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This report is one in a series from the Cross-Site Evaluation of the FY 2011 Bureau of Justice Assistance Second Chance Act (SCA) Adult Offender Reentry Demonstration Projects (AORDPs). This report describes perceived systems-level outcomes attributed to the SCA funding and strategies for sustaining program operations. Findings are based on information collected in 2015 through in-person, semi-structured interviews with AORDP staff and organizational partners, and telephone interviews conducted in 2016.

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Report Highlights

Perceived Successes

SCA funding appeared to have a lasting impact on the grantee agencies and partner organizations. A number of programmatic and systems-level successes were attributed to the AORDP grants, including

- increased support for reentry work and reentry populations;
- greater collaboration, communication, and information sharing;
- an improved reentry culture within corrections;
- expanded use of evidence-based practices;
- increased capacity of staff and community providers;
- expansion of service provider networks; and
- increased standardization and accountability.

Sustainability

Prospects for sustaining at least some portions of the programs implemented with Second Chance Act (SCA) funding were promising in most grantee sites, with several sites holding up their SCA Adult Offender Reentry Demonstration Project (AORDP)-developed initiatives as models for expansion or replication. Strategies for sustainability included pursuing additional state, federal, and foundation funding; leveraging partnerships to facilitate sustainability; and maximizing Medicaid reimbursement for services. Additional sustainability strategies used by jail-based sites included pursuing county funding and incorporating programming into the jail’s operating budget.

Background

Seven grantees are included in the Cross-Site Evaluation of the Bureau of Justice Assistance Fiscal Year 2011 Second Chance Act Adult Offender Reentry Demonstration Projects. Each project provides comprehensive reentry programming to criminal justice system-involved adults who are under state or local custody and are about to return to the community. Target populations and service delivery approaches vary across sites. Each project, however, addresses the multiple challenges facing formerly incarcerated individuals upon their return to the community by providing an array of pre- and post-release services, including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management are key elements of grantees’ demonstration projects.
Introduction

Prisoner reentry is a pressing national and local policy issue. More than 640,000 individuals were released from state and federal prisons across the country in 2015, and another 10.9 million cycle through the nation’s jails each year. Chances of successful reentry are low: Nearly 68% of people released from state prison in 2005 were rearrested within 3 years of release, and more than 75% were rearrested within 5 years of release. Numerous factors contribute to these high recidivism rates. Most formerly incarcerated individuals return to the community with considerable deficits: limited education, few marketable job skills, no stable housing, chronic health issues, substance abuse needs, and fragile support networks. Some research suggests that successful reentry depends on the degree to which former prisoners’ multiple needs—including housing, drug treatment, mental health services, employment training, job opportunities, and family counseling—are addressed.

The Second Chance Act (SCA) of 2007: Community Safety Through Recidivism Prevention was signed into law in 2008 with the goal of increasing reentry programming for individuals released from state prisons and local jails. Since 2009, the Bureau of Justice Assistance (BJA) has made more than 700 awards to grantees across 49 states to improve reentry outcomes. SCA-funded projects must create strategic, sustainable plans to facilitate successful reentry; ensure collaboration among state and local criminal justice and social service systems (e.g., health, housing, child services, education, substance abuse and mental health treatment, victim services, and employment services); and collect data to measure performance outcomes related to recidivism and service provision. Furthermore, grantees must create reentry task forces—comprising relevant agencies, service providers, nonprofit organizations, and community members—to use existing resources, collect data, and determine best practices for addressing the needs of the target population. In FY 2011, BJA funded 22 SCA Adult Offender Reentry Demonstration Project (AORDP) sites. The National Institute of Justice in FY 2012 funded the Cross-Site Evaluation of the BJA FY 2011 SCA AORDP; RTI International and the Urban Institute are conducting the evaluation. See Appendix A for information describing the seven projects that are the focus of this evaluation.
The cross-site evaluation is focused on 7 of the 22 Adult Offender Reentry Demonstration Project sites and grantee agencies

