placements finally began in May 2018. The candidate assessment form developed by the Target Population workgroup was tested with a few cases and then fully implemented. All probation, parole, and reentry officers seeking transitional living resources for individuals who resided, or would be residing, in Douglas County were expected to utilize the form to determine eligibility, referral, and placement.

To ensure successful implementation, the Project Integrate planning team also established a partnership with the Omaha Metro Area Continuum of Care for the Homeless to build capacity in and commitment from several housing services providers. Once local providers were identified, the Providers and Services workgroup helped articulate

²See <https://www.unomaha.edu/college-of-public-affairs-and-community-service/nebraska-center-for-justice-research/documents/trends-in-adult-2015-rsz.pdf>.

the specific services that each organization would offer, clarified expectations, and communicated supervision and treatment conditions with which participants were expected to comply. Service contracts were then executed.

Ultimately, three levels of housing and programming were established to reflect various needs and risk factors:

- The **high tier program**—which is the most structured program—consists of halfway houses licensed by the Nebraska Department of Health and Human Services that also provide a full array of treatment services and have specific behavioral health programming.
- The **middle tier program** consists of supportive housing that provides some services such as life skills, Narcotics Anonymous/Alcoholics Anonymous services, and other treatment interventions.
- The **lower tier program** consists of supportive housing only. Programming is accessed primarily in the community, and the housing provides an additional layer of accountability.

Thus far, Probation, Parole, and NDCS have been able to refer individuals to the appropriate level of housing (based on individual risk and needs) and have not had to worry about housing capacity. And once grant funding ends, Probation and Parole have committed to allocating funding to provide housing based on individual risk and needs.

Twelve housing providers in the Omaha area were enlisted to participate in the effort initially. Combined, they provide two high tier sites, eight middle tier sites, and two low tier sites.

Outcomes to Date and Lessons Learned

As of August 2020, 313 individuals were accepted for placement into one of the approved provider

Outcomes to Date

As of August 2020, 313 individuals had been accepted for placement into one of the approved provider sites:

- 1% were placed in the high tier program.
- 83% were placed in the middle tier program.
- 16% were placed in the low tier program.

sites. Fifty percent of referrals/placements were supervised by Probation and 50 percent by Parole. The majority of placements (83%) were in the middle tier program, with about 1 percent of placements going to the higher tier program and 16 percent to the lower tier program. A number of individuals completed their housing/programming and were released from the project. As project completion numbers increase, the Project Integrate team will begin to assess its overall success.

As was mentioned earlier, the implementation of Project Integrate was significantly delayed. This turned out to be a blessing in disguise: The project oversight committee and workgroups used this time wisely to plan and prepare for all aspects of the project. As a result, they were able to implement a comprehensive program that required very few adjustments.

The Project Integrate team knew from the start that to be successful, a collaborative partnership with key providers and the Douglas County Department of Corrections, Probation, and Parole would be essential. This has been accomplished by actively involving all partners in all aspects of project planning and implementation. Cross training has also proved to be invaluable: All those who attended training left with a clear understanding of the goals of the project, the resources available, and the process for referral and placement.

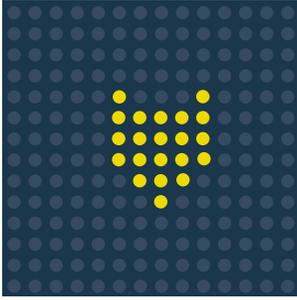


Lessons Learned

- Invest in planning to develop a more thoughtful and cohesive approach to the project.
- Identify and collaborate with key community partners and involve them in the planning process.
- Cross-train agency staff to ensure successful project implementation.

Next Steps

Once a sufficient number of participants have completed Project Integrate, a process evaluation will be conducted. At the conclusion of the evaluation, results will be presented to the Criminal Justice Leadership Group and other key stakeholders. At that time, opportunities to continue the project after the end of the grant period and, ultimately, to expand it statewide will be reviewed.



OHIO

Ohio's State Justice Reinvestment Initiative

When the FY 2016 Maximizing State Reforms Grant Program began, Ohio had more than 50,000 individuals in state prisons and more than 280,000 under community supervision. To date, Ohio has made great strides in furthering its JRI goals to enhance public safety and control correctional spending through the implementation of several initiatives, including the use of a statewide risk and needs assessment, risk reduction sentencing, the expanded use of probation as an alternative to prison, and the development and expansion of evidence-based programs and practices. Despite these significant improvements, there were still areas that remained unaddressed.

