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# **Transition from Jail to Community Outcome Evaluation and Process Study**

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# Transition from Jail to Community

## Outcome Evaluation and Process Study

### Executive Summary

As of May 2014, there were 177 ex-offenders in the Transition from Jail to Community Initiative (TJC). Sixty-one (61 men), or 34.5% had recidivated, which is well under the 44% average found in the 2011 [PEW Center on the States study](#). If this program had not existed, an additional 15 men would have recidivated costing our community dollars for jail time, cost of processing them in and out of jail, and societal costs to families and victims. These avoided costs result in and estimated \$2.9 million in savings over the course of four years. For every dollar spent, we saved \$3.94 in cost to our community.

The success of this program relies heavily on several factors:

- **Housing.** Whether the ex-offenders were assigned to residential housing with close proximity to case managers or went back to the community (48% were assigned to housing upon release from jail) was a major factor in success. Those in the community had a higher recidivism rate (37%) than those that had been in residential housing at any point in their participation (32%).
- **Collaborative teams involving multiple agencies.** Collaborative teams involving 25 agencies provided a wide array of services to the participants designed to lower their risk of recidivism. Care teams co-staffed the participants and looked for creative ways to serve them without duplicating services—thus reducing the agency silos that had existed in the past.
- **Case Managers.** The diligence of the reentry specialists in engaging the ex-offenders despite enormous challenges was critical—particularly with the participants living in the community.

Participants reported that they really appreciated knowing that someone cares, and further that a lot of people from different agencies were willing to work together using a team approach were willing to work together to help them. They needed a fresh start. Through the TJC support they were provided the opportunity to improve their path. The active participants reported a sense of community and appreciated being part of a supportive system.

### Systems Changes as a result of TJC Initiative

This initiative has resulted in recommendations for policy and system reform and has resulted in increased coordination with other Reentry systems. By working with the broader re-entry task force, this initiative has worked to develop seamless solutions for all returning citizens.

Many of the systemic changes that have occurred during the implementation of TJC happened because individual clients demonstrated needs or barriers to success that can only be addressed through systemic change. In any collaborative effort, these changes are difficult.

**Successes identified by stakeholders include:**

- Strong collaborative partnerships and regular partner meetings regarding the client's care (CARE team) resulted in the successful transition of many clients back into the community.
- A particular strength of the TJC initiative was the fact that the services provided have led to stronger families.
- The TJC program has built strong bonds with other reentry efforts that have emerged in our community and all are stronger as a result of this collaboration.
- Program participants have been provided with a variety of services that improve financial security and stability.
- Addressing the health and mental health needs of the participants was critical.
- Improved relationships among services providers helped to break down silos and improve our system of services.

**Successes identified by ex-offenders**

In April and May 2014, final interviews were conducted with participants of the program. A qualitative analysis of the results revealed the following trends:

- Participants said they felt they had learned valuable life skills and social skills that were helping to improve their relationships at work, home and in the community.
- Many participants said they had more hope for the future because of the program.
- Participants reported improved relationships with children and grandchildren.
- The importance of support from case managers and other staff and partners cannot be underestimated.
- A few of the men were fortunate enough to take on more leadership roles in providing peer support to others in the program. This has improved their self-esteem enormously.
- Program participants say that the housing provided kept them from being homeless.
- While program participants' comments were predominantly positive, several are clearly still struggling and need further support.

## Introduction

This report will present the findings of the fourth and final evaluation year of the Transition from Jail to Community Initiative, funded by the Robert Wood Johnson Foundation. The evaluation was conducted from July 1, 2010 to May 25, 2014 (when data collection ceased and analysis began). We will outline in this report the findings from both qualitative and quantitative data collection efforts using data collected from both primary and secondary sources. The data will include information about both outcomes and process and will make recommendations for similar programs that wish to replicate this initiative and to inform the continuation of this effort into the future.

The original proposal submitted by the collaboration to Robert Wood Johnson Foundation outlines the approach that the initiative started with in 2010. A complete project and evaluation overview can be found in Appendix A.

### TJC Project Overview

The original proposal submitted by the collaboration to Robert Wood Johnson foundation outlines the approach that the initiative started with in 2010:

“The TJC will work through a key alignment of networked, local agencies and providers to develop a cohesive and cost-efficient approach to this issue. Upon incarceration, the client will be given a battery of assessments, including education, mental and physical health, as well as program readiness. The client will then be assigned a re-entry coach, whose focus is to mentor the client prior to release, set up a personal plan for transition back into the community, and then administer the plan directly with the client upon release through the point of stability. Key areas of assistance will include physical and mental healthcare, as well as substance abuse recovery, housing, employment, education, finances/benefits, rights restoration, and family reunification.

