The author(s) shown below used Federal funds provided by the U.S. Department of Justice and prepared the following final report:

Evaluation of the Second Chance Act (SCA) Adult Demonstration 2009 Grantees

Interim Report
August 9, 2013

Prepared by:

Ron D'Amico
Christian Geckeler
Jennifer Henderson-Frakes
Deborah Kogan
Tyler Moazed

Findings in Brief

This report presents the results from an implementation study of 10 grantees awarded Second Chance Act (SCA) adult demonstration grants to improve reentry services for adult offenders. The implementation study was designed to learn how the 10 grantees operated their SCA projects. During site visits to each grantee lasting two to three days each, study team members interviewed program administrators, case managers, probation and parole officers (POs), fiscal and MIS staff members, and SCA service providers, asking questions about project management and service delivery. They also conducted focus groups with program participants, observed project services, and reviewed selected case files. These site visits largely took place in the spring and summer of 2012.

The grantees included state departments of corrections, county sheriff's offices, county health agencies, and other public agencies. Each SCA project targeted medium to high-risk adult offenders and enrolled participants, variously, well before release, just before release, or just after release.

Case management, involving needs-based service planning and service coordination, was the focal point of project services across all 10 sites. Depending on the site, case managers were (specialized) POs or employees of municipal departments or nonprofit organizations. Other SCA services included education and training, employment assistance, substance abuse treatment, mental health services, cognitive behavioral therapy, pro-social services, housing assistance, and other supportive services. These services were provided either directly by the case managers, through formal agreements with service providers (often including payment for services rendered), or through unfunded informal referrals to community agencies. The direct service model provided tailored services to participants, but required case managers to have specialized expertise and, for this reason, was used sparingly. The formal partnership model ensured priority access to services that participants needed but was costly. The informal partnership model provided participants with access to a wide array of community services but often without close coordination with the SCA project itself. Each grantee used all three of these service delivery models.

The grantees faced numerous challenges in developing strong projects, stemming partly from the intrinsic difficulty in serving offenders and partly due to the challenge of designing and implementing evidence-based reentry programming. These challenges included:

- needing substantial ramp-up time to operate smoothly,
- needing to train case managers (especially those without a social service background) on needs-based service planning, and

- coordinating partner services.

The SCA projects that overcame these challenges created strong foundations for sustainable systems change. They:

- gained considerable experience in needs-based service planning and in coordinating pre-release and post-release services,

- strengthened partnerships between various government and community-based agencies, and

- came to embrace a rehabilitative philosophy to reentry that, in some cases, represented an important cultural shift.

An impact study that uses a random assignment design is separately underway, and results from it will be provided in a separate report.

CONTENTS

SPR

SPR

EXHIBITS

SPR

EXECUTIVE SUMMARY

The number of inmates being released annually from prisons and jails increased fourfold over the
past three decades, and rates of recidivism for the formerly incarcerated have been disturbingly
high (Travis and Lawrence 2002; Pew Center on the States 2011). Recognizing the importance
of improving reentry success for offenders returning to their communities from jails and prisons,
the U.S. Congress established the Second Chance Act (SCA) program with strong bipartisan
support. Since the legislation was signed into law in 2008, more than $250 million has been
awarded through 300 grants to government agencies and non-profit organizations to support
reentry programming for adults and juveniles.

The U.S. Department of Justice (DOJ) National Institute of Justice (NIJ) awarded Social Policy
Research Associates (SPR) and its subcontractors, MDRC and the National Opinion Research
Center (NORC), a grant to evaluate a subset of SCA grantees. The purposes of this evaluation
are twofold:

1. Conduct an implementation study of selected SCA grantees, to learn their strategies for
   developing program services and the challenges they have encountered in making their
   programs effective.

2. Examine the impact of SCA services on participants' recidivism, employment, and other
   outcomes and determine the cost-effectiveness of SCA services.

This report presents results from the implementation study.[1]

About the Evaluation

This evaluation is studying 10 adult reentry demonstration grantees that received fiscal year (FY)
2009 funding and were selected by NIJ and DOJ's Bureau of Justice Assistance (BJA) to
participate in the study. Of the 10, seven grantees also received 2010 (and, later, 2012)
supplemental funding with the expectation that they would participate in an impact and
implementation evaluation; they were chosen because BJA had determined that they had made
adequate progress towards establishing strong SCA projects and meeting program goals. Three

---

[1] Findings from the impact and cost-effectiveness studies will be described in the final report due in 2015.

SPR

other grantees, also selected by BJA, were asked to participate in the implementation study (but not the impact study), because they were thought to display promising practices regarding reentry programming. These 10 grantees are the focus of the implementation study, which is described in this report.[2]

The implementation study was designed to learn how the 10 grantees operated their SCA projects. Study team members conducted site visits to each site lasting two to three days each. While on site, they interviewed program administrators, case managers, probation and parole officers, fiscal and MIS staff members, and SCA service providers, asking questions about project administration and management, partnership formation, staffing, targeting and enrollment, and service design and delivery. They also conducted focus groups with program participants, observed project services, and reviewed selected case files. These site visits largely took place in the spring and summer of 2012.

About the Grantees

Of the 10 grantees, three were state departments of correction, two were county sheriff's offices, three were county health agencies, one was a state department of justice, and one was a city department of public services. They submitted proposals for projects that were to build on previous reentry efforts within their communities by identifying gaps in the previous services and developing new service strategies. The grantees developed partnerships with a wide variety of agencies and organizations to carry out intake and enrollment and provide pre-release and post-release services, including case management. These partnerships were either formal (that is, characterized by a written agreement and usually the exchange of funds) or informal (that is, based solely on a referral system).

All the grantees limited SCA enrollment to individuals at medium or high risk of recidivism, as measured by a validated risk-assessment tool. Beyond level of risk, the projects differed in the criteria used to determine eligibility, targeting by gender (some served only males, others only females, and others both genders), age (one targeted younger adults and another those who were older), or other characteristics. Influenced by their service strategies, grantees also had different conceptions of when it was best to screen, enroll, and begin serving participants: at least three months before an individual's release date (four grantees), just before release (four grantees), or

---

[2]   The seven grantees participating in both the implementation and impact studies are: the Allegheny County (PA) Department of Human Services, the Kentucky Department of Corrections, the Marion County (OR) Sheriff's Office, the Oklahoma Department of Corrections, the San Francisco (CA) Department of Public Health, the San Mateo County (CA) Division of Health and Recovery Services, and the South Dakota Department of Corrections. The three additional grantees participating only in the implementation study are: the City of Memphis (TN), the City of Richmond (VA), and the New Hampshire Department of Justice.

after release (two grantees). They also varied in what they considered the maximum duration of SCA participation, from a low of three months to a high of 18 months, but with most projects falling approximately midway between these extremes.

Case Management Services

Case management was perceived as a critical, value-added feature of each of the SCA projects, with case managers acting as advisors, coordinators of services, and sounding boards for participants. The eight projects that enrolled participants prior to release provided both pre- and post-release case management; the remaining two provided only post-release case management.

SCA case managers came from a variety of organizations, including departments of corrections, municipal departments, and nonprofit organizations. In some projects, probation or parole officers (POs) also served as SCA case managers and typically had smaller caseloads than regular POs. In general, there were advantages and disadvantages to combining supervision with case management functions in the PO role. On the one hand, blending the two roles eliminated the need for service coordination between POs and separate case managers and promoted participant retention in SCA (because project participants knew they might face re-incarceration if they did not show up for appointments and services post-release). On the other hand, some project administrators felt that the negative perceptions of POs held by many participants could impair the effectiveness of POs acting as case managers, and others found that it took some work to reorient POs toward a social-service model. Some projects tackled these challenges by providing SCA POs with special training on change management, and others hired SCA case managers who were not from the correctional system.

Fundamental to the case manager's role was planning for client services based on identified risks, needs, goals, strengths, and barriers. To inform service planning, case managers relied on parole/probation requirements, as well as on formal assessment tools. However, case managers also found it valuable to rely on informal conversations with participants, because they believed that formal assessments, by themselves, were inadequate for fully understanding an individual's needs and goals. In the course of service planning, case managers also often served as critical personal supports. Project participants frequently shared frustrations and emotional issues that arose naturally in the course of discussing service needs, and a sense of personal connection with case managers could motivate participants to succeed.

In most projects, case managers' greatest focus was on planning for the post-release period. However, post-release service planning typically began before release, because this had the advantage of building relationships between case managers and participants, and between participants and partner providers, early in the reentry process. Overall, case managers met approximately once a week with participants after release, a frequency that was similar to that of

SPR

pre-release meetings. However, the length, intensity and focus of case management sessions were highly variable, and depended on the relative stability and particular needs of the participant.

Additional SCA Project Services

All 10 projects provided participants with a variety of services other than case management, both prior to and after release from jail or prison. These additional services were quite varied, covering seven general areas:

- *Education and training*, including basic literacy, GED, and vocational training in fields such as culinary arts and healthcare support;

- *Employment assistance*, including one-on-one or group sessions on resume development, goal setting, interview preparation, and other job finding topics;

- *Substance abuse treatment services;*

- *Mental health services*, as exemplified by one grantee who arranged for participants to have access to mental health therapeutic sessions both pre-release and post-release;

- *Cognitive behavioral therapy*, including Moral Reconation Therapy and access to courses such as Thinking for a Change;

- *Pro-social services*, including mentorship and courses on good parenting, life skills development, communication skills, anger management, healthy leisure, and other topics; and

- *Housing assistance and/or other supportive services*, such as placing participants in transitional housing and providing vouchers for housing expenses, transportation (bus passes), food, work clothes, or other necessities.

While most grantees offered access to each of the above-listed types of service, not all participants in each site engaged in services from all service categories; most grantees placed a strong emphasis on "needs-based" services, wherein staff determined participants' needs through the service planning process described above and arranged services accordingly.

The ways in which the grantees provided or made available these services also varied in structure and strategy. Overall, three service delivery models were used by each of the grantees: direct service provision, formal partnerships, and informal partnerships. In the *direct service* model, case managers provided the additional service themselves. This model of service delivery provided projects with the ability to offer exclusive services to participants and the benefit of a high degree of monitoring and control of the services participants received. On the other hand, it required specialized expertise that case managers did not always have; for this reason, the direct service strategy was used sparingly.

Under the *formal partnership* model, SCA grantees arranged with other providers to deliver services on the projects' behalf, either by paying for the services on a fee-for-service basis, funding a service provider in a lump sum to increase that provider's capacity to serve participants, or making some other formal agreement with a provider to ensure that SCA project participants had priority of service. In these instances, the partner organizations would also typically be required to report to the grantee and coordinate with project case managers about the services they provided to SCA project participants. This model of service delivery ensured participants' access to needed services and promoted a high level of service coordination. But formal partnerships could be costly, which limited their use to some extent.