Ohio sought funding through the Maximizing State Reforms Grant Program to address over-supervision of low risk individuals, a lack of officer resources and time to focus on higher risk individuals, and a lack of shared resources across supervision and other agencies. Funding allowed the state to create an automated telephone reporting system (ATR) for low risk parolees and certain probation cases as well as an interface between various information systems that enabled consistent reporting and compliance monitoring across agencies. By freeing up time spent with lower risk cases through the use of ATR, officers could focus their time and resources on higher risk cases. In addition, by introducing ATR for use by low risk individuals, the Ohio Department

Ohio's Maximizing State Reforms Goal

Allow supervision agencies to divert staff resources from lower risk to higher risk individuals by implementing a telephone reporting system for low risk individuals, thereby freeing up officer time that can be devoted to higher risk cases.

of Rehabilitation and Correction (ODRC) hoped to prove the evidence-based principle that by not over-supervising low risk individuals, it could reduce recidivism. Focusing supervision resources on higher risk cases and engaging in additional evidence-based risk-reduction efforts with this population was consistent with ODRC's commitment to effectively use its limited resources.

First Steps

The overarching goal of this initiative was to amplify Ohio's current JRI reform efforts to deepen its investment in, and commitment to use, the Risk-Need-Responsivity (RNR) model and evidence-based practices and programs. It was anticipated that this effort would allow for a reduction in corrections costs by decreasing unnecessary confinement, reinvestment in evidence-based practices that would reduce recidivism, and increased collaboration and data sharing across state and local supervision agencies.



A governance board, including ODRC staff, chief probation officers, and representatives of the Adult Parole Authority (APA), was created to oversee this effort. The board met regularly to design the project, approve a vendor request for proposal and contract, and oversee the planning and implementation of the effort.

Program Implementation

The Maximizing State Reforms initiative involved the implementation of ATR for low risk individuals across multiple agencies, including municipal, (felony) probation, pretrial, and APA. Specific pilot sites were selected in the Cleveland and Akron APA regions followed by a statewide rollout. Enrollment in each pilot jurisdiction began in September 2018; about 35 percent of caseloads were targeted as low risk.

Using ATR, eligible low risk individuals called a toll-free telephone number each month to check in and report changes to their phone numbers, addresses, and employment data. Individuals also reported any law enforcement contact or other issues relevant to their supervision. During the call, individuals received directives regarding open conditions of supervision, and they were reminded of their next call due date as well as the date and time of their next in-person meeting. If an individual failed to call the system by their monthly due date, the web-based OffenderLink caseload management system, which is linked to ATR, made an automated outbound call to remind the individual to report. In addition, individuals received automated outbound calls a few days prior to their next in-person meeting to remind them to appear.

Officers listened to individual voice messages directly on their computer using OffenderLink. Through OffenderLink, they were also alerted to data changes (phone, address, employment) and

Key Benefits of Ohio's ATR

- **Improved accountability:** Real-time notification of compliance violations enables officers to hold individuals more accountable.
- **Improved compliance:** Ease of use for individuals combined with greater accountability results in compliance rates consistently above 95%.
- **Improved efficiencies:** Officers focus on action items and exceptions only; the ATR digitally captures address, phone, and employment changes; and it generates merge letters and corresponding case notes for multiple individuals with a single mouse click.
- **Elimination of paperwork:** Comprehensive, easily accessible electronic case files are built with little effort and greater accuracy. These files are accessible 24/7 and are shared effortlessly, improving overall supervision effectiveness.
- **Special condition tracking:** This allows for timely tracking of fines, restitution, community service, and other special conditions.
- **Automated messaging:** Offenders receive messages about outstanding obligations when they call in.

to individuals' compliance (or noncompliance) with their conditions of supervision. In this way, officers focused their attention on the small percentage of noncompliant low risk individuals rather than spending valuable time on those who were successfully satisfying their supervision conditions.

Outcomes to Date and Lessons Learned

As of July 2020, 4,500 individuals on community supervision with the Ohio APA were enrolled in ATR. Call-in compliance rates for these lower risk cases was very high at over 93 percent.

ATR, in conjunction with OffenderLink, has increased accountability for lower risk individuals while allowing the ODRC to reduce the resources formerly needed for these cases and redirect them to higher risk individuals. This has improved efficiency, increased officers' focus on higher risk individuals, and lowered the overall number of actively supervised cases.

Part of the reason for the success of ATR was the early establishment of an interdisciplinary team that clarified the goals and objectives of the project and helped drive the work forward over a substantial period of time. Also key to this effort was the drafting of a policy discussing eligibility for placement on telephone reporting, as well as staff and parolee responsibilities, and communication with judges and other key stakeholders about the types of cases that would be eligible for this type of supervision and the benefits of this new approach for the effective management of both low and higher risk individuals. The training and tools that staff have been offered to help them manage higher risk cases—particularly to address skill deficits related to individuals' criminogenic needs—have been crucial and have helped support the implementation of ATR.

Outcomes to Date

As of July 2020, 4,500 individuals on community supervision were enrolled in ATR. ODRC estimated that ATR saves 10–15 minutes per contact in terms of processing paperwork and entering information into the computer. Given that, APA officers have saved more than 900 hours per month in their work with low risk individuals—time that they can now devote to interventions with higher risk individuals.