<table>
<thead>
<tr>
<th>State</th>
<th>Grantee Agencies</th>
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<tbody>
<tr>
<td>California</td>
<td>Women’s Reentry Achievement Program (WRAP), Solano County Health &amp; Social Services Department</td>
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<tr>
<td>Connecticut</td>
<td>New Haven Reentry Initiative (NHRI), Connecticut Department of Correction</td>
</tr>
<tr>
<td>Florida</td>
<td>Regional and State Transitional Ex-Offender Reentry (RESTORE) Initiative, Palm Beach County Criminal Justice Commission</td>
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<tr>
<td>Massachusetts</td>
<td>Boston Reentry Initiative (BRI), Boston Police Department</td>
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<tr>
<td>Minnesota</td>
<td>High Risk Recidivism Reduction Project, Minnesota Department of Corrections</td>
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<tr>
<td>New Jersey</td>
<td>Community Reintegration Program (CRP), Hudson County Department of Corrections</td>
</tr>
<tr>
<td>Pennsylvania</td>
<td>ChancesR, Beaver County Behavioral Health and Developmental Services</td>
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The primary goals of the evaluation are to

- describe the implementation and sustainability of each AORDP project through a **process evaluation**, 
- determine the effectiveness of the programs at reducing recidivism through a **retrospective outcome study** and at reducing criminal behavior and substance use and improving other outcomes through a **prospective outcome study** that includes participants’ self-reported information, and
- determine the per capita program costs of each AORDP project through a **cost study**.

This report describes systems-level outcomes attributed to SCA funding and strategies for sustaining program operations, as documented in the process evaluation component.

**The Legacy of the AORDP Programs**

The AORDP grants appear to have produced a lasting impact on the agencies’ reentry work. This section summarizes the programmatic and systems-level successes that stakeholders attributed specifically to the AORDP grants—successes that can be considered as the “legacy” of the AORDP programs in the systems in which they were implemented.

**Increased Support for Reentry Work and Reentry Populations**

*In all seven of the AORDP sites, stakeholders felt that a key success of their program was increased recognition of their reentry work and broader support for reentry efforts generally.*

In some sites, *increased attention to the population served by the grant was also considered an important outcome.* Grantees cited not only increased word of mouth about their programs (from clients as well as criminal justice stakeholders), but also more formal recognition and support for their work in their communities. Grantees cited the following outcomes:
In Palm Beach County, FL, the increased attention to reentry in the community (as a result of the grant) has enabled program stakeholders to engage housing authorities in discussions about changing local policies that prevent people with felony convictions from ever being eligible for housing.

In Connecticut, the governor launched a Second Chance Society to focus on reentry, the City of New Haven’s new mayor revived the city’s reentry efforts, and a number of community groups picked up the furlough idea implemented under the grant, in which clients are able to leave the facility to meet with service providers prior to their release.

In New Jersey, the state-level movement toward reentry (including the appropriation for replicating the AORDP model in other counties) was perceived to have built off the efforts that started with the SCA grant in Hudson County. At the local level, stakeholders are meeting with the mayor and Chamber of Commerce to discuss reentry. A tangible change that reflects a cultural shift toward recognizing the importance of reentry is the addition of the phrase “and Rehabilitation” to the official department title for the Hudson County Department of Corrections, with the new title passed through an ordinance by the County Executive and the Freeholder Board.

In Minnesota, the inclusion of release violators (the target population of AORDP) in the DOC’s current Statewide Recidivism Reduction grant (funded under a separate SCA grant) was cited as evidence that this population is getting more attention and will no longer be “lost” in the process. The agency’s work with release violators under the SCA grant showed the administration that this population, which has been considered the hardest group to work with outside of sex offenders, deserves attention and that, if given resources, can be successful. Many stakeholders felt that the increased attention to this population was the key legacy of the program.

In Solano County, CA, where the SCA grant was the first of its kind, the fact that the sheriff liked the program enough to cover key portions from his own budget was cited as evidence of the increased recognition of the importance of reentry work. Support also increased among judges, who began referring clients to the program, and other stakeholders from the criminal justice system, who started attending the program’s graduation ceremonies.
AORDP Program as a Model for Expansion and Replication

In several sites, stakeholders spoke generally about how the program implemented under the AORDP grant provided a foundation for reentry work and served as a model for how other grants and programs are being developed. In addition, in several sites, discussions about how to deliver the program to different populations (e.g., applying programs implemented with men to women) or to an expanded set of facilities (e.g., moving the program to additional jails or prisons) are taking place. Notable applications of the AORDP program models include the following:

- In New Jersey, the state is formally expanding what was learned in Hudson County through the AORDP grant (known locally as the Community Reintegration Program, or CRP) throughout the state. The state appropriated $5 million to replicate the CRP model in five other counties. In each county, the program will operate as post-release programs with various degrees of pre-release services. Hudson County has also worked with other jurisdictions to assist with adaptation of the CRP model.

