Offender Reentry Initiative: Recommended Criteria for the Community Transition Coordination Networks

Background

In 2007, the Washington State Legislature passed an adult offender reentry initiative with the goal of reducing recidivism through coordination of state and local services.\(^1\) As part of that effort, the Legislature established a pilot program called Community Transition Coordination Networks (CTCN) to better provide offenders leaving prison or jail with coordinated supervision and services.

Under the legislation, counties, or groups of counties, can submit proposals to establish a CTCN. The Department of Community, Trade and Economic Development (CTED) is responsible for selecting up to four counties to receive funding for the pilot programs.

The Washington State Institute for Public Policy (Institute) was directed to “develop criteria” for use during the grant application process, which will assess a county’s readiness to implement a CTCN. This report describes those criteria. The Institute was also directed to conduct an outcome evaluation no later than December 2012.

Community Transition Coordination Networks

A CTCN is designed to aid adult offenders reentering the community from prison or jail through “a system of coordination that facilitates partnerships between supervision and service providers.”\(^2\) Reentry plans will be developed collaboratively between the supervising authority and the offender based on identified risks and needs. These plans will guide services received in the community.

### Timeline for CTCN Implementation

**September 2007**
Institute develops criteria to guide grant review process.

**January 2008**
Counties present inventory or list of programs available to a policy advisory committee.

**February 2008**
Counties submit proposals for CTCNs.

**April 2008**
CTED selects up to four CTCN pilot program sites.

**July 2008**
CTCN pilot programs begin.

**2009–2012**
CTCNs report annually to policy advisory committee.

**June 2012**
CTCN pilot programs end.

**December 2012**
Institute submits final evaluation of CTCNs.

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\(^1\) ESSB 6157, Chapter 483, Laws of 2007.

\(^2\) Ibid.

This report has been modified since its initial publication in August 2007 and now includes Appendix A.
Criteria for Assessing Counties’ Readiness to Implement a CTCN

The Legislature directed the Institute to recommend criteria for assisting CTED during the grant review process. These criteria will help determine which county proposals have the best chance of implementing a CTCN.

According to the legislation, evaluating counties’ readiness to implement a CTCN must include: assessing the social service needs of offenders, determining the capacity of local facilities and resources, and estimating the cost to implement and maintain a CTCN.

Many of the criteria recommended by the Institute are items that the legislation already requires of the counties.

1) Assess offenders’ risks and needs to determine what services are appropriate.

The legislation directs counties to identify the risks and social service needs of offenders who release from confinement and suggested that counties use the Department of Corrections’ (DOC) assessment tools whenever possible. In order to accomplish this, the Institute recommends that counties establish an agreement with DOC to obtain risk and needs assessment data. These data include:

- Static risk factors are those that cannot decrease, such as criminal history. Once a criminal record is obtained, it will always be part of an offender’s history. DOC’s static risk tool is based on an offender’s juvenile and adult criminal history; it determines an offenders risk for reoffense. Offenders are classified into one of the following risk categories: low, moderate, high drug, high property, and high violent.

- DOC’s needs assessment identifies the following domains: education, community employment, friends, residential, family, alcohol/drug use, mental health, aggression, attitudes/behaviors, and coping skills. DOC is scheduled to implement the needs assessment in July 2008.

If a CTCN proposes to serve offenders not under the jurisdiction of DOC, the Institute recommends that counties indicate their proposed method of formally assessing the needs of their offender population.

2) Conduct an inventory of programs and services available and implement evidence-based options.

The legislation directs counties to determine what state, local, and private programs are available in their counties to assist offenders in reentry. Counties are required to consult with DOC, Department of Social and Health Services (DSHS), law enforcement, local probation, community and technical colleges, non-profit organizations, housing providers, and others.