Lessons Learned

- Establish an interdisciplinary planning group to build support across agencies.
- Develop clear eligibility criteria for program participation.
- Involve and train staff to ensure successful program implementation.

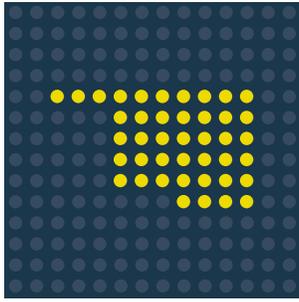
An early issue was the integration of ATR into ODRC's case management system, which proved to be more complex and take more time than expected; nevertheless, programmers of each system collaborated to resolve any remaining connectivity concerns.

Next Steps

ATR's success has resulted in its expansion to all parole regions in the state, including areas with felony probation cases and some municipal cases. Specialized training for staff continues to be provided; so far, all Adult Parole Authority supervision staff have received training in Motivational Interviewing and other critical topics. In order to effectively supervise the higher risk offenders, parole officers were given access to electronic *Carey Guides*, trained on brain trauma, and provided safety equipment (vests, flashlights, etc.). This grant also allowed ODRC to contract with a service to provide instant notification of offender arrests to the supervising parole officer. Last, ODRC was able to provide training on *Effective Practices in Community Supervision, Decision Point*, and obtain master trainers in *Thinking for A Change*.

An important next step is sustainability and the development of a detailed ongoing implementation plan. ODRC is in the process of receiving training on the implementation science to better understand the components of a successful and sustained project.





OKLAHOMA

Oklahoma's State Justice Reinvestment Initiative

Oklahoma consistently ranks as having one of the highest incarceration rates in the nation. To address the high incarceration rate, fight crime, and enhance public safety, in 2012, House Bill 3052 was signed into law. Among other initiatives, this legislation authorized a presentence risk and needs screening process to guide sentencing decisions about treatment and supervision as one strategy to address incarceration rates and contain prison costs. Further legislative reforms occurred in 2016 that, among many statutory modifications, removed eligibility barriers for defendants to participate in community-based diversion programs if the risk and needs assessments supported their participation.

From 2012 to 2016, the Oklahoma Offender Screening instrument was implemented in 37 of Oklahoma's 77 counties. As of 2016, over 14,000 felony defendants had been screened. Participating jurisdictions reduced the average time a defendant spent awaiting sentencing by 57 days, resulting in a \$15.5 million savings in jail costs. Conversely, jurisdictions not using the program experienced an increase in nonviolent prison receptions approximately 8.5 times higher than counties using it. The Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) sought Maximizing State Reform funds to further integrate

Oklahoma's Maximizing State Reforms Goal

Maintain public safety and reduce prison costs and incarceration through the expansion of pre-screening capacity to all 77 Oklahoma counties, and enhance diversion programs starting with mental health courts in Tulsa and Oklahoma City.

the use of pre-screening risk and needs assessments statewide.

Improvement in diversion program outcomes was also realized as the result of matching appropriate programming with the assessed levels of defendants' risk and needs. As such, ODMHSAS requested additional Maximizing State Reform funds to focus on performance improvement and capacity building within the statewide risk and needs assessments as well as to expand two mental health courts in Tulsa and Oklahoma City, the top two feeders of the state prison system. These two jurisdictions accounted for 3,704 (36%) of the 10,023 state prison admissions in FY 2016.

First Steps

After the 2012 authorization of presentence screening and expansion of the program over succeeding years, community-based treatment agencies served as a central assessment "hub" for

each of the 37 jurisdictions. Screeners, employed by these agencies, utilized a three-part screening instrument with individuals to guide in disposition decisions. The screens combined the Ohio Risk Assessment System Community Supervision Tool (ORAS-CST), Texas Christian University Drug Screen V (TCUDS V), and the Mental Health Screen Form III (MHSF-III). Screeners then recommended placement into available diversion programs based on the level of risk and needs resulting from the assessment-driven referrals. ODMHSAS utilized Maximizing State Reforms funding to further enhance its efficiency, ensure information sharing and communications across programs and county/state criminal justice systems, and increase the acceptance of the tool as a global eligibility instrument for diversion programs in all areas of the state. A job description for a full-time screening coordinator was developed and advertised, and a coordinator was ultimately hired by ODMHSAS to accomplish these objectives.

Oklahoma's mental health court programs were originally created in 2005. As of 2016, mental health courts had served over 500 participants with serious mental illness in 16 counties. Staying an average of 3 years, of the 434 mental health court graduates of the program only 3.2 percent were re-incarcerated. This number was significantly lower than the 23.4 percent recidivism rate of all released individuals and the 41.8 percent recidivism rate of released individuals with a serious mental illness.