Outcomes include, but are not limited to:

1. At least 80% of all clients will stay out of jail, for the duration of the grant and beyond.
2. All participants will be assessed, assigned a plan of action toward personal success, with at least 80% of clients maintaining the course of action through the duration of the grant and beyond.
3. Existing “silo” oriented re-entry programs around the county will be aligned, more cost effective, and the pilot will expand to encompass at least 2 additional communities by the end of the grant.”

In addition, “It is the vision of our project to initiate with up to 50 incarcerated men, aged 18 – 30, in the Delray Beach area.” *(Taken from original TJC proposal summary)*

The theory behind TJC as proposed was to identify new prisoners between 18 and 30 years of age, provide reentry coaches who would coordinate with the 31 original partners to provide wraparound services that would reduce risk factors for recidivism and meet the needs of the clients. Services proposed were to include: Housing, Finances, Physical and Mental Health, Recovery, Restoration of Rights, and Employment. By identifying the criminogenic risk factors that lead to recidivism and addressing them-- starting before they even leave jail and consistently after they leave jail, the chances of recidivism would theoretically be lower and the benefit to the community would be worth the cost.

Part of the challenge identified was that of breaking down intractable silos in the service provider community as well as identifying and addressing policy and institutional barriers to successful reintegration into society.

**The Evolution of TJC**

As is true in any new initiative, adjustments have been made to the original plan in response to environmental factors. In this case, several changes were made to the scope and all were designed to improve the effectiveness of the program and improve the outcomes. While originally 31 partners were involved, a few partners were not able to participate and their involvement discontinued. New partners were added as the need arose. The following is a list of the active partners providing services to the TJC participants at the end of the initiative.

**TJC Partnering Agencies**

Armor Correctional Health	Literacy Coalition of Palm Beach County
211 Palm Beach/Treasure Coast	Mental Health Association
Boynton Beach Bridges Pathways to Prosperity	Office of Public Defender
Comprehensive AIDS Program of PBC	PBC Criminal Justice Commission
Center for Technology, Enterprise & Dev.	PBC Homeless Outreach Team
Department of Children and Families	Palm Beach Sherriff's Office
Drug Abuse Foundation	Palm Healthcare Foundation
Family Preservation	Community Partners
FoundCare Community Health Center	Quantum Foundation
Genesis Community Health, Inc	South County Mental Health Center
GEO Care	The Lord's Place
Gulfstream Goodwill	United Way of Palm Beach County
Housing Partnership	Workforce Alliance
Legal Aid Society of Palm Beach County	

## Primary Services Offered

The services provided also expanded as the actual needs of the ex-offenders were determined. According to a case manager, these are the primary services provided to the ex-offenders:

Case Management and Care Team	Pro-social outings and activities
Risk assessment (LSI-R)	Assistance with home repairs and taxes
Birth Certificate	Linkage to a primary care physician
State ID	Assistance with applying for health care benefits
Social security card	Health care (well visit, lab work)
Applying for social security benefits	Assistance with paying for prescriptions
GED	Transportation to appointments
Vocational assessment	Shoes & clothing
Job readiness class	Housing
Apprentice programs	Credit check and counseling
Job coach/job developer	Tax preparation
Bus passes	HIV class and testing
Legal aid	Mental health assessments
Detoxification program	Therapy
Inpatient substance abuse treatment	Cognitive behavioral classes
Outpatient substance abuse treatment	Thinking for a change
Prime for life—a class given by DAF that is geared toward those at risk for substance abuse	Client-directed outcome informed therapy
Assistance with driver's license fees and fines	Supported employment

In addition, many of the men received significant assistance from case managers and staff in advocating against discrimination in employment, for Medicaid reinstatement, and legal concerns such as driving tickets. The project even provided financial assistance to resolve fines.

Another change involved the targeted participants. In the proposal, the goal was to serve only ex-offenders from Delray Beach Fl. However, the geographic scope was expanded to include more cities.

## Evaluation Methodology

The evaluation consists of both quantitative and qualitative data collection to determine both process and product outcomes. Data collection activities included an annual on-line survey for stakeholders, interviews of program participants using ethnographic interview methods, focus groups, direct observation, interviews with stakeholders, and a cost benefit analysis.

## Individual Interviews with TJC Participants

Through the four year effort, the evaluation team conducted regularly scheduled interviews with clients of the program to learn about the clients from their own perspective. We asked a battery of questions to elicit information about their history, family, needs, concerns, and progress. A final interview elicited overall impressions of the program participants about successes and challenges of the program from their perspective.