Since the legislation requires CTCNs to implement evidence-based and promising practices, the Institute recommends that counties compare their inventory of available programs with those listed in Exhibit 1 (Appendix A provides a detailed description on how to read Exhibit 1). The Institute prepared this list of programs at legislative direction to identify strategies to reduce future prison construction, save money for taxpayers, and reduce crime rates in Washington State.3

The Institute recommends that evidence-based options, as shown in Exhibit 1, be given highest priority for potential programs used by CTCNs. If a county is interested in options not directly listed on Exhibit 1, then counties should select services that contain the key program elements of evidence-based options. County proposals should provide justification for choosing such a program.

For example, vocational education programs in prison have been shown to reduce crime. Although the effectiveness of vocational programs in the community has not yet been proven, a county may wish to experiment with such an approach in its community. The Institute recommends experimentation of this type in order to expand the list of evidence-based programs.

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3) Determine the necessity of specific services for the community.

Once an inventory of programs has been obtained, counties should determine the necessity for specific services in a given community such as job skills. For example, if a county is interested in offering a vocational skills program, the county should determine the demand for a specific trade by identifying jobs that exist in the community. Information from existing data sources, such as the Employment Security Department, United States Census, DOC, or DSHS, should be collected and analyzed to estimate the need for a specific program.

4) Focus on moderate to high risk offenders.

Because resources will not be available to serve all offenders released into the community, the Institute recommends that resources be focused on serving moderate to high risk offenders according to DOC’s risk assessment tool. Focusing resources on offenders who have the highest risk for reoffense has the potential to produce the greatest impact on crime rates in a community.

5) Track and collect data.

Legislation requires that counties receiving money for a CTCN pilot program implement a data tracking system. Thus, the Institute recommends that each county outline its approach for tracking and collecting data in its proposal. Because these data systems are essential to the evaluation of CTCNs, the Institute will work directly with the pilot counties that are selected to ensure that adequate data tracking systems are designed.

### Exhibit 1

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>Programs for People in the Adult Offender System</td>
<td>Percent change in crime outcomes, &amp; the number of evidence-based studies on which the estimate is based (in parentheses)</td>
<td>Benefits to Crime Victims (of the reduction in crime)</td>
</tr>
<tr>
<td>Vocational education in prison</td>
<td>-9.0% (4)</td>
<td>$8,114</td>
</tr>
<tr>
<td>Intensive supervision: treatment-oriented programs</td>
<td>-16.7% (11)</td>
<td>$9,318</td>
</tr>
<tr>
<td>General education in prison (basic education or post-secondary)</td>
<td>-7.0% (17)</td>
<td>$6,325</td>
</tr>
<tr>
<td>Cognitive-behavioral therapy in prison or community</td>
<td>-6.3% (25)</td>
<td>$5,658</td>
</tr>
<tr>
<td>Drug treatment in community</td>
<td>-9.3% (6)</td>
<td>$5,133</td>
</tr>
<tr>
<td>Correctional industries in prison</td>
<td>-5.9% (4)</td>
<td>$5,360</td>
</tr>
<tr>
<td>Drug treatment in prison (therapeutic communities or outpatient)</td>
<td>-5.7% (20)</td>
<td>$5,133</td>
</tr>
<tr>
<td>Adult drug courts</td>
<td>-8.0% (57)</td>
<td>$4,395</td>
</tr>
<tr>
<td>Employment and job training in the community</td>
<td>-4.3% (16)</td>
<td>$2,373</td>
</tr>
<tr>
<td>Electronic monitoring to offset jail time</td>
<td>0% (9)</td>
<td>$0</td>
</tr>
<tr>
<td>Sex offender treatment in prison with aftercare</td>
<td>-7.0% (6)</td>
<td>$6,442</td>
</tr>
<tr>
<td>Intensive supervision: surveillance-oriented programs</td>
<td>0% (23)</td>
<td>$0</td>
</tr>
<tr>
<td>Washington's Dangerously Mentally Ill Offender program</td>
<td>-15.1% (1)</td>
<td>$13,645</td>
</tr>
<tr>
<td>Drug treatment in jail</td>
<td>-4.5% (9)</td>
<td>$2,481</td>
</tr>
<tr>
<td>Adult boot camps</td>
<td>0% (22)</td>
<td>$0</td>
</tr>
<tr>
<td>Domestic violence education/cognitive-behavioral treatment</td>
<td>0% (9)</td>
<td>$0</td>
</tr>
<tr>
<td>Jail diversion for mentally ill offenders</td>
<td>0% (11)</td>
<td>$0</td>
</tr>
<tr>
<td>Life Skills education programs for adults</td>
<td>0% (4)</td>
<td>$0</td>
</tr>
</tbody>
</table>