ODMHSAS partnered with the two mental health court teams in Oklahoma and Tulsa Counties to manage an additional 45 participants in each court. In addition, Maximizing State Reforms funding was used for additional drug testing and contracted treatment services.

Program Implementation

With respect to screening, ODMHSAS worked with the counties to link court processes and communications via technology to further reduce the

amount of time from arrest to case disposition. In addition, there was significant investment in training and education to ensure that local courts understood what screening was, to answer questions, and clarify common misconceptions. With the onset of the Covid-19 pandemic, it became especially important to integrate technology as face-to-face screening in jails was drastically reduced. It is only currently that many local jurisdictions are using telehealth to conduct screenings with individuals both in and out of custody. Last, court protocols were established to share screening results across disciplines to reduce duplicate assessments and decrease the time it took for a defendant to be screened for diversion. For example, the electronic screening database was modified to allow for multiple user levels. One of these levels allowed county diversion programs to log on directly into the system to review information about defendants who met the risk/needs profile of their programs and were recommended to their programs for consideration.

To further enhance mental health courts, ODMHSAS staff were co-located in both the Oklahoma and Tulsa County courthouses. These staff were instrumental in working through individual case challenges, including systemic barriers to getting into any diversion program. They also were instrumental in working with the courts to resolve cases faster for defendants entering a treatment court program.

ODMHSAS also conducted regular onsite reviews of court operations, treatment providers, coordinators, and documentation. This helped ensure that the mental health courts were meeting program standards, remained evidence based, and continued to achieve successful outcomes. Monthly feedback was also provided to the mental health court teams regarding their program capacity versus actual number of participants.

The Covid-19 pandemic has been a significant challenge to Oklahoma's treatment courts. Both Oklahoma and Tulsa Counties began using



technology to conduct treatment and adapted from compliance to wellness checks to make sure this vulnerable population was supported during this uncertain time. Statewide coordinators' and judges' meetings were held more frequently and completely virtually to address challenges, identify successful strategies, and learn about resources available to aid their programs. Program updates provided to ODMHSAS were disseminated regularly to all the judges to keep them apprised of key findings (see example provided).

Outcomes to Date and Lessons Learned

To date, both the expansion of screening statewide and the mental health court expansion in Tulsa and Oklahoma Counties have been very successful. During the project period, screening was expanded statewide from 37 to all 77 counties in the state, and 23,521 assessments were conducted. Monthly screening grew from 524 in October 2017 to 1,079 in February 2020. Because of the pandemic and ensuing jail restrictions, assessments decreased to

530 per month in July 2020. ODMHSAS is currently working to determine strategies for addressing the restrictions.

The mental health courts have realized the following outcomes:

| Oklahoma County Mental Health Court Outcomes | Tulsa County Mental Health Court Outcomes |
|---|--|
| <ul style="list-style-type: none"> Reduction in unemployment by 7.7% from admission to graduation. Reduction in arrests by 94.7% between time of admission and time of graduation. Reduction in jail days by 63% from one year prior to admission to 1 year post admission. Reduction in inpatient days by 78.2% from 1 year prior to admission to 1 year post admission. | <ul style="list-style-type: none"> Reduction in unemployment by 35.9% from admission to graduation. Reduction in arrests by 93.8% from admission to graduation. Reduction in jail days by 91.1% from 1 year prior to admission to 1 year post admission. Reduction in inpatient days by 96.1% from 1 year prior to admission to 1 year post admission. |

Example of County Monthly Screen Count Summary

Human Skills and Resources for Creek County June 2020 Screen Count Report



To expand screening, ODMHSAS relied heavily on providers to offer initial information and training to the local criminal justice partners while ODMHSAS supplemented this with state-level trainings. This worked well in some areas of the state but not in others. In retrospect, ODMHSAS agreed that a more organized and centralized approach to education on screening would have provided a more consistent approach to education and messaging across the state.

In addition, developing a technology infrastructure for screening from the very beginning (instead of implementing technology as a response to the Covid-19 pandemic) would have been beneficial and resulted in a more efficient screening process all along.

Lessons Learned

- Develop an education “template” to ensure consistent education and messaging statewide.
- Build technology infrastructure into program implementation from the very beginning.

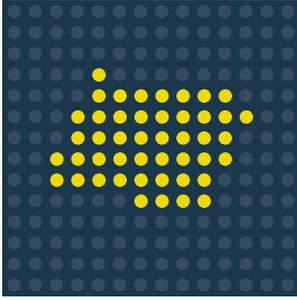
In terms of the mental health court expansion, similar to screening, earlier integration of technology would have significantly benefited the program prior to the pandemic and allowed for easier adoption of telehealth and other now necessary strategies. For example, the infrastructure for telehealth already existed to connect specialty providers to individuals in need as well as connecting law enforcement to local crisis providers while on scene. As such, the quick transition to telehealth as the primary setting for treatment during the Covid-19 pandemic was a relatively smooth transition. However, this

technology infrastructure was not as widely available for supervision, drug testing, and court proceedings; therefore, these vital mental health court program operations were less quick to adapt, which impacted the ability of the mental health court programs to provide the best care possible.