**Interviews Conducted with TJC Clients by Evaluation Team**

	<b>TOTAL as of May 2014</b>
Initial interviews	125
Second interviews	74
Third interviews	52
Fourth interview	40
Fifth interview	19
Sixth interview	11
Seventh Interview	3
Eighth Interview	1
Final Interview	16
<b>TOTAL interviews conducted</b>	<b>341</b>

A total of 341 interviews were conducted. In addition, the evaluation team did interviews and direct observation with program staff and collaborative partners. The results of all the data analysis follows in the Findings Section.

## Findings

As of the time of this analysis there were 177 ex offenders in the Transition from Jail to Community Initiative. Sixty-one (61 men), or 34.5% recidivated, A snapshot of the men in this program reveals that the project has served a wide variety of male participants ranging in age from 18 to 70 with the average participant being 40.6 (standard deviation 12.7).

Half of the participants were Black (50.6%) and 44% were white.

Teens = 1 (.56%)

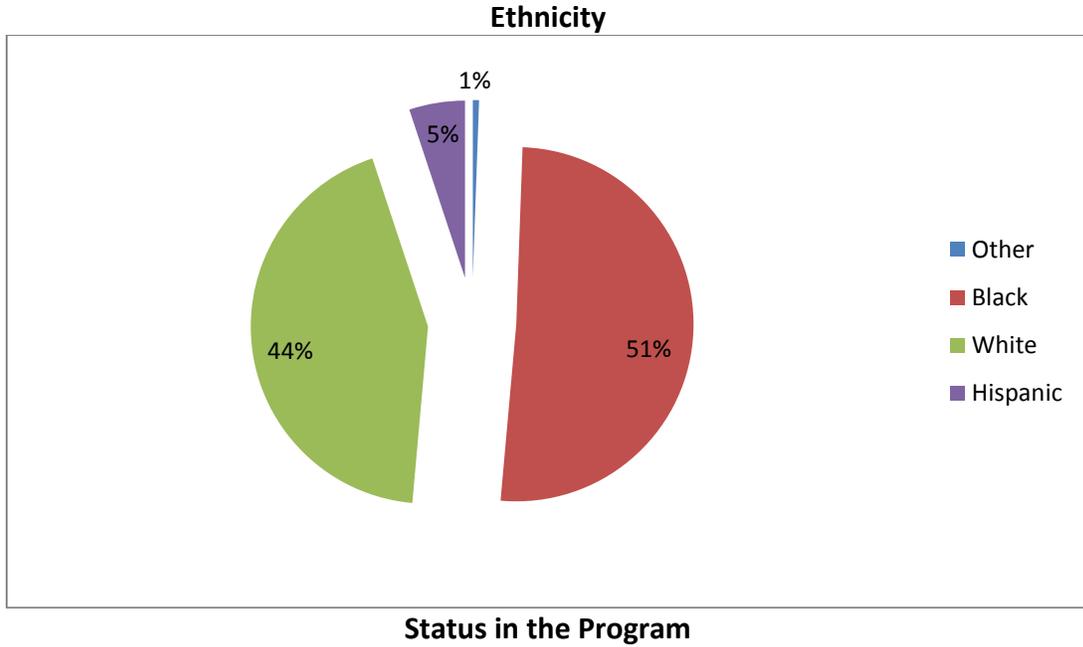
20's = 45 (25.4%)

30's = 44 (24.8%)

40's = 33 (18.6%)

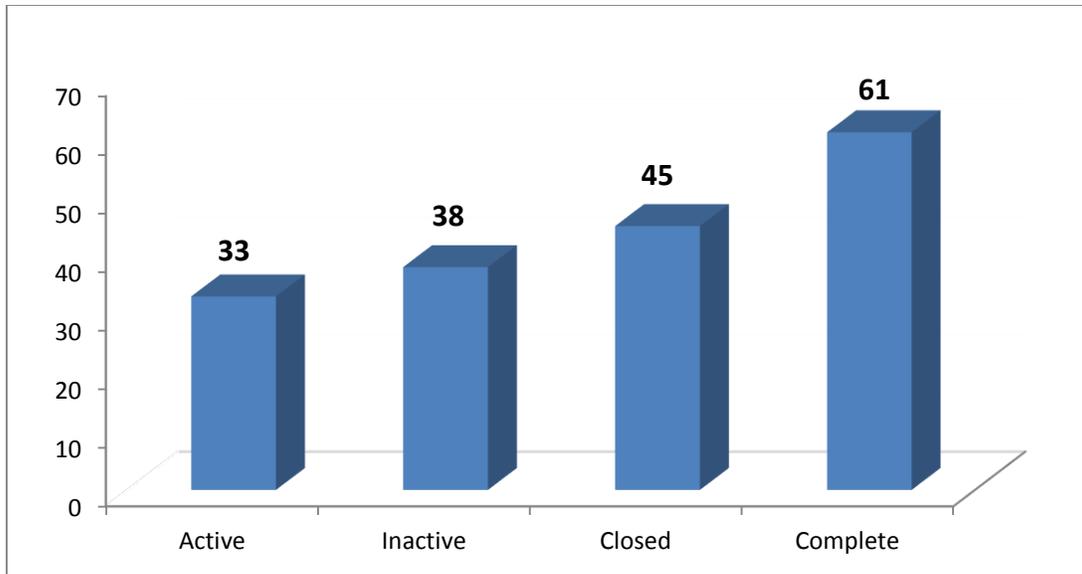
50's = 46 (25.9%)