Program types in need of additional research & development before we can conclude they do or do not reduce crime outcomes:

<table>
<thead>
<tr>
<th>Programs needing more research for people in the adult offender system</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case management in the community for drug offenders</td>
<td>0% (13)</td>
</tr>
<tr>
<td>COSA (Faith-based supervision of sex offenders)</td>
<td>-22.3% (1)</td>
</tr>
<tr>
<td>Day fines (compared to standard probation)</td>
<td>0% (1)</td>
</tr>
<tr>
<td>Domestic violence courts</td>
<td>0% (2)</td>
</tr>
<tr>
<td>Faith-based programs</td>
<td>0% (5)</td>
</tr>
<tr>
<td>Intensive supervision of sex offenders in the community</td>
<td>0% (4)</td>
</tr>
<tr>
<td>Medical treatment of sex offenders</td>
<td>-21.4% (1)</td>
</tr>
<tr>
<td>Mixed treatment of sex offenders in the community</td>
<td>0% (2)</td>
</tr>
<tr>
<td>Regular parole supervision vs. no parole supervision</td>
<td>0% (1)</td>
</tr>
<tr>
<td>Restorative justice programs for lower risk adult offenders</td>
<td>0% (6)</td>
</tr>
<tr>
<td>Therapeutic community programs for mentally ill offenders</td>
<td>-20.8% (2)</td>
</tr>
<tr>
<td>Work release programs from prison</td>
<td>-4.3% (4)</td>
</tr>
</tbody>
</table>

Notes:
- "n/e" means not estimated at this time.
- Prevention program costs are partial program costs, pro-rated to match crime outcomes.

Source: S. Aos, M. Miller, & E. Drake (2006).
The Institute recommends the following basic data tracking requirements for counties submitting proposals:

Information on offenders receiving services:
- Which offenders receive services,
- Type and amount of services received,
- Status of progress (e.g., completion),
- Interim outcomes of interest such as drug use, and
- Reassessment data to determine if the needs of the offender changed after the program.

Information on offenders not receiving services:
- Which offenders do not receive services,
- Type of services needed, and
- Reason offender did not receive services.

In 1997, at legislative direction, the Institute established a definition of recidivism to be used as an outcome-based standard for measuring program success. Since then, the Institute has developed a database to efficiently measure criminal recidivism. The database is a synthesis of criminal charge information that was derived using elements of Administrative Office of the Courts (AOC) and DOC data systems. This criminal history database will be used to track recidivism for the Institute’s evaluation of the CTCNs; therefore, counties will not need to track recidivism for purposes of program evaluation.

6) Implement quality assurance standards.

A 2004 study conducted by the Institute found that some juvenile programs reduced recidivism, but only when competently delivered. Thus, it is important to implement quality assurance standards to fully benefit from the evidence-based programs. The Institute recommends that counties describe in their proposals how they intend to assure that programs will be delivered with fidelity to the treatment design.

7) Limit the number of programs available by CTCNs.

The Institute recommends that the number of programs available by CTCNs be limited to just a few for the following reasons: the quality of services is likely to be higher if resources are focused on just a few programs; more programs will result in more costly overhead; and limiting the number of programs will help to ensure that the sample size is large enough to conduct a meaningful outcome evaluation to determine if the program lowers recidivism.