Next Steps

ODMHSAS plans to continue to develop more robust out-of-custody protocols with treatment providers and criminal justice partners. This will be especially important as court processes continue to become more efficient and pretrial release options are increased. Program services and screening will continue to receive state funding to continue these important activities. Mental health courts will also continue to receive a state appropriation, which has increased by \$1 million over the past few years, to allow for the further expansion of treatment courts.





OREGON

Oregon's State Justice Reinvestment Initiative

A 2012 Commission on Public Safety report to Oregon's Governor found that increased prison costs had resulted in a decrease in funds for community corrections and local public safety programs. In response, in 2013, Oregon passed House Bill 3194, the Justice Reinvestment Act, which is projected to result in more than \$350 million in saved corrections costs by the end of the 2019–21 biennium.

A key JRI strategy was the Justice Reinvestment Grant Program (JRGP), created by legislation in 2013 to support the development and implementation of local data-driven, evidence-based practices in the counties. JRGP tasked the Oregon Criminal Justice Commission (CJC) with awarding grants to Oregon counties to achieve four goals: (1) reduce prison populations and avert future prison construction; (2) reduce recidivism through evidence-based practices and research; (3) increase public safety; and (4) increase individual accountability.

The county policy bodies with the greatest potential to fully implement JRI at the local level are the local public safety coordinating councils (LPSCCs). LPSCCs were established by Oregon statute and require high level stakeholder membership, including a police chief, sheriff, district attorney, state court judge, public defender, director of community corrections, county commissioner, juvenile department director,

Oregon's Maximizing State Reforms Goal

Increase the capacity of LPSCCs in targeted regions of the state to enhance local collaboration, implement data-driven decisionmaking, and expand evidence-based practices and programs.

health director, citizen, city councilor or mayor, Oregon State Police representative, and Oregon Youth Authority representative. By statute, LPSCCs are at the core of the JRI process; their involvement is critical to developing and supporting local programs that meet the goals and requirements of JRI. All JRGP applications must be submitted through a county LPSCC.

First Steps

The Maximizing State Reforms grant in Oregon supported a collaborative effort between CJC and the Association of Oregon Counties (AOC). The initiative was based on state and national best practices that suggest that local criminal justice coordinating bodies that operate with necessary data, information, and resources, and have dedicated staff, can be more successful than those that do not. Across Oregon, there were significant differences in LPSCC functioning, engagement,

and access to resources. For example, in the more populous counties, LPSCCs had professional staff support, greatly increasing their ability to use and share data, collaborate across agencies, and effect systemwide change. More rural counties, however, lacked dedicated staff, program resources, and even funds for LPSCCs to meet more frequently. These differences presented challenges in terms of successfully sustaining JRI over time.

The Maximizing State Reforms grant funding of \$1.75 million was used to support and train 6 LPSCC coordinators to serve 15 nonmetro counties in 3 regions of the state that did not previously have dedicated staff. Collectively, the 15 counties accounted for about 39 percent of the total prison population intake.

CJC and AOC drafted and disseminated a job announcement and worked with the targeted counties to interview and hire the LPSCC coordinators. Once hired, the coordinators received facilitation training and support, guidance with respect to team dynamics and working effectively with collaborative teams, and substantive resources for the implementation of evidence-based principles

Six Coordinators Staffed Targeted LPSCC Counties in Three Regions:

Central/Eastern Region

1. Hood River, Wasco, Gilliam, Sherman, Wheeler
2. Crook, Jefferson
3. Umatilla, Morrow

Northwest/Coastal Region

4. Yamhill, Polk
5. Josephine, Douglas

Southwest Region

6. Lake, Klamath

and practices. CJC and AOC also provided the coordinators with ongoing training, support, and networking opportunities as they planned and implemented evidence-based practices. Last, the LPSCC coordinators learned about CJC's county and JRI dashboard data and information³ and were expected to work with their assigned LPSCCs to continue to accomplish each county's JRI goals, including enhanced public safety and reduced recidivism.

Program Implementation

Each LPSCC, led by a newly hired coordinator, undertook a variety of initiatives to decrease recidivism and increase public safety in the region. Some initiatives included increasing transitional housing options, implementing automated court reminder calls, expanding local reentry programs and services, developing community-based behavioral health services, implementing evidence-based approaches for women who had been incarcerated, implementing jail and prison diversion programming, and conducting system mapping to gain a better understanding of the criminal justice system, including gaps and challenges in current system operations. In some counties, strategic planning activities were conducted and more formal plans were developed to guide LPSCC efforts. Each LPSCC coordinator also worked closely with local leadership and criminal justice stakeholders to develop their JRGP funding applications, improve data-driven decisionmaking, implement new initiatives, and monitor their progress in achieving the JRI goals.