60's = 7 (4%)  
70's = 1 (.56%)



As of May 2014, a total of 61 men (34%) successfully completed the TJC program (no recidivism for 2 years). Another 34 (19%) are considered currently active and engaged in the program. There were 38 men who have 'Inactive' status (21%), which means they have never been engaged in the program or have not been heard from in more than 90 days despite repeated attempts. A case was closed if a man had been given a jail sentence of six months or longer, they have recidivated 3 or more times since entering the program, or there has been two years or more with no contact. Forty five men (25%) fell into the 'Closed' category. Fifteen of the TJC participants have NEVER been active in the program (10%) according to Lords Place staff.

**Status in the Program as of May 2014**



### Residential vs. Community

When participants were released from jail, they were assigned to two groups: Residential and Community. Those that had no housing options upon release were assigned to reside in housing on the men’s campus of the Lord’s Place. After release from jail, 48% of the participants moved into residential housing and 52% moved into the community. All men were assigned case managers. However, those men in residential had greater access to the case managers because they were co-located on the same campus. One hypothesis we had is that those in Residential would have a lower recidivism rate because they had more direct contact with their case managers and more services were provided. Two men were moved from the community to residential during the program. The group of men who were ever in Residential had a recidivism rate of 32%, which is significantly lower than the group who were only in the Community (37%). This supports the hypothesis that people transitioning from jail to community are less likely to recidivate if they are in a residential program that provides both housing and case management and other services.

### Percent of Recidivists by Residential vs Community

	Recidivists	Total Participants	
Residential	28	88	32%
Community	33	89	37%
TOTAL	61	177	

### Percent of Recidivists by Active vs Not Active

	Recidivists	Total Recidivists	
Active	6	61	9.9%

Inactive	55	61	90%
TOTAL	61	61	

### Further demographic information about the participants

Not all demographic information was available on each of the participants. For those who had information available the following are some demographic characteristics of participants in the program: Some of the participants had family with about 25% indicating they were married or in a long term relationship and 56 percent of the participants indicating they had children. The group consists of 67% who indicate they did complete high school and 79% indicate a history of substance abuse. Since release from jail 55% had seen a doctor in the last year at their first interview. The group had a higher rate of felonies for their most recent incarceration compared to most groups studied for recidivism with nearly 48% of participants indicating a felony.

Recent participants in the program have been given the Level of Service Inventory-Revised (LSI-R), which estimates a risk of recidivism score of ex-offenders which aids in decision making about level of supervision and services needed by the client. Thus far 70 participants have been assessed with the LSI-R scores have ranged from 9 to 42 with the average score being 27.2 (standard deviation 7.0). One way to examine these scores to understand how better to set up interventions is to look at a cut score of 24 with those below being somewhat to very much low risk of recidivating and those above being more likely to recidivate. Of the 70 participants who have taken the LSI-R 18 (25.7%) scored below 24 and 52 scored above, indicating this is a high risk group in general. This is also seen by the number of participants who are being released from a felony offense. Of those scoring below 24, 11% recidivated, those at 24 and above had a recidivism rate of 33%. The overall number of recidivists in both of these groups is lower due to the LSI-R being given to only more recently released participants.

	LSI-R screenings	Percent of total	Number who recidivated	Percent who recidivated
Low risk (<24 LSI-R)	18	25%	2	11%
High risk (>24 LSI-R)	52	75%	17	33%
<b>TOTAL</b>	<b>70</b>	<b>100%</b>	<b>19</b>	

The average LSI-R score for recidivist was 30.0 (sd=4.7) versus an average score of 26.2 (7.5) for those who had not recidivated. Caution should be used with these findings thus far as only 70 participants have been assessed with the LSI-R and only 19 have recidivated (2 from the low risk group, 17 from the high risk group). However, the value of understanding risk from the LSI-R score can be seen even with this small sample. The scores can help the program design

interventions in individualized ways by understanding participants needs in part based on their risk scores from the LSI-R. It seems apparent that those who score below 24 are at a far lower risk of recidivating and may need fewer or different services than those with higher scores.