Under the *informal partnership* model, case managers made "unfunded" referrals to community organizations with which they had relationships of varying strength. This model of service delivery allowed SCA projects to offer a wide array of services, as the need arose, at no real cost to the project. The downside of this model of service delivery is that it offered relatively little benefit (beyond the value of referral itself) to an SCA participant over what he or she may have experienced if not enrolled in SCA, since informal partner provider services were available to non-participants who were otherwise eligible. SCA project staff members also tended to coordinate less closely with informal partner providers than they did with formal partner providers.

The SCA projects weighed the various advantages and disadvantages of each service delivery model somewhat differently based on their priorities, provider networks, and budgetary constraints. They thus made different decisions about which models to use for which services. However, in general all projects made widespread use of the informal partnership model, especially for pre-release services, and made limited and more targeted use of the direct service and formal partnership models.

Lessons Learned in SCA Project Implementation

The grantees faced numerous challenges in developing strong projects, stemming partly from the intrinsic difficulty of serving offenders. Grantees noted the prevalence of barriers frequently seen in this target population, including participants' low levels of education, poor work histories, substance abuse, mental illness, weak personal support networks, and generally poor coping skills. Other challenges related to the effort involved in building reentry programs with all the desired features. Knowledge of the challenges in the latter category provides important lessons that can benefit similar efforts undertaken in the future.

- *Comprehensive reentry projects need ample ramp-up time.* Staff members at several grantee sites noted that it took them an unexpectedly long time to develop services and begin operating smoothly. Tasks that took significant time and effort were identifying community partners capable of providing project services; identifying and hiring skilled

SPR

project staff members and training them on the use of evidence-based reentry programming; establishing effective communication patterns between project staff members at all levels; providing partners with opportunities to share information about project participants; and overcoming organization- and/or department-level tensions around project roles and responsibilities. Overcoming these challenges took projects anywhere from several months to a year.

- *Identifying and training case managers is a crucial program design step.* Case managers played a pivotal role in SCA project design. However, these staff members needed to be prepared to work with participants in ways that linked services to actual participant needs. Projects that employed POs as case managers needed to decrease POs' caseloads and provide the POs with significant training and support on activities such as using assessments and giving participants advice and support rather than merely monitoring them. The remaining projects, whose SCA case managers typically had experience in social services settings, often needed to find ways to have their employees work closely with correctional staff.

- *Reentry success might be improved if there were more housing and mental-health service providers.* Staff members from five projects noted the shortage of safe (and affordable) housing and commented that unstable environments tended to have negative effects on participants' reentry success. Similarly, staff members from three projects explained that, even though suitable mental health services existed, the demand for such services far exceeded the supply. These barriers to service provision highlight the potential importance of community factors outside the realm of case management over which reentry projects have little direct control.

- *Relationships with partners should receive focused attention to prevent underuse of their services.* While many partnerships appeared quite strong, certain partnerships for a few SCA projects were not that well used. Staff and study team members suggested that these low take-up rates might be due to weak communication between the grantee and the partner organization. Staff members also cited the lack of referral guidelines for case managers as a possible explanation.

- *Coordinating service delivery requires regular communication among partners and can greatly benefit from integrated management information systems.* In the SCA projects studied, coordination across partners and staff from different agencies was hampered by the lack of integrated data management systems. To some degree, this limitation was overcome when partners came together regularly to engage in case planning and general service refinement.

Creating the Foundation for System-Level Changes

An important goal of the SCA evaluation is to assess the system-level changes that occurred as direct and indirect results of grantees implementing their SCA projects. While it is too early to determine if the changes instituted by grantees will be sustained or if they can extend to the broader criminal justice and reentry systems in grantees' states and communities, it is possible to identify the ways in which SCA grantees changed "business as usual" and created practices worthy of continuation and emulation. These changes included increasing the availability of

reentry services and developing new service-delivery models; growing and developing partnerships among organizations and agencies involved in providing reentry services; and inculcating an important cultural shift within grantee communities in which those with a traditional, correctional-system perspective adopt more transformative reentry practices and approaches.

Increasing Reentry Services and Developing New Service Models

The assistance provided to participants by case managers formed the central component of the SCA projects: case managers assessed project participants, planned pathways of appropriate services, helped participants navigate through a profusion of other project services, and supported participants with whatever issues arose during their project enrollment. SCA-supported improvements to case management benefited offender reentry in four important ways.

- *The continuity of services from pre- to post-release improved.* Staff members in many sites remarked that a significant benefit of the grant was ensuring a greater continuity of services for participants as they transitioned from jail or prison to life outside the walls. In some cases, the improved continuity was due to the same case managers working with participants at both points in time. In other cases, it was a matter of coordinating pre- and post-release case management services so that the transition from one to the other was experienced by participants as relatively seamless.

- *The grant allowed POs serving as case managers to spend more time with participants.* One of the primary benefits of the SCA grant was to reduce PO case managers' caseloads, providing them more time to work closely with participants, network with providers, and share knowledge about resources.

- *Risk and needs-based assessments became a part of service planning.* Although assessing those who were incarcerated was not new in the communities being studied, needs-based service planning was greatly expanded and became a cornerstone of the SCA projects' approaches.

- *Case managers became more prepared to work with an offender population.* Administrators noted that their grants allowed them to provide training for case managers, thus building expertise in case management techniques and skills for working with offenders.

As noted, SCA projects also provided a variety of services to participants in addition to expanded case management. Of interest in the context of system-level changes are those services that grantees newly created or significantly expanded as part of their SCA projects. Conversations with project staff members revealed several types of services or components of services that seemed to be exemplary contributions of the SCA grant and which had the potential for lasting beyond the period of the grant. These included incorporating job preparation assistance into reentry efforts, developing vocational training and work opportunities, and using cognitive behavioral therapy in a consistent way. The use of SCA grant funds to expand use of these

SPR

services enabled communities to see the services' potential and, in some cases, yielded new curricula likely to be sustained beyond the specific period of SCA grant funding.

Growing Reentry Partnerships

Partnerships were crucial for the operation of projects since grantees lacked the capacity to provide most project services themselves. The SCA grants facilitated the growth of partnerships by increasing grantees' communication with project partners and strengthening interagency coordination. Regular, formal partner meetings, as well as the more frequent inter-personal communications among staff members, encouraged personnel at differing levels to discuss policy and coordinate service delivery. A few staff members mentioned that this regular communication built stronger partnerships that offered better resource networks for each of the partners to use in the future.

Cultural Shifts

Although permanent changes in system-wide structures and policies may be difficult to point to at this stage in the evaluation, project staff members reported that the implementation of SCA projects resulted in fundamental "cultural shifts," or changes in mindsets among many of the staff members of the grantees and their partner agencies. These shifts made staff members friendlier to the ideas and approaches promoted under the SCA grants. As staff members described it, reluctant individuals learned to downplay the prevailing view of their role as one of merely "enforcing regulations" and came to embrace a rehabilitative philosophy designed to support offenders throughout the reentry process.

Bringing about this cultural shift among staff members was not a simple process; it often involved confronting cynicism and skepticism that took a great deal of time and effort to overcome. What seemed to work best was a combination of regular communication, engagement in the SCA project planning process, and staff training.

Depending on the degree of reentry work they undertook before the grant, SCA grantees are in very different places in this transformative process. Moreover, this cultural shift is far from complete and conversations with project staff members suggest more work may be needed. However, regardless of how far along SCA projects are in changing local attitudes around reentry services, the transformation is an important one with an impact that will likely last well past the end of any formal funding.

I.   INTRODUCTION

The number of inmates being released annually from prisons and jails increased fourfold over the past three decades, and rates of recidivism for the formerly incarcerated have been disturbingly high. In recognition of the importance of improving reentry planning and implementation, the Second Chance Act (SCA) was signed into law in 2008, and the U.S. Congress has provided annual funding for SCA grant activities in the years since then.

To provide the first look at the SCA program's operation and impacts, the National Institute of Justice (NIJ), the research, development, and evaluation agency of the U.S. Department of Justice (DOJ), awarded Social Policy Research Associates (SPR) and its subcontractors, MDRC and the National Opinion Research Center (NORC), a grant to evaluate a subset of SCA adult offender reentry demonstration grantees. The purposes of this evaluation are twofold:

1. Conduct an implementation study of SCA projects, to learn their strategies for developing program services and the challenges they have encountered in making their programs effective.

2. Examine the impact of SCA services on participants' recidivism, employment, and other outcomes and determine the cost-effectiveness of SCA services.

This interim report describes findings from the first of these tasks, the implementation study.[1] This chapter introduces those that follow: it describes the nature of the problem that SCA projects[2] were designed to address, provides an overview of the SCA initiative, and describes the evaluation's purposes and methods. The chapter concludes by providing a snapshot of the SCA projects we are studying.

Background: Prisoner Reentry and SCA

In 2010, the total federal and state prison population declined for the first time since 1972. In that year, however, more than 1.6 million adults were under the jurisdiction of state or federal

---

[1]   Impact findings and results from the cost-effectiveness study will be described in the final report due in 2015.

[2]   Throughout this report, we generally use the term "SCA program" to refer to SCA as the national initiative taken as a whole, and "SCA project" to refer to a specific instance of SCA as it is operated by an SCA grantee.

SPR

correctional authorities (Guerino et al. 2012), and approximately 750,000 were confined at mid-year in local jails (Minton 2011). Other evidence shows that more than 4.8 million are under community supervision (Glaze and Parks 2012), and about 700,000 are released from prisons each year (Carson and Sabol 2012) — four times as many as were released annually 30 years ago (Travis and Lawrence 2002). Taken together, these figures suggest the burden on the nation's correctional system is extraordinary.

Adding to the challenge, those released from incarceration face daunting obstacles to successful reentry. About half lack a high school degree and many report problems with substance abuse and mental health or physical impairments (Ditton 1999; Hammett et al. 2001; Petersilia 2003). Upon release, they have difficulty finding jobs and housing, partly because of the stigma that comes with their status as former offenders, and they face challenges reintegrating with their families. Moreover, the formerly incarcerated tend to be released into a relatively small number of urban neighborhoods that are fragile at best, characterized by high rates of poverty and other social problems (Travis et al. 2001; La Vigne and Kachnowski 2003).

Not surprisingly given these challenges, about two-thirds of ex-prisoners are rearrested and about half are reincarcerated within three years of release, either for violations of parole conditions or new crimes (Langan and Levin 2002; Pew Center on the States 2011). This cycle of imprisonment and reentry has tremendous personal consequences for the men and women who churn in and out of the criminal justice system. But, the costs extend to many spheres of public policy and community life as well. High rates of recidivism impose a financial drain on federal and state governments, impair public safety, strain community resources, and impose physical and emotional harm on the families of those who are imprisoned. Reducing recidivism is therefore critical, both as a means of reducing corrections costs and as a strategy for addressing the interrelated problems of low-income families and vulnerable communities.