Outcomes to Date and Lessons Learned

Building capacity at the local level has increased LPSCCs' ability to better implement county-level

³Available at <https://www.oregon.gov/cjc/SAC/Pages/Dashboards.aspx>.



initiatives. As dedicated staff, the coordinators were better able to prepare for LPSCC meetings by researching, compiling, and summarizing data and information pertinent to their discussions. They assisted LPSCCs to clarify broader criminal justice system goals and design strategies for accomplishing them. Each participating county submitted quality JRGP applications: All 15 received JRGP funding; 5 received supplemental state JRI funding; and some were successful in receiving federal grant funds for additional programs and services.

Having coordinators did not resolve all the challenges that LPSCCs faced. Prior to hiring the coordinators, most LPSCCs had fallen into an infrequent meeting schedule: Some met only once or twice a year for a few hours; others met for a few hours each quarter; and none met more frequently than quarterly. Persuading LPSCCs to meet more frequently so that meaningful conversations, strategic planning, mapping, and decisionmaking could occur was one of the more challenging aspects of the coordinators' work. A few LPSCCs did agree to meet every other month, and several LPSCCs agreed to meet for longer "special" meetings to conduct mapping and strategic planning. Others formed subcommittees focused on targeted issues. These subcommittees met more frequently and reported back their findings and recommendations to the full LPSCC.

Outcomes to Date

Generally, participating LPSCCs are now:

- More knowledgeable about state JRI goals and their county's impact on them.
- Smarter about evidence-based practices and programs.
- Better functioning.
- More successful in securing funding for local evidence-based programs and services.

Lessons Learned

- Clarify state and local expectations for participation.
- Educate and build the skills of local coordinators to be effective criminal justice planning facilitators.
- Assess the local collaborative climate and stakeholder dynamics.

In some counties, preexisting criminal justice and stakeholder dynamics were difficult to overcome. For example, a few criminal justice stakeholders that never accepted the state's JRI goals continued to be less than supportive of their LPSCC's efforts. Some were plagued by stakeholder attitudes of "this is the way it has always been done." Despite LPSCC coordinators' best efforts to build their teams and address concerns, they were never able to bring these individuals fully on board.

From the start, the only change that AOC and CJC asked LPSCCs to make was to agree to have coordinators to support their local efforts. LPSCCs were not required to change any other practices. For example, they were not required to meet more frequently, establish strategic plans, or engage in meaningful discussions regarding their criminal justice systems. This created a dynamic where some coordinators had to cajole their teams to fully engage in a process of change.

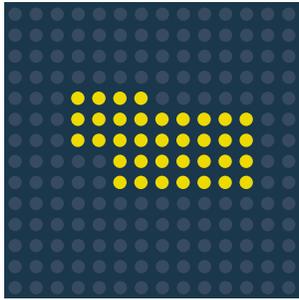
Overall, LPSCCs benefited from employing coordinators. They became more knowledgeable about the JRI process and engaged in data-driven decisionmaking; produced quality JRGP grant applications and became more successful in securing funding for local programs; and became more aware of evidence-based programming and of the efforts of other Oregon counties.

Next Steps

The Maximizing State Reforms grant that funded the LPSCC coordinators was originally slated to end in September 2019. CJC requested a no-cost extension from BJA to use remaining grant funds to financially support the LPSCC staff for additional months in counties with dedicated LPSCC staff. In the weeks leading up to September 2019, there were discussions in each county about how to sustain the LPSCC coordinators beyond this date. Some counties determined that having coordinators

had been beneficial, and they had already identified funding for them or for roles with “coordinator” elements in their budgets and/or JRGP applications (for example, Douglas, Josephine, Klamath, Morrow, Yamhill, and Umatilla Counties). Once the formal relationship with AOC ended after 3 years, about half of the counties involved in the grant program declined to maintain LPSCC staff, and most of those counties saw a regression to previous behaviors of infrequent LPSCC meetings and less cohesive partnerships among stakeholders.





SOUTH DAKOTA

South Dakota's State Justice Reinvestment Initiative

In 2012, when South Dakota began to engage in a JRI process, the state had experienced an unprecedented 500 percent increase in its prison population—from 546 individuals in 1977 to more than 3,600 in 2012. A majority of these individuals were convicted of drug and nonviolent offenses. Policy recommendations to reduce recidivism and contain corrections costs were embodied in the legislature's 2013 Public Safety Improvement Act (PSIA). PSIA had three broad goals: (1) improve public safety by investing in programs, practices, and policies that have been shown to improve rehabilitation and reduce repeat individuals; (2) hold individuals more accountable by strengthening community supervision; and (3) reduce corrections spending and focus prison space on violent, chronic, and career criminals.