### **A Recidivism Prediction Model**

For this study on recidivism, participants in the program received a variety of services and had a variety of data collected from them. Due to the difficulty in interviewing and getting accurate, detailed information from each participant, the data does not contain values for each participant in every category. For instance, some participants revealed the number of children they had, others did not, similarly many were assessed using the LSI-R but the majority of participants were not. In instances where data are not complete for each participant, logistic regression and a prediction model is difficult since participants would have to be excluded from the analysis if they did not have data for all data points being included. In this instance, if a regression was run on the group of 177 participants, 107 participants would be dropped based on not having an LSI-R score. In these situations a better statistical measure to use to understand the impact of each variable on recidivism is the use of effect sizes. Effect sizes show the difference between two groups (in this case recidivators and those that did not recidivate) in terms of mean differences in the overall scores on a particular variable in standard deviation units, using pooled standard deviations. For instance, if the overall score on the LSI-R was 10 points higher for those that recidivated versus those that did not and the pool standard deviation for the LSI-R is 5, than the effect size (ES) for the LSI-R would be equal to .5. In the statistical literature, popularized by Cohen (1988), effect sizes are said to be small when ES = .20, medium effect when ES=.50 and a large effect when ES=.80. Effect sizes can be used to see which variables had the greatest effect on recidivism in this study even with unequal sample sizes.

For the main variables studied the effect size between the two groups is as follows (in order by strength of effect):

Employed	2.5
LSIR score	-.62
Living situation	.42
Months in program	.41
Received any services	.38
Married or LTR	-.38
Peer influence rating	.37
Pro social Activities	.36
Have children	-.29
Saw DR in last year	.22
Mental Health concern	-.22
Age	-.12
Age under 30	-.11
Felony first arrest	.08

Seriousness of SA	-.06
Angers easily	.05
Finished High School	.02

As can be seen from the above numbers the factors with the biggest difference for those who recidivated versus those who did not were in: employment, LSI-R score, the initial living situation, marital status, the number of months in the program and whether they received any services. It could be said that these 6 factors have a medium to large effect on the recidivism of participants. Similarly, factors such as being involved in at least one pro social activity, having children, seeing a doctor and having mental health concerns have a small, but significant, effect on the eventual recidivism outcome of participants.

It is also important to note that many factors which have in other studies been shown to affect recidivism have not been seen as having an effect in this group. Factors such as age, if the first arrest was a felony, the amount of education, or some personality factors do not seem to be significantly different between those who recidivated and those who did not.

Since there were different amounts of data available on the different variables cited above, the amount of confidence we have in the above numbers differs. For instance, data were available on the initial living situation for 175 of the 177 participants so there is more confidence in that number than the LSI-R score for which there is only data on 70 of the 177 participants.

### **Analysis by year entering the program**

The TJC program started seeing clients in the year 2010 and continued through May 2014. During that time 177 participants entered the program, 175 of which were classified by the year entering. In 2010, 25 participants started, 2011 had the most participants with 54. Recidivism logically may be expected to be highest for those who started the program earliest, however that was not found to be the case. While overall about 35% of participants were classified as recidivists, the highest percentage came from the year 2012, which had 53% of participants recidivating, 2013 had the lowest rate with just 13% of the 40 participants recidivating. Starting towards the end of the first year, most new participants were given a risk score based on the LSI-R. The average score on the LSI-R for all participants who took it was 27.2 (standard deviation = 7.1). Scores by year did not differ by more than 2 points from the mean in any year except 2011 when the average LSI-R for the 16 participants who took it was only 22.7. This group also had the widest variance with a standard deviation of 8.8 for this group, while other years had standard deviations in the 5-6 range. The lower scores for the year 2011 did seem to translate into lower recidivism for this group as only 31% recidivated from that year compared to 40% the year before and 53% the year after. Another way to look at LSI-R scores is to examine the percentage of participants who are considered at “low risk” of recidivating. Roughly a score below 24 would qualify as a low risk participant. In 2010 both participants who took the LSI-R were “low risk”. In the following years, 57%, 85%, 74%, and 50% were considered “low risk” by the years 2011-2014 respectively.

The living situation upon release from jail was also tracked by year. Of the 162 overall participants who were tracked on this, 55% were first in community living. This ranged from a high of 62% in 2011 to a low of 40% in 2014.