- In Connecticut, the City of New Haven plans to replicate the AORDP model (known as the New Haven Reentry Initiative, or NHRI) with the city’s reentry unit serving as a clearinghouse to coordinate reentry services across three community-based integration centers. All of the important program components, including furloughs, will be incorporated. In addition, parole is looking to incorporate pieces of the NHRI in general parole practices and the furlough component has been picked up by other labor/employment centers.

- In Minnesota, stakeholders noted several ways that practices implemented under the SCA grant have been applied system-wide in the DOC. In particular, part of what was accomplished with the case management component through the AORDP grant helped inform a state initiative around integrative case management, and the DOC added a release coordinator at two facilities. Stakeholders also identified the expanded community partners, enhanced use of evidence-based practices, and an improved referral process for resources around the state as features of the AORDP grant that benefited the entire correctional system.

Improved Collaboration, Communication, and Information Sharing

Stakeholders in all seven grantee sites noted system-wide improvements in collaboration, communication, and information sharing as a result of the AORDP grants. Improvements in these areas were consistently identified as a major success of the programs.
Respondents felt that coordination had improved generally among relevant stakeholders, with particular improvements noted in the following areas:

- Relationships between community-based organizations and community supervision agencies which, in several sites, started out with fairly low support on the part of supervision agencies but improved as these partners became more involved and knowledgeable about the program.
- Relationships between community-based organizations and corrections partners, who generally became more supportive of the programs over time and amenable to accommodating programmatic requests.
- Relationships among service providers, who were increasingly perceived as working toward a common goal.

Improved collaboration with other stakeholders was mentioned in a few sites, including the local housing authority; other housing partners; employers; and criminal justice stakeholders, including judges and law enforcement agencies. Several stakeholders felt that participating organizations had learned from one another and grown in their skills sets, allowing for services to be maximized to better serve clients.

In addition to stronger partnerships, overall communication and information sharing about clients was perceived to have increased as a result of the grants. This includes both informal communication (e.g., stakeholders discussing client progress) as well as formal mechanisms for improved information exchange that were established through the grants. Stakeholders from some sites noted specific improvements in formal communication, such as mechanisms for sharing assessments with other agencies and the development of a platform for accessing electronic service plans. In one site, stakeholders felt that the sharing of information from the jail to community-based providers had improved the transition process for individuals relative to the previous way of doing business, with the sharing of critical information (e.g., medications, mental health needs, housing conditions) facilitating continuity of care and helping the clients stabilize and move forward immediately after release.

In sum, across sites, respondents generally felt that the partners had increasingly come to value one another’s opinions, were better connected to one another, and were more invested in their communities as a result of the AORDP grants. As the grants were ending, stakeholders in one site noted that the end of federal funding had encouraged the relevant partners to come together even more to strategize about how to work together to continue reentry work, rather than focusing on their individual roles.
Improved Reentry Culture within Corrections

As discussed above, partnerships among corrections agencies and community service agencies were perceived to improve significantly as a result of the grants. Several grantees identified a number of ways in which the AORDP grants seemed to improve the overall culture of reentry within corrections.

First, improved relationships between community-based organizations and corrections partners allowed noncorrectional program staff to work with incarcerated clients to a much greater extent. Indeed, the ability to meet with clients while incarcerated to prepare for release was considered among the program’s most significant achievements in several sites. Several examples of improved access to clients prior to release were provided. In Beaver County, PA, due to increased support on the part of the jail, counselors were able to go into booking and segregation—a previously restricted area—and jail administration became open to vocational specialist work. In Connecticut, service providers were granted access to restricted offenders in...
the facilities, the case advocate (a former prisoner) was accepted as a legitimate position and allowed to access the pre-release population, and the furlough component—which allowed clients to temporarily leave the correctional facility and meet with service providers in the community—were perceived to be a direct result of improved collaboration between the DOC and service providers. Stakeholders in several sites noted that jail administrators became increasingly supportive and flexible over time as they saw the value of the reentry program. In turn, mutual respect between corrections and community partners increased as community-based staff who were granted access to correctional facilities became more proficient in corrections culture.