In recognition of the gravity of the situation and the urgency of the need, SCA was signed into law on April 9, 2008, with widespread bipartisan support. Since then, more than $250 million has been awarded through 300 grants to government agencies and non-profit organizations under various categories of competitions. One category includes adult reentry demonstration grants, awarded to state and local governments and federally recognized Indian tribes, for purposes of planning and implementing strategies to address the challenges faced by adults returning to their communities after incarceration.[3] Adult reentry demonstration grants have been awarded annually in fiscal years (FYs) 2009 through 2012 by the DOJ's Bureau of Justice Assistance (BJA), with a total of more than $55,000,000 awarded through more than 100 separate grants.

---

[3] Other grant categories include mentoring grants, youth demonstration grants, reentry court grants, and others. For details, see http://www.nationalreentryresourcecenter.org/about/second-chance-act.

About the Evaluation

This evaluation will examine 10 adult reentry demonstration grantees that received FY 2009 funding and were selected by NIJ and BJA to participate in the study. Of the ten, seven grantees also received 2010 (and, later, 2012) supplemental funding with the expectation that they would participate in an impact and implementation evaluation. The grantees were chosen because BJA determined they had made adequate progress towards establishing strong SCA projects and meeting program goals. Three other grantees, also selected by BJA, were asked to participate in the implementation study (but not the impact study), because they were thought to display promising practices regarding reentry programming. These ten grantees are the focus of this evaluation: seven are participating in the impact and implementation study, and three are participating only in the implementation study. Because all ten participated in the implementation study, the experiences of all ten are described in this report.

Exhibit I-1 identifies the 10 grantees, and also shows the shorthand names by which the grantees' projects will be identified throughout this report. Their FY 2009 award amounts are shown, along with subsequent award amounts if applicable. As important as the award amounts were, funds for SCA programming were in actuality much greater than the amounts shown in the exhibit, because the BJA FY 2009 grant solicitation specified a 100-percent matching requirement, which could include cash and in-kind contributions.[4]

Our evaluation grant was awarded in the fall of 2010, with a 52-month period of performance that runs from January 1, 2011, through April 30, 2015. This period was designed to provide sufficient time to finalize the design of the study; engage in data collection, including follow-up data collection of project participants' outcomes after they had received project services; and conduct the analyses for both the impact study and implementation study.

The Impact Study

The impact study was designed to assess whether SCA boosts participants' outcomes compared to what they would be under "business as usual" (that is, in the absence of SCA services). To answer this question, we asked each of the seven sites that received supplemental funding to randomly assign eligible project applicants to either a treatment group that could receive SCA services or a control group that could receive other reentry services generally available but not those provided as part of SCA. However, their task was complex, and so was ours. We were studying mature programs that had been operating for more than a year before our evaluation

---

[4] Of this match, at least 50 percent needed to be made up of cash, and the remaining could represent in-kind contributions. A cost analysis, to be included in the project's final report, will describe in more detail the sources of the match funds and how the funds (both BJA grant funds and the match funds) were used.

SPR

commenced, and we endeavored to study them as they operated, even though (as discussed in this report) their project models — partners and staffing, target populations, and mix of pre-release and post-release services, among other things — were quite different. This meant that an appropriate point to insert random assignment — after eligibility was established but before meaningful SCA services were delivered — represented a different place in the typical sequence of reentry services for each project. We worked with grantee staff members to identify this point and developed random assignment procedures that were intended to be minimally disruptive to each project's normal project operations.

Exhibit I-1:
Grantees Participating in the Evaluation and their SCA Grant Funding

Grantee	Shorthand	FY 2009	Supplemental Amounts	
			2010	2012
Grantees Participating in Both the Impact Study and Implementation Study				
Allegheny County (PA) Department of Human Services (DHS)	Allegheny County	$608,339	$825,000	$1,220,000
Kentucky Department of Corrections	Kentucky	$750,000	$1,000,000	$1,500,000
Marion County (OR) Sheriff's Office	Marion County	$302,768	$400,000	$800,000
Oklahoma Department of Corrections	Oklahoma	$750,000	$1,000,000	$1,500,000
San Francisco Department of Public Health (CA)	San Francisco	$600,000	$800,000	$1,200,000
San Mateo County (CA) Division of Health and Recovery Services (DHRS)	San Mateo County	$677,674	$900,000	$1,360,000
South Dakota Department of Corrections	South Dakota	$749,749	$1,000,000	$1,500,000
Grantees Participating Only in the Implementation Study				
City of Memphis	Memphis	$394,500	---	---
City of Richmond	Richmond	$200,000	---	---
New Hampshire Department of Justice	New Hampshire	$400,000	---	---

Once these and other details were worked out in mutual agreement with the sites, we trained grantee staff members on random assignment procedures, including procedures for obtaining study participants' consent to be a part of the study.[5] Thereafter, we commenced random assignment; random assignment began as early as the last week of December 2011 for two of the

---

[5] An Institutional Review Board (IRB) reviewed study procedures to determine that they would not cause participants harm and that participants freely participate. To comply with this latter condition, those that were determined eligible for SCA were given an orientation to the study and could elect not to participate.

seven grantees, and as late as April 2012 for one grantee, with the start date determined by each grantee's readiness to begin. Each grantee was asked to establish an enrollment target of study participants, and random assignment was to continue until this target was reached, or until March 31, 2013, whichever came first. Further details on random assignment procedures will be provided in the study's final report.

The Implementation Study

The other important component of the overall evaluation was the implementation study, which was designed to learn how the SCA projects operated in the ten study sites and what services were commonly delivered to project participants. It focused on these broad questions:

- *Administration and Management.* How was the grant managed and who provided leadership and oversight? What partnerships and linkages did grantees develop for delivering services, including partnerships with the criminal justice system, other state or local government agencies, and faith-based and other community-based organizations?

- *Staffing.* Who provided direct services to SCA participants as part of grant-funded activities? What were these staff members' roles and what were their backgrounds and experiences?

- *Targeting and Enrollment.* What eligibility criteria were established for SCA services? How were eligible individuals identified? What assessments were used to deliver needs-based services to each participant?

- *Services.* What services were provided as part of the SCA project, both pre-release and post-release? How were these services connected and coordinated? What was their intensity and duration?

- *Outcomes.* What performance outcomes for participants were emphasized by the grantees and how were these outcomes tracked? What system-level outcomes were achieved (e.g., improved partnerships, improved service models, etc.)?

- *Promising Practices and Challenges.* What promising practices and challenges to designing and implementing an SCA program can be identified? What lessons were learned?

For the seven sites selected for the impact analysis, the site visits carried out for the implementation study also allowed the evaluation team to (1) document the implementation of random assignment, including any departures from expected procedures, (2) document variations in service designs across the study sites that might help explain why estimated impacts differ across sites, and (3) identify service options available to those in the control group, to help us understand the nature of the services that members of this group would generally receive.

For the impact-study sites, the visits lasted three days — two days at each site were spent learning about the grantee and its services and partners, and the third day focused on documenting alternative services generally available to control group members. To prepare for

their visits, field staff members reviewed relevant written materials that the grantees provided, including grant plans and progress reports. While on site, they (a) conducted semi-structured interviews with program administrators, management staff members, intake workers, case managers, probation and parole officers, fiscal and MIS staff members, and SCA service providers; (b) conducted a focus group with program participants; (c) observed an intake session or other interaction of a participant with a case worker (only with the permission of both parties); (d) reviewed selected case files; and (e) interviewed representatives from organizations that were providing services to control group members. These site visits took place in the summer of 2012.

We conducted two-day visits to the three SCA grantees that were not participating in the impact study. Visiting these sites allowed us to examine a wider range of SCA service designs. Field activities at these sites mirrored those carried out at the impact-study sites, except that we did not spend a third day on site gathering data from alternative providers. These site visits took place in February and March of 2012.

The findings detailed in this report are drawn from these site visits and therefore capture portraits of the projects at the points in time when the site visit to each grantee took place. As noted, all of the impact study sites received supplemental funding that was expected to carry them through until the fall of 2014, and they may have changed their service designs subsequent to the time of the site visits. These changes will be documented in subsequent follow-up telephone calls and described in the final report.

What Do the SCA Projects Look Like?

Subsequent chapters of this report will describe, in detail, various aspects of the projects operated by the 10 SCA grantees: administration and partnerships (Chapter II), recruitment and tracking (Chapter III), case management services (Chapter IV), and other program services (Chapter V). The final chapter (Chapter VI) presents concluding observations.

As a preview, the remainder of this chapter presents a broad-brush look at the projects and describes in general terms how they used their grant funds. In this regard, note that the grant services that are a focus of the impact study — and which we therefore concentrated on during the implementation site visits — do not always perfectly overlap with the ways in which the grantees spent their BJA funds.[6] This disjuncture comes about for two major reasons. First, some of what we are examining was funded by sources other than the BJA grant itself. The clearest explanation of why this was so is that the grant solicitation imposed a matching requirement, as explained above. To comply, every grantee supported its SCA initiative by using cash or in-kind

---

[6]   This distinction applies only to the seven grantees participating in both the impact and implementation studies.

contributions from other sources, including governments' general revenue funds, grantee or
partner contributions, or other public or foundation funds. As examples of the latter, program
administrators in New Hampshire secured a sizeable grant from the New Hampshire Charitable
Foundation, which has a focus on substance abuse treatment services, and Marion County
secured funding set aside by a state ballot measure, which earmarked money for treatment
services for subsets of the offender population.

Second, some grantees used their BJA funding to support general improvements to their reentry
processes or to enhance existing services that could not be denied to the general offender
population. Kentucky and Marion County are examples of this. Both grantees used a portion of
their SCA grant funds to enhance pre-release workshops or classes available to the general
inmate population. In random controlled trials, those assigned to the treatment group are
normally allowed access to the services supported by the intervention whose impacts are being
examined, while control group members are not. However, control group members could not
feasibly or ethically be denied access to the Kentucky and Marion County pre-release
workshops, because denying access would have kept them from receiving services that they
would have been allowed to receive, in some form, in the absence of the study. Moreover, some
states mandate an inmate's participation in these services as a condition of release. Therefore, for
these grantees in particular what we are examining as a part of the impact study does not
encompass all the activities on which SCA grant funds were expended; put differently, some of
the BJA-funded activities — such as pre-release workshops in Kentucky and Marion County —
were likely accessed by both treatment and control group members.