8) Collect program cost information.

The legislation requires that counties estimate the cost to implement and maintain a CTCN. In order to evaluate the programs, the Institute recommends that counties describe the procedures they intend to use to track direct and indirect costs of delivering programs.

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Appendix A:
Detailed Description on How to Read Exhibit 1

What Does “Evidence-Based” Mean?

The phrase “evidence-based” is sometimes used loosely in policy discussions. When the Institute is asked to conduct an evidence-based review, we follow a number of steps to ensure a rigorous definition. These criteria include:

1. We consider all available studies we can locate on a topic rather than selecting only a few studies; that is, we do not “cherry pick” the studies to include in our reviews. We then use formal statistical hypothesis testing procedures—meta-analysis—to determine whether the weight of the evidence indicates outcomes are, on average, achieved.

2. To be included in our reviews, we require that an evaluation’s research design include control or comparison groups. Random assignment studies are preferred, but we allow quasi-experimental studies when the comparison group is well-matched to the treatment group. We then discount the findings of less-than-randomized comparison-group trials by a uniform percentage. We also require that the groups be “intent-to-treat” groups to help guard against selection bias.

3. We prefer evaluation studies that use “real world” samples from actual programs in the field. Evaluations of so-called “model” or “efficacy” programs are included in our reviews, but we discount the effects from these types of studies by a fixed percentage.

4. If the researcher of an evaluation is also the developer of the program, we discount the results from the study to account for potential conflict of interest, or the inability to replicate the efforts of exceptionally motivated program originators in real world field implementation.

What Works to Reduce Crime?

Exhibit 1 summarizes the findings from our systematic review of the evaluation research literature on adult corrections programs. We update these findings as new information becomes available. Overall, we reviewed and meta-analyzed the findings of 339 comparison-group evaluations of adult criminal justice programs. Each of these evaluations included at least one relevant crime outcome that we were able to analyze.

To make this information useful for policy making in Washington, we categorized each of these 339 evaluations into relevant subject areas. For example, we found 57 evaluations of adult drug courts, and we analyzed these studies as a group for that type of program. This categorization process illustrates a key characteristic of our research. For each category of programs we analyze, our results reflect the evidence-based effect we expect for the “average” program. For example, our results indicate that the average adult drug court reduces the recidivism rate of participants by 8.0 percent. Some drug courts, of course, achieve better results than this, some worse. On average, however, we find that the typical drug court can be expected to achieve this result.

At the bottom of Exhibit 1, we also list a number of programs for which the research evidence, in our judgment, is inconclusive at this time. Some of these programs have only one or two rigorous (often small sample) evaluations that do not allow us to draw general conclusions. Other programs have more evaluations but the program category is too diverse or too general to allow meaningful conclusions to be made at this time. Subsequent research on these types of programs is warranted.

In column (1) of Exhibit 1, we show the expected percentage change in crime outcomes for the program categories we review. This figure indicates the average amount of change in crime outcomes—compared to no treatment or treatment as usual—that can be achieved by a typical program in each category of programs. A negative value indicates the magnitude of a statistically significant reduction in crime. A zero percent change

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8 Additional information on the programs shown in Exhibit 1 can be obtained from the Institute.
means that, based on our review of the evidence, a typical program does not achieve a statistically significant change in crime outcomes. A positive sign would indicate that crime is increased with the program, not decreased. In addition to reporting the effect of the programs on crime outcomes, column (1) also reports the number of studies on which the estimate is based.

As Exhibit 1 reveals, we find a number of programs demonstrate statistically significant reductions in crime outcomes. We also find other approaches do not achieve a statistically significant reduction in recidivism. Thus, the first lesson from our evidence-based review is that some programs work and some do not. A direct implication from these mixed findings is that public policies that reduce crime will be ones that focus resources on effective evidence-based programming while avoiding ineffective approaches.