Positive experiences of corrections partners with the AORDP programs also seem to have led to a culture shift that changed correctional practices in some sites. Stakeholders in Solano County, CA, noted that the sheriff began hiring more rehabilitation-focused correctional officers supportive of programming because he wanted to provide more pre-release programs. Similarly, in Beaver County, PA, efforts on the part of the jail to bring in more vocational services for the inmates were associated with an improved culture of reentry in the county. The acceptance of the case advocate as a legitimate position in Connecticut was attributed to a culture change within the DOC as a result of the program. Stakeholders in Palm Beach County, FL, noted that, due to the program’s influence and increased attention to reentry, DOC staff at the correctional facility in which the AORDP program was housed were increasingly treating incarcerated people with respect (e.g., calling them by their names instead of inmate).[16-18]

Finally, stakeholders in sites felt that lasting, positive changes had been made in the way the DOC works with community organizations. Respondents cited much more DOC participation in community roundtables, more awareness about community providers (and mechanisms for engaging them), more DOC awareness about the core issues facing returning individuals, and an increase in discussions about client needs.

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[16-18] Routine interactions between correctional staff (both institutional and community corrections) and incarcerated individuals are increasingly recognized as having the potential to foster positive (or negative) change.16-18
Expanded Use of Evidence-Based Practices

The use of evidence-based practices (EBPs) has been a major emphasis of the SCA training and technical assistance. Stakeholders in several sites indicated that expanded use of EBPs within their agency, or system-wide, was one of the legacies of the AORDP programs. In particular, the risk and needs assessment process was perceived to have improved and expanded in several sites as a result of practices implemented under the AORDP programs. These sites indicated that the use of better assessment tools and the sharing of assessment results have become standard practice in their systems. Grantees’ use of EBPs related to screening and assessment are described in more detail in Rossman et al., with the evaluation finding widespread use of risk/needs assessment tools and practices and strong stakeholder support for risk/needs principles and practices. In addition to assessment practices being considered a legacy of the AORDP programs by several grantees, one site indicated that more emphasis has been placed on case planning. Case management is a foundational practice in all seven sites, although the structure of case management services differs by site, and stakeholders report high levels of information exchange for reentry case planning. For more details about grantees’ use of evidence-based case management practices, see Rossman et al. Additional EBPs perceived to have become more widespread include motivational interviewing and trauma-informed services.

Increased Capacity of Staff and Community Partners

In a few sites, grantees highlighted the success of the training opportunities offered to staff as part of the AORDP programs. They shared that these efforts resulted in staff who are much more knowledgeable about EBPs and how to deliver reentry services to clients. In sites where such efforts involved staff at all AORDP-involved agencies, stakeholders remarked on the lasting benefits of such trainings. For example, in Beaver County, PA, jail employees were given mental health training and are now Certified Co-Occurring Disorders Professionals.

In addition to expanding the skill set of agency staff, stakeholders in several sites highlighted the increased capacity of community partners—particularly those that had not previously worked with reentry populations—as one of the lasting successes of the AORDP

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b Grantees received training and technical assistance from the National Reentry Resource Center (https://csgjusticecenter.org/nrrc/technical-assistance/) throughout the course of their grants.

c Additional details about grantees’ use of these EBPs will be documented in a forthcoming report from the evaluation team.
programs. These partners increased their experience, knowledge, and skill in working with criminal justice populations. In Minnesota, where individuals with sex offenses make up a large portion of technical violators, the need to create reentry resources and understand the barriers for people with sex offense convictions was perceived to greatly enhance capacity among providers who had not traditionally specialized in this population. Bringing EBPs to community partners was particularly highlighted as an outcome of the AORDP programs in several sites, with some stakeholders noting that community partners did not previously use EBPs. The extensive training opportunities promoted through the AORDP programs facilitated an expanded use of EBPs. One community partner in the Palm Beach County, FL, site felt that the organization’s involvement in the AORDP program “reshaped reentry” for them, facilitating a much better understanding of risk assessments, service matching, the need to emphasize pro-social activities, and how to work with clients prior to release.

For some community partners, being an AORDP partner and learning to work with reentering individuals was reported to have resulted in the organization’s expansion and an increased emphasis on reentry work as part of the organization’s mission. For example, one of the community-based organizations affiliated with the Palm Beach County, FL, program has made it part of its mission to work with ex-offenders. In Connecticut, according to stakeholders, one of the community partners is now recognized throughout the state for its reentry work and reentry is a much more significant part of the organization’s business as a result of its participation in the AORDP program.