### **Recidivism Rate by Year Entering Program**

Year	Recidivism rate	LSI-R score	Percent first residing 'Community'	Number
2010	40%	28.5 (4.9)	54%	25
2011	31%	22.7 (8.8)	61%	54
2012	51%	28.3 (6.6)	57%	51
2013	12%	28.9 (6.6)	45%	40
2014	20%	27.0 (5.6)	40%	5

There were other notable differences in the participants by the year they entered the program. For instance, the percentage of participants who were married or in a long term relationship varied from a high of 44% in 2010 to a low of 15% on 2013. Emergency room visits saw a decrease from the first two years when 11 and 18 percent of participants went to the ER, to just 6 and 9 percent in 2012 and 2013. Those who saw a doctor in the past year also saw dramatic declines. In 2010, 72% of participants saw a doctor in the past year, this dropped to 55% in 2012 and then to 33% in 2013. The number of participants who were deemed to have “gotten services” showed fluctuation as well. One hundred percent of 2010 participants got services, but after that the number varied, with 73% getting services in 2011, 65% in 2012, 97% in 2013.

Overall, the average age for participants was 40.6 years (standard deviation 12.8), most years had a mean within two years of this average except for 2013 where the average age dropped to 34.7 (9.7). For this analysis, 93 participants have been given the designation of “successful” or “unsuccessful” with the program (the rest were either active still or closed). For the overall program, 61 (65%) have been “successful”. By year, 64%, 66%, 60%, and 83% have been successful for the years 2010-2013, respectively.

When examining the year of entrance to the program overall, the expectation would be for those longest in the program to have the most recidivism due to the amount of time available to recidivate. It may also be expected in later years that services improved with time and that could cause a change in some trends. Rates for most demographic features were similar in the years. The participants appear to have varied the most in 2011, although the change in giving the LSI-R starting at the end of year 1 could hide some small changes in that area.

### **Cost benefit/Cost effectiveness of program**

Recidivism rates vary state to state and can vary in different reports depending on how rates are calculated. The most cited authoritative studies on recidivism have been done by The PEW Center on the States in collaboration with the Association of State Correctional Administrators (ASCA). PEW studies have gathered information from 41 states (Florida did not participate) in

two major recidivism studies in 1999 and 2004. Overall, it appears recidivism rates have stayed fairly constant around 44% over the past 20 years. The most used estimate of the cost to keep one inmate locked up for one day is \$78.95 (PEW, 2009). The Palm Beach Sheriff's office estimates the average cost per day in the PBC jail as \$133/day. While many states are attempting to decrease the number of inmates, the state of Florida has been adding significant number of inmates in the twenty-first century. For instance New York and Florida both had approximately 70,000 inmates in the year 2000, in 2010 New York's inmate population had dropped to 60,000, while Florida's had risen to more than 100,000 (PEW, 2011). Policies and enforcement by states can have a dramatic effect on recidivism rates. For instance if one state requires three months of probation and another 3 years of probation the state with 3 years will have a much higher rate of recidivism due to technical violations in regards to the probation process. It could be for very positive reasons such as having more police officers which results in more crimes solved. Since Florida has increased its incarceration population by 43% since the year 2000, it is fair to assume that Florida has adopted policies that lead to increased recidivism, and the likely rate of recidivism in Florida would be close to sixty percent (as the incarceration population rises by close to 50% the rate of recidivism would likely rise by a similar amount). A program that could keep recidivism rates similar to national averages in a state that has increased incarceration by 43% could be seen as equivalent to a program in state with flat incarceration growth that decreased recidivism by 28% (assuming each state's odds of incarceration has now changed).

Recidivism is defined in this study as the act of reengaging in criminal offending despite previous being in punished. The rate is defined here as the proportion of persons released from prison who are rearrested, reconvicted, or returned to custody within a three year time period in the state of Florida. Many states are moving to using evidence based practices that have been shown to reduce recidivism rates by 50 percent (Andrews et al., 1990).

In the TJC program 177 clients have been served thus far, 116 of these clients have not recidivated. The average amount of days out of jail for clients in the program so far is 200 days. If all 116 clients had been in the PBC jail for 200 days, the cost of that incarceration would be \$26,600 per client or \$3,085,600 for all clients of the program. Of course, a more realistic view may be to examine the savings from the national average of 43% recidivism versus the 34.5% of clients in the TJC program. If 43% of the 177 had recidivated that would be 76 total individuals recidivating or 15 more than actually happened in the program. The PBC jail savings of 15 individuals not in jail for 200 days would be \$26,600, or \$399,000 overall.