Exhibit I-2 makes this distinction clear. The first column shows the services and activities for
which the grantees used their grant funding,[7] while the second column shows specifically the
nature of the intervention being examined as part of the impact study and on which we
concentrated the greatest attention as part of the implementation study.

Note from the exhibit that by far the single most common way in which grantees used their
funding was to provide case management to SCA participants. In some cases, the staff members
providing these services were specially trained probation or parole officers (POs) who had
smaller caseloads than regular POs, while for other grantees case management was provided by
separate staff members who might work in concert with POs. Grantees also differed in whether
case management was provided both pre-release and post-release or was predominately post-
release. Regardless of these distinctions, to a large degree impacts of SCA might come about

---

[7]   SCA funds were also used for administrative expenses in support of these services and activities.

SPR

because treatment group members were far more likely to receive intensive case management
than controls.

However, SCA was sometimes used to directly fund other needed services as well, through either
fixed price contracts (where the SCA grantee provides a fixed sum to a sub-provider to make
service slots available to SCA participants) or fee-for-service (where the grantee funds the
provider on a per-participant or per-service basis). Some projects also used their funds to make
supportive services available to participants, for example by providing vouchers that could be
used to meet transportation, housing, food, and other needs.

Subsequent chapters elaborate on the above snapshot by describing SCA project management,
recruitment, services, and outcomes in more detail. Project profiles for each of the ten grantees
are provided in the appendix.

continuation and emulation. These changes included the following: (1) increasing the availability of reentry services and developing new service-delivery models; (2) adding evidence-based practices to the delivery of reentry services; (3) growing and developing partnerships among organizations and agencies involved in providing reentry services; (4) establishing financial and administrative bases for sustaining the SCA projects beyond the period of grant funding; and (5) inculcating important cultural shifts from a traditional, correctional-system perspective towards one that emphasizes transformative reentry practices.

Expanding Reentry Services and Service-Delivery Models

The SCA grant brought about new or improved case management services and made available additional project services, such as employment services, cognitive behavioral therapy services, and services targeted to women.

Changes to Case Management Services

As noted in previous chapters, the assistance case managers provided to participants formed the central component of the SCA projects. Case managers were the face of the project to participants and were the individuals responsible for ensuring that participants engaged in and completed project services. More specifically, case managers assessed project participants, planned pathways of appropriate services, helped participants navigate through a profusion of other project services and supported participants with whatever issues arose during their project enrollment. Whether the SCA grant fully or partly funded case managers, the case management services enabled and improved by the SCA grant greatly altered reentry services in grantee communities.

SCA-supported improvements to case management benefited reentry in three important ways.

- *The continuity of services from pre- to post-release improved.* Staff members in many sites remarked that a significant benefit of the grant was to ensure a greater continuity of services for participants as they transitioned from jail or prison to life outside the walls. In some cases, the improved continuity was due to the same case managers working with participants at both points in time. In other cases, it was a matter of coordinating pre- and post-release case management services in a relatively seamless way.

- *The grant allowed case managers to spend more time with participants.* One of the primary benefits of the SCA grant in some projects was to assign POs smaller caseloads than was typical, providing them more time to work closely with participants, network with providers, and share knowledge about resources.

- *Case managers were more prepared to work with an offender population.* Administrators for several projects noted the grant allowed them to provide training for case managers, thus building expertise in case management techniques and skills for working with offenders.

Valuable Services Other than Case Management

As discussed in Chapter V, SCA projects provided a variety of services to participants in addition to case management. Of interest in the context of system-level changes are those services that grantees newly created or significantly expanded as part of their SCA projects. Conversations with project staff members revealed several types of services or components of services that seemed to be exemplary contributions of the SCA grant and which had the potential for lasting beyond the period of the grant.

- *Employment assistance and training and work opportunities.* These services became well integrated into pre- and post-release service delivery. Most projects developed formal partnerships to deliver work readiness and employment related services and noted the importance of working with employment partners to identify offender-friendly employers as a way of overcoming the bias so often experienced by offenders seeking work. Other projects developed their own work readiness classes that helped participants prepare for the challenges of finding work. Half the projects also provided participants with formalized training and/or paid work experience, which both staff members and participants valued highly for the immediate income and the long-term skill and experience-building it provided.

- *Cognitive behavioral therapy-based services.* These services, often new, were typically highly valued. Several projects, including those in Kentucky, Marion County, Oklahoma, San Francisco, and South Dakota, had classes employing cognitive behavioral approaches. Numerous projects also incorporated these methods into substance abuse treatment services. Staff members were realistic about the level of change they expected employing these methods, noting that these approaches often did no more than "force participants to stop and look at themselves and what they were doing." Even this minor change, however, went a long way.

- *Mental health services.* Engaging in mental health services and staying on medication is often quite challenging for offenders without additional moral and financial support. Although changes in the availability of these services were more limited, a few projects endeavored to make this important feature of reentry a little less challenging. The project in New Hampshire, for instance, paid for prescription medication, while several projects helped to connect participants with mental health system providers or provided in-house therapy to participants, often in conjunction with substance abuse treatment services.

- *Pro-social services.* Services such as family reconnection services and mentoring programs provided much-needed support to participants while holding them accountable. Project staff members noted that such services were particularly crucial for many participants who had burned bridges with family members and needed a facilitated process for making repairs. In response, some projects held various pre- and post-release family reunification events and involved family members during pre- and post-release case planning. As an alternative, others employed peer support specialists, who were themselves formerly incarcerated, to serve as mentors and aids in the reentry plans of their participants.

Employing Evidence-Based Service Planning

Overall, SCA grantees made significant strides in using evidence-based risk and needs assessments in service planning. Commonly, grantees used some form of risk assessment tool prior to the grant; however, at least one grantee used SCA funds to purchase risk assessment tools and several other grantees used grant funds to purchase or develop additional needs-based assessment tools to supplement existing risk assessments and better identify individual needs and barriers. Many grantees also used grant funding to train their staff members on the use of these various assessment tools, and some instituted additional points at which SCA project staff members would assess participants. For example, they would assess at the point of project enrollment and sometimes during program participation, rather than simply using assessment scores from assessments administered previously by jail or prison staff.

The SCA projects used the assessment results to create service plans appropriate to participants' needs, learning styles, and barriers. While changes to pre-release services other than case management may have been less extensive than changes to post-release services, the use of assessments in pre-release service planning, where it occurred, brought about important effects in the ways services were delivered to participants inside jails and prisons. In one state's system, for instance, participants were housed by "custody level" (i.e., minimum through maximum security), which was tied to an offender's sentencing and behavior while in prison rather than his or her assessed risk level. Furthermore, pre-release services were typically handled via recommendations by prison staff members, and were often very "cookie-cutter" and not particularly customized to need. As a staff member from another project explained, pre-release services before SCA were more aptly termed "jail projects" than "reentry projects." After the start of the SCA grant, however, project staff members began to weigh in and help customize the slate of services offenders might receive pre-release, ensuring that services were customized to individual risk-level and needs.

Changes to post-release service planning were more extensive than changes to pre-release service planning and also made use of evidence-based practices. For most sites, the additional use of assessment tools helped case managers more frequently customize a participant's post-release services to his or her individual needs — both the slate of services and their sequencing.

Growth of Reentry Partnerships

Partnerships were crucial for the operation of SCA projects since grantees lacked the capacity to provide most project services themselves. The Solicitation for Grant Announcements expected that this would be so and therefore called for grantees to grow and develop project partnerships. SCA grantees took to heart this call to action. In many cases, SCA project partnerships evolved

out of existing relationships grantees had with certain providers, although sometimes grantees also sought out new partnerships to deliver the full range of SCA services.

The SCA grants facilitated the growth of reentry-oriented partnerships by increasing grantees' communication with project partners and strengthening interagency coordination. Interviews with project staff members indicated that all but one SCA grantee held meetings with partner organizations on at least a monthly basis. The meetings, as well as the more frequent inter-personal communications, encouraged staff members at differing levels to discuss policy and to coordinate service delivery. A few staff members mentioned that regular communication was not just important for effective project operations and service delivery, but that it also built stronger partnerships that offered better referrals for each of the partner organizations in the future.

Project Continuation and Sustainability

The ability of these projects to sustain themselves after their BJA funding has ended is an important implementation study question but one that is difficult to answer, given that most grantees we studied have ample BJA funding remaining.

This implementation study, however, has the benefit of learning from three SCA projects (of the 10 we studied) whose BJA grants were expiring at the time we conducted our data collection. Although their specific stories vary, two of the three communities were able to draw on new grant funding from other federal agencies to continue serving reentering offenders in a similar way. Although the service mix was different and (because the new funding was not as generous as the old) somewhat diminished, at least a modicum of case management and needs-based service planning could be maintained. The third community was less fortunate, in that it could not secure new funding. Nonetheless, jail personnel made use of the partnerships they had grown under SCA and continued to refer participants to the various partner providers they had worked with under the grant; unfortunately, they were doing so without the benefit of coordinated case management or the guarantee of funded service delivery.

The other seven grantees had all received funding from BJA through 2014, which is well after the study's data collection occurred. Because of this, staff members' discussions of their projects' long-term sustainability were likely premature. Still, the study team found these conversations enlightening, with the different SCA projects falling along a continuum of certainty about their futures without SCA funding, and with several solutions to the problem of sustainability emerging.

Some projects indicated that they were avidly interested in pursuing alternative grant funding for the post-SCA era and at least one had already begun researching other grant opportunities. The

SPR

others were less sure how they would proceed, but acknowledged that any funding provided by the county or state agencies currently involved in administering their projects would not likely match the amount provided through the grant. The tenor of these conversations with grantee staff members suggested that the real decision before them was deciding which components of their projects were worth continuing (and which would need to be cut), or whether there were other strategic ways to cut costs. That said, these solutions may not be the only ones possible. For some of the larger grantees, for instance, the size of the SCA grants is relatively small compared to the parent agencies' overall budgets. While there are likely competing needs within these larger agencies, the agencies are potentially capable of funding the projects — or components of them — if the benefits can be shown to be great enough.

Cultural Shifts

Although permanent changes in system-wide structures and policies may be difficult to point to at this stage in the evaluation, project staff members reported that the implementation of SCA projects resulted in fundamental "cultural shifts," or changes in mindset among many of the staff members of the grantees and their partner agencies. These shifts made staff members friendlier to the ideas and approaches promoted under the SCA grants. As staff members described it, individuals learned to downplay the prevailing view of their role as one of merely "enforcing regulations" and came to embrace a rehabilitative philosophy designed to support offenders throughout the reentry process using evidence-based practices.