New opportunities appear to be a clear benefit of the increased capacity of community-based organizations. In addition to developing organizational relationships among themselves, community-based organizations also expanded their ability to work with correctional partners. Community partners became more familiar with the DOC (or jail partner) as well as community supervision partners (e.g., parole or probation), developing contacts and an understanding of how these systems work. In Minnesota, corrections agencies (including the DOC and county community supervision offices) are partnering with community service providers to assess programs’ effectiveness in reducing risk. These formal assessments provide a blueprint for providers to more closely align with EBPs. In addition, as noted earlier, one of the key community providers affiliated with the Palm Beach County, FL, program was asked by AORDP program leaders to take more of a leadership role in working with the DOC moving forward. In sum, participation in the AORDP programs increased the visibility of community partners within the local criminal justice system and allowed them to build relationships with corrections and
other criminal justice partners that will enable them to pursue new opportunities to provide reentry services.

**Expansion of Service Provider Networks**

A related legacy of the AORDP programs is an expansion of resource networks among the partnering organizations. In most sites, stakeholders felt that their awareness of the resources available for reentering individuals had increased and that the connections necessary to link clients with these services had been developed. Grantees noted specific service gaps that have been addressed or strengthened as a result of the AORDP programs: mental health counseling, provision of better co-occurring disorder services, bringing in more mentoring, better connections with training programs and viable employment opportunities, and more partnerships with long-term mental health facilities. In one site, the SCA grant was perceived to unify services in a way that increased the efficiency of government service delivery. According to stakeholders, services already existed but were disjointed, so clients “bounced around” without getting unified services. The collaboration and increased service provider network has allowed clients to get the services they need.

**Increased Standardization and Accountability**

Finally, stakeholders in several sites felt that a lasting benefit of the SCA grants was greater accountability and standardization of the way their agencies do business. Grant requirements were credited with forcing the agencies to use EBPs and making everyone accountable.

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Client-Level Successes

In reflecting on program successes, many stakeholders identified success stories at the client level and observed that positive outcomes had been achieved in several areas, including:

- **Employment and housing.** Many programs struggled with meeting the employment and housing needs of their target population, given the numerous barriers facing formerly incarcerated people. However, a few grantees felt that the program made strides in improving employment and housing outcomes. They noted improved relationships with employers, high job placement rates, and increases in the proportion of clients who found stable housing—perceived as a necessary precursor to success in other aspects of reentry.

- **Other client successes.** Stakeholders in some sites felt that their program completion rates increased. A number of individual client success stories were also relayed, including women regaining custody of their children, clients remaining sober for the first time in their lives, and sex offenders finding suitable housing. In addition, in nearly every site, stakeholders spoke of reductions in recidivism among individual clients served by the program and noted the public safety benefits of their AORDP grants.
accountable for policies and procedures. One respondent noted that the monitoring of federally funded contracts provides a higher level of accountability than state grants.

Increased standardization of procedures was related to the sense of greater accountability. Stakeholders noted that developing protocols and standard operating procedures allowed practices to be “systematized” as opposed to ad-hoc. Standardized procedures allow all partners to understand what is to be done and when.

Sustainability among the AORDP Reentry Programs

Prospects for Sustainability

Federal SCA funding was provided from FY2011 through FY2016 (September 30, 2016) for most evaluation AORDP sites, with two grants ending at the end of December 2015 and another extended through FY2017. During the final round of evaluation site visits (May through August 2015), the evaluation team documented grantees’ sustainability planning efforts in detail. Follow-up telephone interviews with key stakeholders in early 2016 allowed the evaluation team to document prospects for sustaining the AORDP programs in the final few months of most grantees’ performance periods, with sustainability broadly conceptualized to include continuation of any program elements that were initiated under SCA funding. As of this last contact with grantees, the prospects for continued operations of at least some portions of the SCA-funded programs were promising in most sites (see Exhibit 1). While some programs were no longer operational after federal funding ended, others continued to be operational—at least in part. However, it should be noted that some of the SCA-funded program elements were already in existence prior to the grants.

\* The grantees’ funding was intended to support both the continuation of services and engagement in the evaluation.
\* During the site visits, researchers conducted semi-structured interviews with key stakeholders including program administrators, line staff, and representatives from partner agencies in the criminal justice and human services fields. The site visits lasted 2–3 days and were led by 2-person teams from RTI and the Urban Institute.
### Exhibit 1. Prospects for Sustainability in AORDP Sites