One aspect of incarceration is the cost of processing offenders. While there is no national data on this cost, some studies have estimated the cost of a single arrest. Costs for this are derived by multiplying average time spend on a case in a category by police salaries including fringe benefits, estimated at \$22 per hour (Cohen, Miller & Rossman, 1994). The cost for processing also includes the cost of investigation, prosecution and court-related costs. The cost associated with processing offenders varies by the type of crime committed. For instance it was estimated the total cost of processing a murder offense was \$10, 724 as compared to a robbery at \$5,922 per case. For this analysis the cost of processing cases in Miami Dade county in 2005 dollars was used as the best evidence from peer reviewed publications. This cost for all crimes is

approximately \$6085.97 per offense. Based on 15 fewer participants recidivating it could be estimated that one area of savings the program has brought to the county is savings from no having to process offenders and the related costs which average to about \$6085.97 per offense. In this program 15 less individuals recidivated compared to what would be expected with the national average recidivism rate of 43%, thus the county saved the cost of processing 15 offenders for the various crimes they would have committed for a total savings of \$91289.55.

In addition to the cost of incarceration, the cost of crime to society or to individuals can also be calculated. Rand Corporation (2013) created cost of crime calculator to estimate a monetary value to different crimes based on society and actual cost. For instance the average motor vehicle theft costs \$9,079 per crime, while an aggravated assault costs \$87,238. If we assume the 15 individual difference rate due to the TJC program and the average crime cost of \$34,200, then the cost savings for the crime alone is \$513,000. If all 116 clients who had not recidivated had committed an average crime the cost to society would be roughly calculated at \$3,967,200.

### Cost of the Program

The cost of the TJC program can be difficult to measure. Many services are not paid for out of the grant (e.g., public defender work) that are a social cost. However, if the assumption is that those services will be available irrespective of the grant than the total cost of the grant thus far is \$991,200 (\$247,800/year). Since 177 clients have been served thus far the cost per client is \$5,600 per client.

Variable	Overall Cost: RWJ + Match (all in dollars)	TJC program Difference(based on average 43% national recidivism vs programs)	Per non-recidivating client (benefit of a client not recidivating)
Cost	1,362,060		7695
Benefits			
Non incarceration		372,400	26,000
Decrease in cost to process offenders		91289	6085
Societal cost saved		513,000	34,200
Total amount for benefit		\$976,689	66,285

variables included per year			
If amount of benefit were same for each of the 4 years of program		3,906,756	265,140
Cost benefit ratio		\$1:2.89	\$1:8.61
4 year Net benefit (the amount of dollar benefit minus the cost of the program)		\$2,544,696	\$257,445

The typical year cost of the program is \$340,515. That equates to about \$7,695 per client served. Of course some clients have been in the program for many years and some have just entered, so the cost per actual client would vary based on the services received. These data are being shown more for example purposes. The yearly benefit through these calculations mainly from the positive impact of the 15 client difference the program has caused in non-recidivism. This results in a benefit of \$976,689 in a year of savings from not having to pay to incarcerate, and process individuals as well as the societal savings that results in not having a crime committed. This does not include a variety of other benefits, such as SSI savings, family reunification savings and more. What this indicates is that for every year dollar the program has spent, it has saved the county and its people \$2.89 each year. However, with these rough calculations the benefit per non-recidivating client served in a year is almost at a 9:1 dollar ratio. The net benefit of the four year program is a cost savings of \$2,544,696 dollars to the county and people of Palm Beach. Approximately half of that savings is to the county in terms of dollars saved through not having to incarcerate and process offenders and half of the savings is to the public in dollars saved by not having a crime committed to them.

## TJC Participant Final Interview results

In April and May 2014, final interviews were conducted with participants of the program. A qualitative analysis of the results revealed the following trends:

- **Participants said they felt they had learned valuable life skills and social skills that were helping to improve their relationships at work, home and in the community.**

**AH:** *"I am thinking positive. I am looking at life totally different. No more arguing with my wife. The program taught me how to be more patient and not acting macho. We have been working and talking things out."*

**R:** *"I acquired a truck, got my license straightened out, have a better relationship with my daughter and see my granddaughter on a regular basis."*

**IJ:** *"I know how to deal with my problems. I don't have time to be angry, but when I do I have the coping skills to deal with it."*

**TO:** *"I don't drink beer anymore.. sober for 18 months. I would have episodes of depression when I drank."*

- **Many participants said they had more hope for the future because of the program.**