This transformation was probably most significant among community corrections staff members, especially when these individuals served as SCA project case managers. For example, one SCA staff member noted that community corrections staff members came to see the work that they do with offenders as something more like a social services job and less like one focused on surveillance and policing. The challenge was learning to engage with offenders in different ways than they had previously and to learn to use risk assessment tools as a vehicle for directly communicating with offenders about their needs rather than as a screening tool.

This transformation was also apparent among community corrections staff members who were not SCA project case managers, and among partner staff members in the jails and prisons. A staff member from one project, for example, explained that correctional system staff members learned through the SCA project that the reentry process needed to start within the correctional facility and not within the community upon release. Because these correctional system staff members needed to work closely with post-release case managers to ensure that participants were ready for the transition to the community, they began to see that they were part of the solution. As

someone from a project put it, a transformation occurred that could be described as someone going from "jailer" to "change agent."

One reason it may be important for criminal justice system staff members to undergo this change in mindset is that it could have positive impacts on offender outcomes (which is the topic of the larger impact study). An intermediate outcome, however — one that is more germane to this report — is that it could change offenders' impressions of probation and parole. Offenders in the focus groups we conducted spoke about instances in which probation or parole officers liked to "show who's boss," were judgmental about a participant's offense, or provided only the most limited help with project referrals. In contrast, project participants nearly always described their SCA case managers positively, noting that they listened to their concerns and supported them in their various post-release efforts. To be clear, SCA projects are not proposing that the traditional criminal justice system approach is wrong or always inappropriate. As a staff member from one grantee noted, public safety and security "will always be the number-one priority." This new approach is merely offering up a carrot in addition to the existing stick.

Bringing about this cultural shift among staff members was not a simple process, however; it often involved confronting cynicism and skepticism and it took a great deal of time and effort. According to one SCA project staff member, some correctional department staff members viewed the types of change being promoted by the SCA project as a "waste of time" since offenders would simply come back into the system eventually anyway. They were also not receptive to the "warm and fuzzy" approach that they felt was being promoted by the SCA projects. Staff members from several different projects commented on this general reluctance by correctional system staff members to adopt these newer case management approaches.

What seemed to work best was a combination of regular communication, engagement in the SCA project planning process, and staff training. One staff member discussed having numerous meetings and discussions around the project and engaging reluctant correctional system staff members in the project decision-making and design process. Another staff member discussed the value of training in the cognitive behavioral therapy techniques and methods grantees expected case managers to use. Training gave these staff members the opportunity to understand the new methods and to notice that they changed the way they could work with offenders. Frequent meetings with partner organizations also helped, because it offered these more reluctant staff members the ability to learn new approaches to providing services and because it provided them with tangible, known referral options and opportunities to engage in discussions about service delivery.

SPR

This cultural shift is far from complete in the communities involved and conversations with project staff members suggest more work may be needed. One correctional system staff member, for instance, conveyed only lukewarm praise for the local SCA project, at least in part because she viewed it as too coddling. Furthermore, depending on the degree of reentry work that preceded the grant, SCA projects are in very different places in this transformative process. Projects with stronger, prior reentry programming and more active task forces or coalitions often achieved a greater degree of transformation. Newer SCA projects have generally experienced less change, even if it is often more visible. Regardless of how far along SCA projects are in changing local attitudes around reentry services, the transformation is an important one with an impact that will likely last well past the end of any formal funding.

REFERENCES

Carson, E. Ann and William J. Sabol. *Prisoners in 2011*. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, December 2012, NCJ 239808.

Ditton, Paula M. *Mental Health and Treatment of Inmates and Probationers*. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, July 1999, NCJ 174463.

Dowden, Craig, and S. L. Brown S. L. "The Role of Substance Abuse Factors in Predicting Recidivism: A Meta-analysis." *Psychology, Crime and Law* 8 (2002): 243-264.

Glaze, Lauren E. and Erika Parks. *Correctional Populations in the United States, 2011*. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, November 2012, NCJ 239972.

Guerino, Paul, Paige M. Harrison, and William J. Sabol. *Prisoners in 2010.* Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, December 2011, NCJ 236096.

Hammett, Theodore M., Cheryl Roberts, and Sofia Kennedy. "Health-Related Issues in Prisoner Reentry." *Crime and Delinquency* 47 (July 2001): 390-409.

Langan, Patrick A., and David J. Levin. Recidivism of Prisoners Released in 1994. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, June 2002, NCJ 193427.

Lattimore, Pamela K., Kelle Berrick, Alexander Cowell, Debbie Dawes, Danielle Steffey, Stephen Tueller, and Christy A. Visher. *Prisoner Reentry Services: What Worked for SVORI Evaluation Paricipants?* Research Triangle, NC: RTI International, 2012.

La Vigne, Nancy G. and Vera Kachnowski. *A Portrait of Prisoner Reentry in Maryland.* Washington, DC: Urban Institute, 2003.

Minton, Todd D. *Jail Inmates at Midyear 2010—Statistical Tables*. Washington, D.C.: U.S. Department of Justice, Bureau of Justice Statistics, April 2011, NCJ 233431.

Petersilia, Joan. *When Prisoners Come Home: Parole and Prisoner Reentry*. New York: Oxford University Press, 2003.

Pew Center on the States. *State of Recidivism: The Revolving Door of America's Prisons.* Washington, DC: The Pew Charitable Trusts, 2011.

Redcross, Cindy, Megan Millenky, Timothy Rudd, and Valerie Levshin. *More than a Job: Final Results from the Evaluation of the Center for Employment Opportunities (CEO) Transitional Jobs Program.* New York, New York: MDRC, 2012.

Travis, Jeremy, Amy L. Solomon, and Michelle Waul. *From Prison to Home: The Dimensions and Consequences of Prisoner Reentry*. Washington, DC: Urban Institute, 2001.

SPR

Travis, Jeremy and Sarah Lawrence. *Beyond the Prison Gates: The State of Parole in America.* Washington, DC: Urban Institute, 2002.

Walter, Marc, Gerhard Wiesbeck, Volker Dittmann, and Marc Graf. "Criminal Recidivism in Offenders with Personality Disorders and Substance Use Disorders over Eight Years of Time at Risk." *Psychiatry Research* 186 (April 2011): 443-445.

Appendix A

SCA Project Profiles

ALLEGHENY COUNTY (PA) DEPARTMENT OF HUMAN SERVICES

About the Grantee and Its Partners

Grantee Organization: Allegheny County Department of Human Services (DHS) is the grantee on behalf of the Allegheny County Jail Collaborative for the Allegheny County Reentry Initiative.

Key Partners: The primary partnership of the Allegheny County Jail Collaborative is comprised of leadership from the DHS, the Allegheny County Jail (ACJ), the Fifth Judicial District Court of Common Pleas (Criminal Court), the Allegheny County Health Department, and Allegheny Correctional Health Services, Inc. (ACHS). Additional partners include various community service agencies, which provide specialized services.

What is the Second Chance Act Program?

How are SCA Funds Used? The SCA funds support: DHS Reentry Specialists, who provide service coordination to participants in the jail both pre-release and post-release, screening for SCA eligibility, and assessments for in-jail and transition planning; a Criminal Court Reentry Probation Officer, who assists with pre-release transition planning for SCA reentry participants; the ACJ Reentry Center, where many classes take place and whose staff oversee pre-release services; and ACHS, which conducts assessments for service planning and provides group therapy for drug and alcohol addiction. Some SCA reentry funds also support secondary partners, such as the Urban League for job readiness training and Goodwill for job readiness and placement services.

Intervention Being Evaluated with the Impact Study: The impact study is measuring the full range of SCA reentry services, including Reentry Specialists' service coordination and a Family Support Specialist who assists with family classes/reunification; assessments and needs-based service planning; and priority of services for pre-release and post-release classes and workshops supported with SCA funds. (Control group members can access these services if space is available).

Eligibility and Intake

Eligibility for SCA: Men and women serving a county (jail) sentence with at least five months left before release who are assessed as medium or high risk.

Enrollment Process: Individuals with at least five months remaining on a county jail sentence are administered the three-question proxy: age at first arrest, number of arrests, and current age. Individuals who are flagged as medium or high risk are invited to attend an SCA Reentry Initiative orientation. SCA enrollment occurs only pre-release and is voluntary.

Pre-release and Transition Services

Service Planning: After SCA reentry program enrollment, a full assessment is used (LSI-R, plus additional questions) to develop a Phase I (in-jail) plan of classes the individual should take while incarcerated. Then, 60 days prior to release, a Phase II LSI-R assessment is administered to begin transition and community planning.

Pre-release Case Management: A Reentry Specialist (four Reentry Specialists work full-time) meets at least once every two weeks with each SCA participant. Caseloads range from 30 to 50.

Other Services Available: SCA participants have priority for the services listed below (but others, including control group members, may also access them if space is available).

- **Cognitive-Behavioral Therapy and Mental Health Services**: Mercy Behavioral Health provides Thinking for a Change curriculum, which consists of 22 total classes that take place twice per week for about 1.5 hours per session.

- **Education and Training**: GED classes are provided by Allegheny Intermediate Unit (not SCA funded).

- **Employment Assistance**: An 11-week life skills and job readiness class (RAMP) is provided by Urban League (partially funded with SCA funds); classes meet one hour per week.

SPR

- **Pro-Social Services**: Parenting classes are provided by Family Support Specialists (one FTE is supported with SCA funds) and Inside Out Dad is offered by Family Services. Family Services also provides support to the families of incarcerated men and women, coordinates telephone calls home to family each week for participants, and coordinates contact visits with children and family, to build stronger family ties for post-release. Life skills training is included as part of RAMP. Pre-release mentoring can be arranged by Christian Associates (not SCA funded).

- **Substance Abuse Treatment**: 12-week group sessions are offered using cognitive behavioral therapy. Classes provided by ACHS are offered four days/week for three hours/day.

Post-release Services and Case Closure

Service Planning: Guided by the Phase II LSI-R assessment, which is administered just prior to release, and updated thereafter as needed.

Post-release Case Management and Supervision: Reentry Specialists will make contact with an individual no later than one day after discharge from jail and at least monthly thereafter for up to a year post-release to provide transition and community supports. SCA reentry participants also are assigned to a community probation officer (not funded by SCA), who meets with clients once every two weeks.

Other Services Available: Services of a variety of types are available in the community. Some of these are listed below.

- **Education and Training**: GED preparation is provided by Allegheny Intermediate Unit (not SCA funded). Springboard Kitchens (also noted below) provides vocational training.

- **Employment Assistance**: While in jail, participants can be enrolled by Springboard Kitchens, Goodwill, or other providers for job readiness training, vocational training, and life skills training, and, post-release, they may enter that particular employment program from the community. (Goodwill receives some SCA funding).

- **Pro-Social Services**: Family Services of Western Pennsylvania provides parent education and relationship development services (not SCA funded). Mentoring services for women can be provided by Pennsylvania Organization for Women in Early Recovery (not SCA funded).