<table>
<thead>
<tr>
<th>Site</th>
<th>Basic Program Components Implemented under SCA</th>
<th>Prospects for Sustainability</th>
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| **California: Solano County** | - Intensive pre- and post-release case management, gender-specific cognitive-based therapies, peer mentoring, transitional housing, employment assistance, parenting, and assistance with basic needs. | - Except for peer mentorship, most program components were expected to continue; the housing provider was not expected to receive funding and fewer county cars were expected to be available for transport.  
- Continued services were anticipated to be largely funded from the jail’s budget, based on strong support from the sheriff and county administrator.  
- The focus on women was expected to continue, but some eligibility criteria may be broadened. An additional grant will serve women with persistent mental illness. |
| **Connecticut: Department of Correction (DOC)** | - A “re-entry workbook” program, referrals to the facilities’ job centers, pre-release re-entry planning with community case managers, a furlough component for males, dual supervision with parole officer/case manager and community advocate, and 120 days of post-release services. | - The program was expected to continue and a few key components (furloughs, community advocates, dual supervision) were expected to be replicated among partner organizations.  
- Continued services were expected to be funded by 3 sources: (1) an appropriation from the state (to the DOC) to support continuation for 2 years, (2) a new federal SCA grant awarded to the City of New Haven to fund specific pieces and expand the community-based organizations providing reintegration services, and (3) a Department of Labor grant to establish a pre-release job center within the New Haven Correctional Center. |
| **Florida: Palm Beach County** | - Pre-release services at the re-entry center provided by counselors, followed by post-release continued support and services provided by community case managers.  
  Services include education; employment assistance; transitional housing; parenting, life skills, cognitive behavioral change, victim impact; substance abuse and mental health; family reunification; and assistance with basic needs. | - Stakeholders hoped to continue the program with additional funding.  
- Some money was received from both the county and the state in fiscal year 2016 to sustain the program, but the available funding for post-release service dollars was anticipated to be much lower than the federal SCA funding.  
- A greater emphasis on employment was anticipated by stakeholders. |
| **Massachusetts: Boston** | - Panel meeting to introduce the program to and invite eligible individuals; case management support and advocacy (throughout incarceration, transition to the community, and after release); a 2-week job skills course (before release); assistance with employment, education, basic needs, and health care; and referrals to community services | - Although stakeholders expressed a strong commitment to continuation of the program, it was unclear whether the program would continue.  
- No specific funding sources had been identified. |
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<th>Site</th>
<th>Basic Program Components Implemented under SCA</th>
<th>Prospects for Sustainability</th>
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| **Minnesota: Department of Corrections** | Individualized transition planning and pre-release case management from a re-entry coordinator, handoff from pre- to post-release case management through a re-entry team meeting, and post-release case management and services offered at a community hub | ▪ The DOC did not expect to sustain most program components. The re-entry unit within the DOC was anticipated to have some staff working with the target population (release violators), but these staff were not expected to provide intensive transition coordination.  
▪ The services that the community-based providers offered were expected to continue to be available to the target population. |
| **New Jersey: Hudson County** | 90 day in-jail substance abuse treatment in a gender-specific therapeutic community with focus on cognitive behavioral programming; pre-release case management and transition planning; post-release case management, linkage to public benefits, and services delivered by intensive outpatient/day treatment and supported housing providers | ▪ The program was expected to continue in Hudson County and be replicated in other counties.  
▪ Continued funding from the jail’s operational budget was secured (a dedicated re-entry budget was allocated) and the replication was anticipated to be funded by a state appropriation.  
▪ An emphasis on housing and case management was anticipated. |
| **Pennsylvania: Beaver County** | Cognitive-based treatment groups, highly structured vocational/educational services, transition planning, and case management and re-entry sponsorship (mentoring) that begins in jail and continues in the community | ▪ Several program components were expected to be sustained through other sources of funding.  
▪ The jail-based behavioral health assessment and treatment was expected to be sustained through a continuation award and state base dollars, the medical support and medications were expected to be sustained from jail operating budget, and community treatment (including re-entry case management, peer support, and vocational services) was expected to be sustained through Medicaid and state base dollars. |
Sustainability Strategies

The AORDP grantees reported exploring and using a number of strategies to continue their AORDP programs (or components of their programs). Strategies specific to jail-based sites included:

- **Pursuing additional county funding.** Palm Beach County, FL, sought an incremental change from federal to county funding and had received enough funding from the county to sustain its AORDP program for another year. Program stakeholders intended to hold a workshop for the county Board of Commissioners around budget time to request additional funding.

- **Paying for programming from the jail’s operational budget.** As noted in Exhibit 1, three of the jail-based grantees anticipated continuing at least some portions of their AORDP program through the jail’s operational budget. In Solano County, CA, the sheriff intended to fund jail-based case management as well as post-release services. In Hudson County, NJ, the AORDP program was expected to continue through a portion of the jail’s budget dedicated to inmate welfare. In Beaver County, PA, medical support and medications were expected to be covered as part of the jail’s operating budget.