As an example of the information provided in Exhibit 1, we analyzed the findings from 25 well-researched studies of cognitive-behavioral programs for adult offenders in prison and community settings. We find that, on average, these programs can be expected to reduce recidivism rates by 6.3 percent. To put this in perspective, our analysis indicates that, without a cognitive-behavioral program, about 63 percent of offenders will recidivate with a new felony or misdemeanor conviction after a 13-year follow-up. If these same offenders had participated in the evidence-based cognitive-behavioral treatment program, then we expect their recidivism probability would drop four points to 59 percent—a 6.3 percent reduction in recidivism rates.

What Are the Benefits and Costs of Each Option?

While our first research question deals with what works, our second question concerns economics. Exhibit 1 also contains our estimates of the benefits and costs of many of the program categories we analyze. We rank many of the options by our assessment of each program’s “bottom line” economics for reducing crime.

For programs that have an evidence-based ability to affect crime, we estimate benefits from two perspectives: taxpayers’ and crime victims’. For example, if a program is able to achieve statistically significant reductions in recidivism rates, then taxpayers will spend less money on the criminal justice system. Similarly, if a program produces less crime, then there will be fewer crime victims. The estimates shown in columns (2) and (3) of Exhibit 1 display our estimates of victim and taxpayer benefits, respectively. Of course, a program category that does not achieve a statistically significant reduction in crime outcomes will not produce any benefits associated with reduced crime.

In column (4) we show our cost estimates of many programs. At this time, we have not estimated the costs for every program category listed on Exhibit 1; thus we do not produce full cost-benefit results for all programs in the Exhibit.

Finally, in column (5) of Exhibit 1, we show our “bottom line” estimate of the net gain (or loss). These figures are the net present values of the long-run benefits of crime reduction minus the net up-front costs of the program. This provides our best overall measure each type of program can be expected to achieve per program participant.

To continue the example already discussed, we find that the average cognitive-behavioral program costs about $105 per offender to administer. These programs are typically run in groups of 10 to 15 offenders and involve 40 to 60 hours of therapeutic time. We estimate that the 6.3 percent reduction in recidivism rates generates about $10,404 in life-cycle benefits (a present-valued sum) associated with the crime reduction. Thus, the net value of the average evidence-based cognitive-behavioral program for adult offenders is $10,299 per offender.

As mentioned, we find that some programs show no evidence that they reduce crime outcomes. This does not mean, however, that these programs are not economically viable options. An example of this type of program is electronic monitoring for adult offenders. As indicated in Exhibit 1, we located nine studies of electronic monitoring and find that the average electronic monitoring program does not have a statistically significant effect on recidivism rates. As future evaluations are completed, this result may change; but, currently, we

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9 For technical details on economic calculations, see Appendix B of: Aos, et al. (2006).
report no crime reduction benefits in columns (2) and (3). We do expect, however, that the average electronic monitoring program is typically used to offset the costs of more expensive resources to process the sanctions of the current offense. That is, we find that an average electronic monitoring program costs about $1,236 per offender. The alternative to electronic monitoring, however, is most often increased use of jail time, and we estimate this to cost $2,107 per offender. The cost shown on column (4) is our estimate of the difference in these up-front costs. The bottom line is reported in column (5) and provides evidence that electronic monitoring can be a cost-beneficial resource. Thus, although there is no current evidence that electronic monitoring reduces recidivism rates, it can be a cost-effective resource when it is used to offset the costs of a more expensive criminal justice system resource such as jail time.
The Washington State Legislature created the Washington State Institute for Public Policy in 1983. A Board of Directors—representing the legislature, the governor, and public universities—governs the Institute and guides the development of all activities. The Institute’s mission is to carry out practical research, at legislative direction, on issues of importance to Washington State.

For further information, please contact Elizabeth Drake at (360) 586-2767 or ekdrake@wsipp.wa.gov.