- **Substance Abuse Treatment**: ACHS provides an aftercare group; other services are available from other community providers.

- **Supportive Services**: SCA funds provide support for clothing, groceries, and transportation assistance.

Those on probation can also visit the Probation Office's Day Reporting Centers for a variety of services in a single location, including cognitive behavioral therapy aftercare, job search assistance, and GED classes.

Case Closure: Cases are closed at 12 months after release, if there has been no contact for 60 days, or if the client no longer wishes to receive services.

KENTUCKY DEPARTMENT OF CORRECTIONS

About the Grantee and Its Partners

Grantee Organization: Kentucky Department of Corrections (KYDOC) has the grant, which is managed by the Department's Reentry Branch.

Key Partners: KYDOC contracts with various partners providing specialized services. These include Kentuckiana Works, which in turn subcontracts with Goodwill; the Louisville Metro Reentry Task Force; Big Brothers Big Sisters; the Shawnee and Newburg Justice Reinvestment (JRI) Project; and others.

What is the Second Chance Act Program?

How are SCA Funds Used? SCA funds KYDOC's Reentry Parole Officers (RPOs), who provide case management and parole supervision for SCA participants; they have significantly smaller caseloads than regular parole officers (POs). Partial funding is also used to support KYDOC Reentry Coordinators, who are housed in institutions and who conduct intake for SCA and discuss home placements with those soon to be released. SCA also funds some pre-release services (but these services are available to all inmates, not just SCA participants). It also funds Kentuckiana Works (Goodwill), which provides job readiness training; Louisville Metro Reentry Task Force, which provides service coordination and partners for family engagement sessions; Big Brothers Big Sisters, which provides mentoring for the children of offenders; the JRI Project, which provides resettlement assistance to those relocating to the Shawnee and Newburg areas; Transitions, which provides emergency assistance; Safe Locations, which provides emergency housing; Emergency Services Fund for indigent offenders; and Integrating Art into Justice Reinvestment Opportunities, which provides art sessions for children of offenders.

Intervention Being Evaluated with the Impact Study: The evaluation captures the impact of being assigned an RPO rather than a regular PO. No other services are restricted or prioritized to SCA participants.

Eligibility and Intake

Eligibility for SCA: Targets men and women released to the Louisville metro area who are not sex offenders, are assessed as moderate or high risk, and are expected to be released within 90 days ("very high-risk" offenders are excluded from participation, because KYDOC did not feel the RPO intervention was appropriate for those offenders).

Enrollment Process: Enrollment occurs just prior to release, and is conducted by Reentry Coordinators. Enrollment is restricted to those just about to be released.

Pre-release and Transition Services

Service Planning: LS/CMI is used to identify pre-release needs for all inmates (not just SCA participants), to help with pre-release programming. Every offender has a service plan before going before the Parole Board.

Pre-release Case Management: There is no SCA-specific pre-release case management, as SCA enrollment occurs just before release. KYDOC caseworkers conduct assessment and provide case management and service planning to all inmates, although caseloads are very large.

Other Services Available: Enrollment occurs just prior to release, so all pre-release classes are available regardless of whether someone will eventually become an SCA participant. Nonetheless, some of these services are partly SCA funded.

- **Cognitive/Behavioral and Mental Health**: KYDOC offers Moral Reconation Therapy and Thinking for a Change, a 12-week program.

- **Education and Training**: KYDOC offers a variety of academic and vocational training in the institutions.

- **Pro-Social Services**: KYDOC offers Inside Out Dads, designed to help fathers learn parenting skills, and the female population receives a parenting program for mothers. Big Brothers Big Sisters provides mentoring services to the children of incarcerated individuals.

SPR

- **Employment Assistance**: KYDOC offers New Directions, which includes a three to four-week component on job readiness and life skills.

- **Substance Abuse Treatment**: The KYDOC Substance Abuse Program (SAP) is available to all inmates.

Post-release Services and Case Closure

Service Planning: Reentry Coordinators work with all inmates to prepare them for release; RPOs help identify needed services through the LS/CMI.

Post-release Case Management and Supervision: SCA participants are assigned special, SCA-funded RPOs. Frequency of reporting is no different than for controls assigned regular POs (once or twice a month, depending on risk status), but RPOs have smaller caseloads, which may make for more personalized attention. Because RPOs serve as SCA participants' parole officers, reporting is mandatory.

Other Services Available: RPOs may refer clients to the programs below, among others. However, there is no priority of service for SCA participants, even for services that are partly SCA funded.

- **Employment Assistance**: Goodwill, partly funded by SCA through Kentuckiana Works, provides job readiness and job placement assistance, including Reentry by Design, a special two-week program for the formerly incarcerated.

- **Pro-Social Services**: Mandatory for all medium and high-risk parolees (whether or not an SCA participant) is the Parolee Orientation Rehabilitation Training Assimilation, a life skills program. SCA funds Big Brothers Big Sisters to provide mentoring to children of inmates.

- **Substance Abuse Treatment**: SAP is available to inmates and parolees, but typically individuals will not be assigned to an RPO while they are in SAP. KYDOC also refers parolees to providers to deliver outpatient services. KYDOC refers probationers to community-based substance abuse treatment providers.

- **Supportive Services**: RPOs provide bus vouchers to participants who ask for them. SCA also helps fund the Safe Location program, which provides emergency housing.

Case Closure: SCA participants are transferred to a regular PO six months after release (for those who still have time remaining on parole supervision).

MARION COUNTY (OR) SHERIFF'S OFFICE

About the Grantee and Its Partners

Grantee Organization: The SCA project is housed within the Parole/Probation division of the Marion County Sheriff's Office (MCSO).

Key Partners: MCSO coordinated the development of Student Opportunity for Achieving Results (SOAR). Key partners include the following: Chemeketa Community College, which provides employment specialist for the employment component of SOAR and provides classroom space for SOAR; Marion County Health Department, which provides substance abuse services as part of SOAR and counselors who serve as mentors to SOAR participants; and Mid-Willamette Valley Community Action Agency, which provides staff for the cognitive behavior component of SOAR and operates the Quest for Change House.

What is the Second Chance Act Program?

How are SCA Funds Used? Partial funding is provided for "reach-in" classes (available to all in the jail within 6 months of release); the SOAR class; Quest for Change House (a living facility for SOAR participants who need housing); the Pine Street Resource Center (a drop-in facility for offenders, open to anyone); and substance abuse treatment, and employment and mentoring services available through SOAR. The SCA grant funds none of these exclusively.

Intervention Being Evaluated with the Impact Study: The SOAR class and the housing provided in Quest for Change (for those in SOAR who need housing assistance).

Eligibility and Intake

Eligibility for SCA: Targets those with substance abuse issues who are released to Marion County, were convicted of a Measure 57 qualifying crime (a property crime), and who are medium or high risk. Enrollment predominantly occurs just prior to release, but the project will recruit post-release if it is having difficulty enrolling enough participants to make up a new SOAR cohort.

Enrollment Process: Enrollment typically occurs weekly during pre-release "reach-in" classes to fill the 25 slots for the 12-week SOAR class, but occasionally the SCA project staff will also recruit and enroll individuals based on a list of potentially eligible inmates nearing release. Additionally, recruitment and enrollment will sometimes occur for someone already released.

Pre-release and Transition Services

Service Planning: There is no pre-release service planning as part of SCA.

Pre-release Case Management: There is only very light touch pre-release case management, as SCA enrollment occurs just before release.

Other Services Available: "Reach-in" classes are partly funded with SCA funds, but attendance is not restricted to SCA participants. "Reach-in" classes occur once a month at each of the five prisons from which MCSO recruits. There are six reach-in topics, and each session focuses on one topic. All incarcerated individuals must attend at least one reach-in within the final six months, and anyone can attend any class. Each session lasts about an hour.

- **Cognitive-Behavioral Therapy and Mental Health Services**: One of the reach-in topics focuses on promoting behavioral change.

- **Education and Training:** Educational services are typically available at institutions, but are not SCA funded.

- **Employment Assistance**: Job preparedness is among the reach-in topics.

- **Pro-Social Services:** Fostering healthy relations and obtaining housing are among the reach-in topics.

SPR

Post-release Services and Case Closure

Service Planning: Uses LS/CMI, Oregon Case Management System, Rhode Island Change Assessment, Bio-Psych-Social, TCU Criminal Thinking scale, TCU Drug Screen, and Michigan Alcohol Screening. Since the same SOAR classes are mandatory for all SOAR participants, the assessments do not influence service planning very much.

Post-release Case Management and Supervision: A pre-release parole officer makes first contact post-release and serves as case manager until the start of the SOAR class (which can be a month or more after release). Each participant will also usually have a one-on-one with a substance abuse counselor and must attend a pre-SOAR orientation with a mentor. Once SOAR starts, the SOAR case manager takes over, and will meet with participants as needed. After SOAR ends, the individual is transferred to a regular PO.

Other Services Available: Each SOAR class starts with around 25 participants. Classes last for 12 weeks and require full-time attendance (M, T, R, F from 8:30 to 5), with a leisure activity from 9 to 12 on W morning and a mentoring meeting W afternoon. There are also family group sessions T and R evenings. After SOAR, there are 12 weeks of "aftercare" classes, in 1-2 hour sessions (two per week). SOAR activities are as follows:

- **Cognitive-Behavioral Therapy and Mental Health Services:** Modules on cognitive change include ones entitled Motivation, Changing Offender Behavior, and Dependable Strengths Articulation (for building self-esteem).

- **Employment Assistance**: Modules for job preparation include resume basics, job search basics, soft skills, and career information.

- **Pro-Social Services:** Modules on good parenting include MATRIX Family Education and Parenting Inside and Out. Life skills topics include sessions entitled Healthy Leisure, Ideas for Better Communication, and Successful Transition and Community Integration. Group mentoring is a part of SOAR.

- **Substance Abuse Treatment**: Six weeks of non-residential alcohol and drug treatment is part of SOAR.

- **Supportive Services:** Quest for Change Housing is available, if needed.

Case Closure: Completion of the program is defined as completing all three months of SOAR. Reasons for dropping out can include getting a job (employment is typically not compatible with SOAR's full-time nature).

CITY OF MEMPHIS (TN) DIVISION OF PUBLIC SERVICES AND NEIGHBORHOODS

About the Grantee and Its Partners

Grantee Organization: The City of Memphis's Division of Public Services and Neighborhoods (DPSN) was the SCA grantee, operating the Second Chance Back on Track (BOT) Program.