Other strategies, relevant to both prison- and jail-based sites, included:

- **Pursuing additional state funding.** Six grantees had either received an appropriation from the state (Connecticut DOC; Beaver County, PA), planned to request a specific appropriation (Palm Beach County, FL), or were otherwise seeking state money to provide some services originally funded by the AORDP grant (Minnesota DOC; Hudson County, NJ; Solano County, CA).

- **Pursuing additional federal funding.** Federal funding sources included new SCA grants (one of which was awarded to the City of New Haven, CT), Department of Labor funding (also awarded to Connecticut, as well as Hudson County, NJ), or other federal grants (Minnesota DOC; Boston, MA; Palm Beach County, FL). The Minnesota DOC received a statewide recidivism reduction grant that included work with the agency’s AORDP grant target population (release violators). In addition, some of the Minnesota DOC grantees’ partners had received additional federal grants, including an Office of Justice Programs grant allowing for more intensive pre-release work, which was awarded to the employment and case management partner.

- **Pursuing other sources of funding.** Some grantees were meeting regularly to seek out various sources of reentry funding. Two grantees (Palm Beach County, FL, and Boston) said they were exploring funding from private foundations, but noted that some foundations do not allow public and private funding to be combined or may not...
be interested in reentry. Some grantees were looking into county, state, and/or federal funding focused on housing. In addition, several grantees had applied for other reentry-related grants from unspecified funding sources. In Connecticut, the mayor of New Haven hired a grant writer, and several grants were submitted to continue parts of AORDP.

- **Leveraging partnerships.** A few grantees noted that their involvement in existing reentry networks or boards (e.g., the state criminal justice board in Pennsylvania) would facilitate continuation of their reentry work. In addition, one grantee (Palm Beach County, FL) was working to have its primary community partner take more of a leadership role in working with the program’s corrections partner, the Florida DOC, as an explicit sustainability strategy, noting that this shift would help ensure long-term continuation of the program and possibly result in a more effective collaboration.

- **Maximizing Medicaid reimbursement.** Finally, several grantees discussed efforts to enroll clients in Medicaid to cover allowable physical and mental health care services. Although pre-release services are not reimbursable, Hudson County, NJ, case managers enrolled individuals while incarcerated to facilitate clients having Medicaid coverage when they returned to the community. Stakeholders from Beaver County, PA, modeled their service rates as closely as possible to Medicaid rates and encouraged providers to bill Medicaid first (with the grant covering unallowable services), which has helped with sustainability. Solano County, CA, was exploring whether case management services will be allowable under the Affordable Care Act to help manage clients’ medical and mental health care needs.

### Lessons Learned About Sustainability

Stakeholders shared lessons learned through their sustainability planning efforts that may be helpful for future federally funded reentry grantees.

- **Plan for sustainability early.** Several grantees noted that they waited too long to begin sustainability planning. In one site, the lack of secured funding for continuation caused staff to leave the program.

- **Develop a concrete sustainability plan.** This plan should include strategies for diversifying funding sources. One grantee noted the challenge in broadening the reach of the program to particularly high-need populations (e.g., mentally ill, sex offenders).

- **Increase community awareness.** One grantee observed that framing reentry as a public safety issue is important for gaining community support. Another remarked that a cultural change is necessary to sustain reentry programming for the long term.
Conclusion

Second Chance Act funding had a lasting impact in the grantee agencies and partner organizations in these seven AORDP sites. Prospects for sustaining at least some portions of the programs implemented with SCA funding were promising in most sites, with the local AORDP model held up as a model for expansion or replication in several sites. A number of programmatic and systems-level successes were attributed specifically to the AORDP grants. Increased support for reentry work, greater collaboration and communication, expanded use of EBPs, and expansion of service provider networks were among the legacies of the AORDP programs in the systems in which they were implemented.
References


Appendix A: The AORDP Reentry Projects

Exhibit A1 summarizes the target population and core components of each AORDP reentry program, with key features shown in bold. Each program targets adults who are under state or local custody (and who are about to return to the community) for comprehensive reentry programming and services designed to promote successful reintegration and to reduce recidivism. Designed to meet the multiple challenges facing formerly incarcerated individuals upon their return to the community, the seven AORDP programs provide an array of pre- and post-release services, including education and literacy programs, job placement, housing services, and mental health and substance abuse treatment. Risk and needs assessments, transition case planning, and case management are key elements of grantees’ Second Chance Act projects.