Since the passage of PSIA, there has been a downward trend in the overall prison population size, and significant progress has been made in many other areas. However, the majority of the state's prison beds continue to be used for individuals convicted of drug and nonviolent offenses, and a large percentage of individuals in prison continue to be there for probation or parole violations. While this is the case for both men and women, it is particularly true for women. Since 2000, the number of incarcerated women has more than doubled, and

South Dakota's Maximizing State Reforms Goal

Establish the Intermediate Correctional Intervention Program for women to further JRI goals, divert and prevent Pennington County women who have been arrested from going to prison, and assist women who have been incarcerated with transition and reentry services upon release from prison.

at the beginning of the Maximizing State Reforms effort, South Dakota's female incarceration rate had increased from the 23rd to the 4th highest in the country. The \$1.75 million Maximizing State Reforms grant was seen as an opportunity to address the high female incarceration rate.

First Steps

To address the growth in the women's prison population, the South Dakota Department of Corrections (SD DOC) partnered with Pennington County (Rapid City) to implement the Intermediate Correctional Intervention Program (ICIP). Pennington County had the highest incarceration rate of women in the state: On June 30, 2016, it accounted for 25 percent of the women's prison population. This included over 39 percent of the total probation violation admissions during the year. Ninety-nine

percent of the commitments were for nonviolent crimes and 69 percent were for drug offenses. Women violating probation and parole and reentering prison from Pennington County were the focus of this initiative.

ICIP is based on the premise that many women who have been incarcerated can be supervised safely in the community with the addition of intensive case management and evidence-based programming and services—a significant gap noted by Pennington County judges, law enforcement, supervision officers, and other local stakeholders. A Pennington County advisory group of key criminal justice stakeholders was established to guide the development of the program and ensure support from local judges and others to divert to the program women on supervision in danger of revocation. The program was envisioned as a 12-month program: an initial 90 days of residential placement for the women coupled with evidence-based programming and intensive case management followed by supervision and support in the community.

Characteristics of a Statewide Sample of 100 Female Probation and Parole Violators

- 20–61 years old; median age of 30.5 years.
- 65% Native American; 33% White.
- Drug offenses were the most serious current offense for 69% of the population.
- 92% had a severe substance abuse disorder.
- Criminal thinking was identified as a risk factor for 88% of the violators.
- 41% had a history of mental health issues.

(RNR Analysis, FY 2016)

During the planning phase of this effort, SD DOC contracted with George Mason University to utilize the RNR Simulation Tool⁴ in order to provide a more detailed profile of the targeted women’s population. The information resulting from the RNR assessment was included in a request for proposals (RFP) disseminated to community providers and others to assist SD DOC in responding appropriately with respect to the design and implementation of the targeted program services. In addition to the RFP, informational meetings were conducted to help secure appropriate providers. Since the RFP process took longer than was anticipated, the program started a year later than expected. Lutheran Social Services (LSS) was ultimately funded to provide programming, services, and case management. LSS also subcontracted with the Pennington County Sheriff’s Office to provide housing for the first (residential) phase of the program in an existing work release facility.

From the beginning, SD DOC recognized that a different approach would have to be implemented to help women be more successful. As such, the initial months of the program were spent training Pennington County stakeholders and LSS staff on gender-responsive and trauma-informed principles and approaches and on existing tools and programs developed specifically for women. In addition, LSS and SD DOC staff were trained on the use of the Women’s Risk and Needs Assessment (WRNA) and *Moving On* curriculum.

Program Implementation

ICIP officially started in July 2018. Women were referred to the program at various points in time: They may have been in jail awaiting a violation hearing or other court action, revoked to prison, or at the end of their incarceration. A chemical dependency treatment needs assessment was

⁴The RNR Simulation Tool helps jurisdictions determine what forms of programming will be most effective in reducing recidivism and improving outcomes for ex-offenders. The tool is designed to guide resource allocation and help jurisdictions identify target population characteristics and service provision gaps.



required for all women eligible for the program to determine their level of treatment needs. Women deemed in need of residential substance abuse treatment were not appropriate for the program.

Women accepted to the program remained on supervision throughout their time in the program. LSS case managers worked individually and in groups with them to address the myriad issues facing them. After the women's initial residential stay, the case managers helped them find appropriate housing (if needed) and provided ongoing case management and support in the community. Case managers also met regularly with supervision officers to assess each participant's progress.

Outcomes to Date and Lessons Learned

As of June 2019, 43 women had participated in the program. The majority were Native American; many were mothers; and most had significant victimization histories. While it is still too early to determine the direct impact of ICIP on Pennington County's commitment of women to state prison, overall, women's commitments to prison from Pennington County have been reduced. In FY 2017, prior to the start of ICIP, Pennington County committed 29 percent of all statewide female commitments, and in FY 2020, it committed 24 percent of all statewide female commitments. Further, female commitments for probation violations during this same timeframe were reduced by more than 20 percent.