Key Partners: The primary partners included DPSN, which oversaw the program and provided post-release case management, and Shelby County Division of Corrections (SCDOC), which provided pre-release services, including case management. Memphis Area Transit Authority (MATA) provided bus passes. The Workforce Investment Network (WIN) was viewed as a central partner in that it provided job readiness training by referral to many SCA participants, but it did not receive SCA funds. Other partners provided specialized assistance by referral, including HopeWorks, which provided GED assistance; the Cocaine Alcohol Awareness Program (CAAP), which provided post-release outpatient treatment; and various transitional housing providers.

What is the Second Chance Act Program?

How were SCA Funds Used? The grantee, DPSN, used SCA funds to provide Workforce Development Specialists (WDSs), who provided post-release case management services and job readiness training. Additional funds were provided to SCDOC to partly fund pre-release case management, MATA for bus vouchers, and CAAP for substance abuse treatment.

Intervention Being Evaluated with the Impact Study: Not applicable; this grantee is not participating in the impact study.

Eligibility and Intake

Eligibility for SCA: Served men and women with at least one felony conviction and 60-90 days remaining on their sentences who were assessed as high risk.

Enrollment Process: SCDOC identified those eligible and gave them an orientation to BOT. Those who were interested in enrolling were asked to submit a Letter of Interest form. Once enrolled, they signed a "Back on Track Re-Entry Program Participation Agreement," by which the participant agreed to comply with project requirements.

Pre-release and Transition Services

Service Planning: Offenders were administered the LS/CMI to help guide pre-release service planning, though no formal pre-release service plan was developed. As the release date neared, the DSPN WDSs met with SCA participants to begin developing a post-release service plan.

Pre-release Case Management: Case management was provided to SCA participants by SCDOC.

Other Services Available: Pre-release services were largely pre-existing under SCDOC's 3Rs Project (Rehabilitate, Renew, and Reconnect) and were available to all inmates without regard to SCA participation. These services included those listed below.

- **Cognitive Behavioral Therapy and Mental Health Services**: The project used funding to provide individual mental health behavioral assessments through a contracted doctor. SCDOC provided Moral Reconation Therapy and workshops on understanding the impacts on victims and anger management.

- **Education and Training**: GED classes were available.

- **Employment Assistance**: TN Department of Labor staff visited correctional facilities to give an overview of American Job Center services.

- **Pro-Social Services**: Inside Outside Dad provided advice on being a responsible father and SCDOC provided additional programming to promote healthy relationships and encourage family conferencing.

- **Substance Abuse Treatment**: A Drug and Alcohol Unit provided services to those who needed them.

SPR

Post-release Services and Case Closure

Service Planning: Post-release service planning began just prior to release, as noted above. SCA participants had to report to DPSN within 72 hours of release for a panel interview, which was a structured exchange between the participant and three panelists who helped to further refine the service plan. The participant later attended a full-day BOT orientation, which provided an introduction to job readiness services and had sessions focused on team building, conflict resolution, decision making, and other topics. The mayor of Memphis often attended the BOT orientation and personally greeted participants.

Post-release Case Management and Supervision: Post-release case management was provided by DPSN WDSs, who met regularly with participants by appointment.

Other Services Available: The services listed below were available to participants.

- **Education and Training**: GED classes were available in the community from a variety of sources.

- **Employment Assistance**: WDSs provided job readiness and life skills training to participants on their caseloads; additional services were available by referral to WIN.

- **Substance Abuse Treatment**: Required for about half of SCA participants and offered through CAAP.

- **Supportive Services**: SCA participants received MATA bus vouchers and could also receive assistance with food or clothing. A very small number were provided with transitional housing.

Case Closure: A participant was considered to have completed the program after receiving 12 months of pre-release and post-release services. Participants were also followed for one additional year, and could receive additional case management or referrals to needed services.

NEW HAMPSHIRE DEPARTMENT OF JUSTICE

About the Grantee and Its Partners

Grantee Organization: The New Hampshire Department of Justice (DOJ) managed the grant.

Key Partners: Key partners included the New Hampshire Department of Corrections (DOC), which provided case managers and assisted DOJ with project coordination; MHM Services, which provided psychiatric services; the National Alliance on Mental Illness (NAMI), which provided SCA participants with paid peer mentors; Goodwill Industries of New England, which provided work readiness and placement assistance; Child and Family Services (CFS), a non-profit organization that administered assessments for substance abuse; and the New Hampshire Charitable Foundation, which provided a financial match and assisted with project design.

What is the Second Chance Act Program?

How were SCA Funds Used? SCA funds were used to fund the partners and services listed above, including project management and coordination (DOJ and DOC), case management (DOC), health services (MHM), the coordination and salaries of peer mentors (NAMI), job readiness training (Goodwill), and substance abuse assessment (CFS). Grant funds were also used to provide staff training, such as in case management skills, conducting and interpreting assessment results, motivational interviewing, and cognitive behavioral therapy.

Intervention Being Evaluated with the Impact Study: Not applicable; this grantee is not participating in the impact study and is not currently in operation.

Eligibility and Intake

Eligibility for SCA: Served men and women coming out of state prisons to parole supervision in Merrimack County, who had more than six months to serve on their parole and were assessed as high risk.

Enrollment Process: Typically, applicants were referred to SCA by the offenders' parole officer. Enrollment exclusively occurred post-release.

Pre-release and Transition Services

Service Planning: This project enrolled participants after their release, so formal pre-release service planning did not occur. Case managers occasionally advised offenders pre-release during outreach.

Pre-release Case Management: Pre-release case management was not provided as part of SCA.

Other Services Available: This project enrolled participants after their release, so it did not provide or coordinate pre-release services.

Post-release Services and Case Closure

Service Planning: After an individual enrolled in the SCA project, the LSI-R was used to assess the participant's service needs (unless the participant had results from a recently administered LSI-R assessment already on file). Those with evidence of substance abuse were also referred to CFS for a Global Appraisal of Individual Needs (GAIN). An LSI-R assessment was re-administered every six months to update the service plan.

Post-release Case Management and Supervision: An SCA participant met with a DOC case manager (someone different from the participant's PO) at least once a month, but, depending on the participant's needs, as often as once a week. Sessions generally lasted about an hour and were focused on service planning and service coordination.

Other Services Available: The services listed below were available to participants.

- **Cognitive-Behavioral Therapy and Mental Health & Health Services**: MHM had a contractual relationship to provide funds to write and coordinate the filling of prescriptions, including prescriptions for psychiatric conditions.

SPR

- **Education and Training**: The case manager referred participants who needed this service to educational providers available in the community.

- **Employment Assistance**: Goodwill had a contract to provide a job developer who met individually with participants as often as weekly to provide job preparation assistance and job leads.

- **Pro-Social Services**: Case managers referred all interested SCA participants to NAMI for assignment to a peer support specialist, or mentor. These mentors provided a wide range of support and encouragement and were viewed as very valuable contributors to a participant's eventual success. Participants also generally received a review of financial assistance services, provided by Concord Hospital.

- **Substance Abuse Treatment**: Case managers referred to a range of treatment services available in the community. One of the case managers was a licensed alcohol and drug counselor and ran support groups for participants.

- **Supportive Services**: SCA case managers provided bus passes for participants who needed them. NAMI peer mentors also assisted participants by providing them with transportation to run errands or get to appointments.

Case Closure: A participant was considered to have exited the program 12 months after enrollment.

OKLAHOMA DEPARTMENT OF CORRECTIONS

About the Grantee and Its Partners

Grantee Organization: ODOC operates SCA through the Oklahoma Community Corrections Center (CCC), one of
six CCCs in the state where inmates (SCA participants and others) go to serve the last months of their sentences
and prepare for release.

Key Partners: SCA contracts with OK Career Tech, which provides career training and job readiness training pre-
release and post-release for SCA participants. Other partners include COPE, which offers behavioral counseling;
TEEM, an interfaith non-profit that provides education, job training, and social services; and HOPE, which
provides outpatient services for participants with substance abuse or mental health issues. HOPE is also provided
funding for a Community Specialist who provides case management to participants without probation or parole.

What is the Second Chance Act Program?

How are SCA Funds Used? SCA funds three ODOC Program Specialists (for pre-release case management), a
Transition Coordinator (who engages in transition planning), a special PO and a Community Specialist (for
providing post-release case management to those with and without supervision requirements, respectively), and a
full-time Program Coordinator to oversee the delivery of the SCA funded services. SCA also provides vouchers
for supportive services. Some program slots for job readiness, vocational training, or cognitive behavioral
therapy and substance abuse services are also paid for through SCA.

Intervention Being Evaluated with the Impact Study: The focus of the impact study is on the case management
services and supportive services uniquely available to SCA participants, as well as certain pre-release and post-
release classes for which SCA participants have priority (if space is limited).

Eligibility and Intake

Eligibility for SCA: Targets males who meet these criteria: no sexual offenses, 3.5 to 5 years left on sentence (but
time off reduces this to less than one year to actually serve), scheduled to be released to the Oklahoma City area,
and are moderate to high risk.

Enrollment Process: Recruit from institutions until they have 20 study participants (which make up a cohort).
Then, recruitment stops until the next month. Once enrolled in SCA, participants move to the CCC (along with
others not in SCA who are also preparing for release). Enrolls only at pre-release.

Pre-release and Transition Services

Service Planning: LSI-R is administered at incarceration, and then Starting Point is administered upon enrollment
into SCA. Starting Point reviews criminal and substance abuse history, and assesses the nature of friends,
personality, family, attitudes, education, employment history, and other factors. These results are used to
determine which optional CCC classes the participant should be assigned. As release date nears, participants are
also administered the "Second Chance Act Survey" and a "Transition Assessment" for transition planning.

Pre-release Case Management: ODOC Program Specialists meet with SCA participants about once a week for a
half hour and help determine which optional CCC courses a participant should take. As the release date nears,
offenders meet with a Transition Coordinator, who develops a transition plan.

Other Services Available: A variety of pre-release classes is available at the CCCs. Some of these courses are core
(mandatory) and others are optional, with enrollment for the latter depending on the assessment results. Some of
these services are partly funded by SCA.

- **Cognitive Behavioral Therapy and Mental Health Services**: CCC courses include the following:
Changing Offender Behavior, a core course taught onsite by a program specialist; and Victim Impact Class,
a core course taught onsite by a program specialist. Additionally, ODOC provides onsite mental health
services.

SPR

- **Education and Training.** TEEM provides GED preparation (but this service is not funded by SCA). Vocational training is available upon request (paid for by SCA as pay-for-service).

- **Employment Assistance:** CareerTech provides WorkKeys Assessment and job readiness training to SCA participants as a core course; these services are provided offsite (a bus transports participants to the site).

- **Pro-Social Services:** CCC courses include On My Shoulders, a course designed to promote healthy parenting, and Associates for Success, anger management, financial literacy, and other optional courses.