Appendix Exhibit A1. Summary of Grantees’ Program Models

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Target Population</th>
<th>Basic Program Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>California: Solano County</td>
<td>Medium- or high-risk females currently or recently incarcerated in the Solano County jail</td>
<td>Intensive pre- and post-release case management, gender-specific cognitive-based therapies, peer mentoring, transitional housing, employment assistance, parenting, and assistance with basic needs</td>
</tr>
<tr>
<td>Connecticut: Department of Correction (DOC)</td>
<td>Medium- or high-risk males and females incarcerated in four Connecticut DOC facilities and returning to the target area in and around New Haven</td>
<td>A “reentry workbook” program, referrals to the facilities’ job centers, pre-release reentry planning with community case managers, a furlough component for males, dual supervision with parole officer/case manager and community advocate, and 120 days of post-release services</td>
</tr>
<tr>
<td>Florida: Palm Beach County</td>
<td>Moderate- to high-risk incarcerated men and women who are returning to Palm Beach County from one Florida DOC correctional facility</td>
<td>Pre-release services at the reentry center provided by counselors, followed by post-release continued support and services provided by community case managers. Services include education; employment assistance; transitional housing; parenting; life skills, cognitive behavioral change; victim impact; substance abuse and mental health; family reunification; and assistance with basic needs.</td>
</tr>
<tr>
<td>Massachusetts: Boston</td>
<td>Men incarcerated at the Suffolk County House of Correction aged 18–30 with histories of violent or firearm offenses and gang associations who will return to one of Boston’s high-crime hotspot areas</td>
<td>Panel meeting to introduce the program to and invite eligible individuals; case management support and advocacy (throughout incarceration, transition to the community, and after release); a 2-week job skills course (before release); assistance with employment, education, basic needs, and health care; and referrals to community services</td>
</tr>
<tr>
<td>Minnesota: Department of Corrections</td>
<td>Male release violators who are returning to the Minneapolis-St. Paul metro area and have at least 150 days of supervised release in the community</td>
<td>Individualized transition planning and pre-release case management from a reentry coordinator, handoff from pre- to post-release case management through a reentry team meeting, and post-release case management and services offered at a community hub</td>
</tr>
</tbody>
</table>

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### Appendix Exhibit A1. Summary of Grantees’ Program Models (continued)

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Target Population</th>
<th>Basic Program Components</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Jersey:</td>
<td>Men and women incarcerated in the Hudson County House of Corrections who have been</td>
<td>90-day in-jail substance abuse treatment in a gender-specific <strong>therapeutic community</strong></td>
</tr>
<tr>
<td>Hudson County</td>
<td>diagnosed with mental health, substance use, or co-occurring disorders</td>
<td>with focus on <strong>cognitive behavioral programming</strong>; pre-release case management and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>transition planning; post-release case management, linkage to public benefits, and</td>
</tr>
<tr>
<td></td>
<td></td>
<td>services delivered by <strong>intensive outpatient/day treatment and supported housing providers</strong></td>
</tr>
<tr>
<td>Pennsylvania:</td>
<td>Male and female adults sentenced to the Beaver County Jail who have medium or high</td>
<td>Cognitive-based treatment groups, **highly structured vocational/educational services,</td>
</tr>
<tr>
<td>Beaver County</td>
<td>need for mental health or co-occurring services</td>
<td>transition planning, and case management and reentry sponsorship (mentoring) that begins</td>
</tr>
<tr>
<td></td>
<td></td>
<td>in jail and continues in the community</td>
</tr>
</tbody>
</table>

As evident from the exhibit, the sites vary substantially in the populations they target and the service delivery approaches they adopt. Three sites (Connecticut, Florida, and Minnesota) target prisoners returning from state DOCs. The rest address local jail transition (Beaver County, PA; Boston, MA; Hudson County, NJ; and Solano County, CA). Some sites focus on women (Solano County, CA), individuals reincarcerated for supervision violations (Minnesota), and those with substance abuse or mental health disorders or both (Beaver County, PA, and Hudson County, NJ). Two sites (Connecticut and Florida) move returning individuals to facilities closer to their home communities, increasing access to community-based resources before release. Some programs frontload case management services, whereas others emphasize community and family supports. The composition and structure of the AORDP programs vary by jurisdiction, with agencies outside the criminal justice system leading three of the projects (Beaver County, PA; Palm Beach County, FL; and Solano County, CA).