ICIP has highlighted for SD DOC the importance of infusing a gender-responsive approach throughout the criminal justice system. WRNA is now being used at intake for all women admitted to the women's prison, and discussions are underway to determine the range of appropriate programming that can be implemented to address women's risk level and needs.

In addition to training program staff on WRNA and the Moving On curriculum, training has been

conducted with women's prison staff and with parole and probation officers. There are plans to expand their use going forward for a more robust purpose that will include case management and programming referrals, while considering their use as an internal gender-responsive classification tool.

Key to ensuring the long-term success of ICIP was the establishment, from the very beginning, of a collaborative state/local partnership. Pennington County stakeholders were initially involved in the development of the program, and SD DOC continues to reach out to county stakeholders and provide them with regular updates about the program's progress.

ICIP has experienced some challenges. As noted earlier, despite its best efforts to inform the Pennington County provider community about the program's goals and components, and to actively solicit their interest, SD DOC did not initially receive any responses to its RFP for providing housing and services for the target population. SD DOC had hoped that one provider would provide all the program components. This required SD DOC to "take a step back" and consider additional options. While this took some time and delayed the start of the program by about a year, LSS was ultimately selected.

Lessons Learned

- Establish and maintain state/local partnerships.
- Cross train agency staff to ensure program success.
- Dedicate security staff to the program and include them in cross-training and program management meetings from the start.
- Incorporate gender-responsive and trauma-informed approaches to be more successful with women.

Because there are additional ex-offenders (men and women) in the work release facility, the sheriff's office also provides security staff. Security staff typically rotate in and out of the facility on a daily basis and, as a result, have had no incentive to invest in the program or the women who participate in it. SD DOC continues to work closely with LSS and the sheriff's office to identify security staff who can be dedicated to the program. This will allow for greater consistency and an opportunity for security staff to become better partners with program staff.

Next Steps

Throughout its first year of operation, ICIP and SD DOC staff met regularly to assess the

implementation of ICIP, including the responsiveness of programs and services to address the women's risk and needs, the need for additional programs and services to fill scheduling gaps, and to refine program policies and protocols, as required. ICIP is envisioned to be a pilot that, if successful, will be expanded to other parts of the state and supported by SD DOC. ICIP will continue to operate with existing Maximizing State Reforms grant funds through September 2020. By that time, the program will have been in operation for more than 2 years, and preliminary outcomes will be assessed to determine if there will be further expansion.



CONCLUSION

Under the JRI Maximizing State Reforms Grant Program, each of the participating jurisdictions discussed in this report was able to successfully implement new initiatives, establish necessary services, or engage in other appropriate actions that are allowing the jurisdictions to address key targets or issues that were identified through their states' JRI activities. Every participating jurisdiction had its own unique area of focus, and all were successful at planning and implementing their desired initiatives.

There have been other accomplishments and lessons learned from this program, including the following:

Use of the JRI process. All six states utilized the JRI process to drive their efforts. That is, they took a data-driven approach to planning and implementing Maximizing State Reforms initiatives to address their JRI goals of improving public safety and reducing recidivism.

Implementing specific activities in order to further the broader JRI goals. This grant program focused on the implementation of specific initiatives unlike other state JRI efforts which are focused on advocating for state legislative changes. This required a focus on a variety of activities at the ground level to ensure that the initiatives were being implemented successfully and in service of the states' broader JRI goals.

Additional time for implementation planning. Each state involved in this program needed more time than was anticipated to thoughtfully plan and execute their initiative(s). In fact, implementation planning took up to a year or more in some states, which had the effect of decreasing the period during which a program has actually operated, or will operate, to 2 years or less.

Realization of outcomes. Because program implementation took longer than anticipated, it has been challenging to measure recidivism reduction and other outcomes within the 3-year grant period. Each of the states involved in this program requested no-cost extensions from BJA in order to allow for a longer period of program implementation and more meaningful measurement of outcomes.⁵

"Hidden" but significant impacts. The Maximizing State Reforms Grant Program is a separate grant program from other JRI initiatives and operates parallel to "core" JRI reforms. Since the program is not

⁵The Covid-19 pandemic has further exacerbated this situation, and anticipated outcomes have been even more challenging to achieve during the grant period. All of the states, except Nebraska, at the invitation of BJA, again requested no-cost extensions into 2021.

central to JRI reforms and represents a fairly small investment of resources, it operates somewhat in the background, so its impact may be more invisible than, or not as apparent as, other state JRI reform efforts.

Bolstered JRI efforts. All the states involved in the Maximizing State Reforms Grant Program have been successfully working toward their individual goals and, in so doing, have bolstered state JRI efforts. Without this grant program, these states would not have had the opportunity to focus on their specific areas of concern—issues that, in the long term, may significantly affect overall JRI outcomes.



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