- **Substance Abuse Treatment**: A 16-week program is provided onsite by COPE for those with an assessed need. (Post-release treatment and aftercare are available through community-based providers).

Post-release Services and Case Closure

Service Planning: Uses the assessment results administered in the CCCs, and, for those released under PO supervision, results from another LSI-R assessment administered within 45 days after release.

Post-release Case Management and Supervision: Case management is provided by SCA-funded Community Specialists (for SCA participants without supervision requirements) or a specially assigned PO (for those with supervision). Meetings occur about once a month.

Other Services Available: Case managers refer to a variety of available services, with priority for SCA participants in some cases.

- **Cognitive Behavioral Therapy and Mental Health Services:** SCA provides mental health services through community providers.

- **Education and Training**. TEEM provides GED preparation (but this service is not funded by SCA). Participants may receive SCA funding for vocational training provided by Career Tech.

- **Employment Assistance:** Can be referred to TEEM for work readiness training, including a six-week Ready for Work class (which is the same course that is available pre-release).

- **Substance Abuse Treatment**: SCA pays on a fee-for-service basis for substance abuse services provided by COPE.

- **Supportive Services**: SCA vouchers can be used to pay for work clothes or tools, transportation, furniture, medical expenses, food, utilities, and rent or housing deposit. SCA will also pay for transitional housing.

Case Closure: Case is considered closed after 18 months of pre-release plus post-release services. However, if parole supervision time remains, the same PO will stay with the participant (but there is no more access to SCA vouchers or other SCA-funded services).

RICHMOND (VA) CITY SHERIFF'S OFFICE

About the Grantee and Its Partners

Grantee Organization: The SCA grant was awarded to the Richmond City Sheriff's Office (RCSO).

Key Partners: Key partners included RCSO, which oversaw the grant and provided pre-release case management; Offender Aid and Restoration (OAR), which provided post-release case management and a variety of pre-release and post-release services; and Goodwill, which provided job readiness services. Additional partners provided specialized services.

What is the Second Chance Act Program?

How were SCA Funds Used? RCSO used the SCA funds to provide pre-release case management services; to fund OAR to provide post-release case management and pre-release and post-release services; and to fund Goodwill to provide pre- and post-release job development services. Additional funds were provided to Rubicon, for temporary housing and substance abuse treatment, and to other partners providing specialized services.

Intervention Being Evaluated with the Impact Study: Not applicable; this grantee is not participating in the impact study.

Eligibility and Intake

Eligibility for SCA: Served men and women at least 28 years of age returning to the City of Richmond and who had at least three months before release and were high risk. Prior to being enrolled, applicants also had to demonstrate that they had a strong willingness to change.

Enrollment Process: The project used the Modified Offender Screening Tool (MOST) and biopsychosocial assessments to assess suitability for SCA. Based on these results and impressions from one-on-one interviews, the case manager enrolled those who were assessed as high risk but had a willingness to change.

Pre-release and Transition Services

Service Planning: SCA case managers developed an individual treatment/recovery plan based on one-on-one interviews with participants and the results from the MOST and the biopsychosocial assessments conducted as part of SCA screening. The program of services was divided into three stages: 1) Getting Ready, which began at SCA enrollment at least three months prior to release and attempted to address a variety of obstacles to successful reentry; 2) Going Home, which began 45 days prior to release and focused on transition planning; and 3) Staying Home, which occurred post-release.

Pre-release Case Management: Case management occurred in at least weekly sessions that began at least three months prior to release. Each month, the participant and case manager jointly reviewed the treatment/recovery plan to assess progress and make modifications.

Other Services Available: A variety of pre-release services were available.

- **Education and Training**: GED preparation courses were available to all those in the institutions.

- **Employment Assistance**: Pre-release work readiness training was a major focus of the SCA program, and was available to SCA participants. SCA additionally funded ServSafe, a food handler certification program.

- **Pro-Social Services**: The SCA project attempted to establish a mentoring component, but by the time mentors were identified, trained, and granted clearance, the grant ended, so this component was not implemented.

- **Substance Abuse Treatment**: Substance abuse services were available to all offenders, based on need.

SPR

Post-release Services and Case Closure

Service Planning: During the Going Home phase, the pre- and post-release case managers would meet jointly with the participant and administer another MOST assessment in order to develop a post-release service plan, which covered the need for substance abuse services and housing assistance and plans for meeting financial obligations, finding work, and attending to mental and physical health needs.

Post-release Case Management and Supervision: OAR case managers were expected to meet weekly with SCA participants.

Other Services Available: The following services were funded by SCA and were available to participants.

- **Employment Assistance**: Work readiness and employment services were key components of the SCA post-release program. Both OAR and Goodwill offered special workshops for the formerly incarcerated. Additionally, SCA paid for 15 work experience slots.

- **Substance Abuse Treatment**: Every SCA participant was expected to attend at least one substance abuse support group each week for the first 90 days after release. Participants also received priority for services at Rubicon, an inpatient substance abuse treatment facility.

- **Supportive Services**: Participants who kept their weekly case management appointments would receive bus tickets. SCA participants could also receive funds for work clothes or supplies. Housing was available for a short duration from Rubicon, for those undergoing substance abuse treatment.

Case Closure: A participant was considered to have successfully completed the program after completing all required services and keeping in contact with the case manager for one year after release.

SAN FRANCISCO (CA) DEPARTMENT OF PUBLIC HEALTH

About the Grantee and Its Partners

Grantee Organization: The San Francisco Department of Public Health (SFDPH) is the fiscal agent for its SCA program, called With Open Arms. However, it subcontracts all services to other organizations, primarily Health Right 360 (HR360; formerly Walden House).

Key Partners: SFDPH contracts for services with HR360, the lead agency, providing case management and service planning services. Other entities receiving SCA funds are the following: Homeless Prenatal Program (HPP), which helps participants to navigate the child welfare system; IRIS Center, an outpatient mental health and substance abuse treatment program; and SF Clean City, which offers work experience (street cleaning) and work readiness training.

What is the Second Chance Act Program?

How are SCA Funds Used? SCA funds are provided to HR360, to provide case management services to SCA participants. Additional funds are used to procure service slots from Homeless Prenatal Program (HPP), which helps participants to navigate the child welfare system and has SCA funding for 12 clients; the IRIS Center, an outpatient mental health and substance abuse treatment program, which was funded to serve 15 clients; and SF Clean City, which provides work experience.

Intervention Being Evaluated with the Impact Study: The focus of the impact study is on the case management services available to SCA participants. Additionally, some participants will avail themselves of the service slots paid for by SCA from the above organizations (though non-SCA participants can be served if space is available).

Eligibility and Intake

Eligibility for SCA: Serves women sentenced to state prison who are released to San Francisco and are high risk.

Enrollment Process: HR360 caseworkers go to prisons and jails weekly to conduct intake. Those they recruit can have as much as a year left on their sentences. The program predominately recruits and enrolls pre-release, but some post-release walk-ins are also served.

Pre-release and Transition Services

Service Planning: Those enrolled in SCA are administered the Correctional Assessment and Intervention System (favored because of its gender-responsive assessment), and are also administered the Addiction Severity Index, the Rhode Island Change Assessment, and a special HR360 needs assessment. These are used to develop a service plan to guide what should happen upon release (there is no specific pre-release service component to this program). This plan is progressively refined as the release date nears, and is updated again within two days of release.

Pre-release Case Management: Case management is conducted by the HR360 case managers, who try to meet weekly with each participant. The central purposes are to build rapport and begin planning for release. Case management strategies include the use of Motivational Interviewing and Dialectical Behavior Therapy.

Other Services Available: The SCA program itself does not provide other pre-release services, and the case managers felt there were limited service offerings routinely offered in the prisons and jails from which they recruit. These options (depending on the institution) include the following:

- **Cognitive-Behavioral Therapy and Mental Health Services**: As noted, HR360 case managers are trained in Motivational Interviewing and Dialectical Behavior Therapy.

- **Education and Training:** GED preparation is available through a correspondence course.

- **Employment Assistance:** Some certificate programs, such as welding and optometry, are available. Institutions also typically offer resume writing and other job preparation classes.

SPR

	Instrument Used to Determine Eligibility	Other Risk/Need Assessments Used to Plan Services
San Mateo County	*Quick Correctional Assessment and Intervention System* (QCAIS)[7]	*Correctional Assessment and Intervention System* (CAIS) *STAR Community Transition Plan Risk Assessment*
South Dakota	*Level of Service Inventory-Revised* (LSI-R)[3]	Community Risk and Needs Assessment is completed by pre-release case manager; the needs assessment portion is based on three factors: (1) "corrective thinking" scores; (2) release housing plans; and (3) employment plans

[1]   The LS/CMI is a proprietary tool available from Multi-Health Systems Inc. It includes eleven sections that measure risk and need factors and also provides a comprehensive case management tool. The tool is described at http://www.mhs.com/product.aspx?gr=saf&prod=ls-cmi&id=overview.

[2]   Probation officers are also given the authority to override an assessment score, if they deem an individual high risk.

[3]   The LSI-R is a proprietary quantitative inventory with 54 items available from Multi-Health Systems, Inc. The inventory can be completed in 30 to 45 minutes. More information is available at: http://www.mhs.com/product.aspx?gr=saf&prod=lsi-r&id=overview

[4]   Eligibility for the SCA project in Oklahoma is limited to individuals who have not escaped or violated parole, and who have abided by prison rules while incarcerated. Thus, although it is targeted to high-risk offenders, the opportunity to participate in the SCA project is also a reward for good behavior while in prison.

[5]   The Offender Screening Tool (OST) was developed and validated in Arizona. The OST contains 42-items related to risk/needs. The OST normally draws on information from a review of relevant file information and an interview with the individual. More information is available at http://www.azcourts.gov/apsd/EvidenceBasedPractice/RiskNeedsAssessment/OffenderScreeningToolOST.aspx.

[6]   The CAIS was developed by the National Council on Crime and Delinquency. The assessment employs a single semi-structured interview to derive assessments of risk, strengths, and needs. The results of the interview are scored by an automated response system that produces an individualized case plan including risk, needs, and supervision strategy classifications, as well as recommendations for evidence-based programs and services. Although the San Francisco grantee specified use of the CAIS to determine risk level and support service planning, the case management contractor stated that all otherwise eligible participants automatically met the criterion of being "high risk."

[7]   The Quick CAIS is an abbreviated version of the CAIS that uses eleven questions on the following topics: employment; address changes in the last year; offender's pattern of associates; age at first arrest; number of prior offenses; conviction for certain offenses; number of prior jail sentences; number of prior periods of probation or parole supervision; whether had probation or parole revoked; percent of criminal behavior related to alcohol abuse; and percent of criminal behavior related to other drug use.