**HW:** *"I feel I have a fighting chance for recovery for everything. Hopefully to become financially stable."*

**A:** *"All my life I had been digging myself out of a hole. Now, I can see the top and want to help others."*

**MR:** *"I have hope. A lot of people in this program care about me and want me to do better. I'm not just a number."*

- **Participants reported improved relationships with children and grandchildren.**

**A:** *"I take my 9 year old son to putt putt on the weekends. I give him my attention. That is why he is an honor student."*

**R:** *"My daughter let's me take my granddaughter on rides."*

**AR:** *"My sister has become very supportive. It hadn't been for 25-30 years."*

- **The importance of support from case managers and other staff and partners cannot be underestimated.**

**A:** *"Talking to my case manager has helped me be honest with my decisions."*

**IJ:** *"Everybody in The Lord's Place, residents, staff, even residents that mess up give me motivation to stay on the right track."*

**HW:** *"Maurice saved me. He drove me to the probation office."*

- **A few of the men were fortunate enough to take on more leadership roles in providing peer support to others in the program. This has improved their self-esteem enormously.**

**AH:** *“My whole way of thinking is different. That is why Daniel made me a mentor here. I can go around and help as many people as I can.”*

**A:** *“I am being open, sharing, being honest & open minded. I run a group with Mr. Gilmore where we talk with the guys in accomplishing small goals and stress importance of staying clean and sober.”*

- **Program participants say that the housing provided kept them from being homeless.**

**WM:** *“This program without a doubt prevented me from being homeless. Mr. Philips and Mr. Maurice together (like Batman and Robin) cared the most and advocate for our (my) success.”*

**TO:** *“The Lord’s Place has prevented me from being homeless with its sober stable housing.”*

- **While program participants’ comments were predominantly positive, several are clearly still struggling and need further support.**

**PR:** *“It gets better at times and sometimes worse... I’m depressed.”*

**HW:** *“I’m still having stress from re-living the experiences from being incarcerated.”*

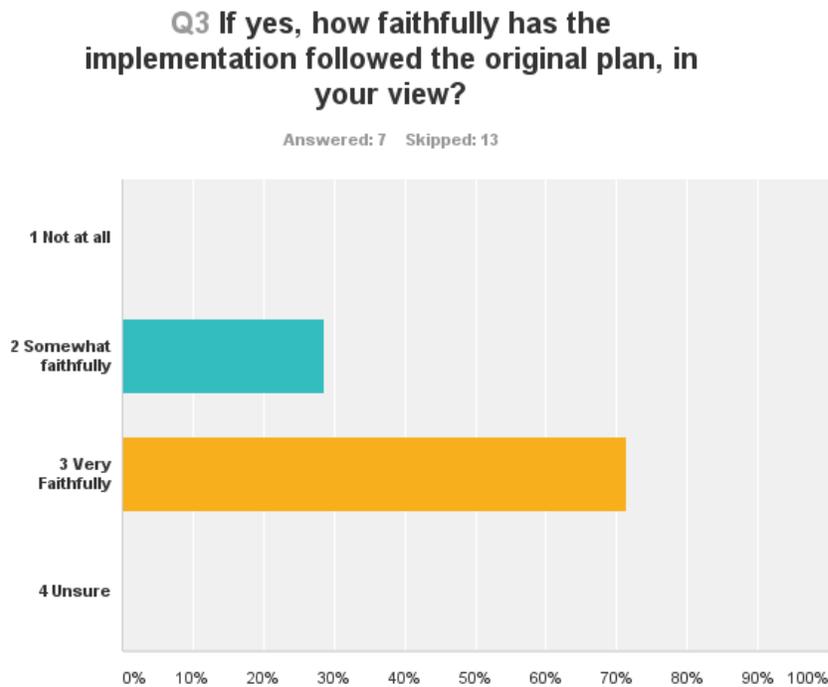
**MR:** *“My family are still very cautious and I think it will get better with time.”*

**TL:** *“Stress, emotional upset, anger has led to relapses in the past.”*

## Stakeholder Survey and Interviews

In June 2014 the fourth annual stakeholder survey was administered to all stakeholders and participant agencies in the TJC initiative. Twenty responses were received from staff, consultants, community partners, founders and funders of the initiative.

Most survey respondents (70%) said the implementation of TJC was *very faithful* to the original plan. Forty percent said they had been involved since the original proposal was submitted to RWJ.



## Systems Changes as a result of TJC Initiative

Stakeholders mentioned several times that this initiative has resulted in recommendations for policy and system reform and has resulted in increased coordination with other Reentry systems. By working with the broader re-entry task force, this initiative has worked to develop seamless solutions for all returning citizens.

Many of the systemic changes that have occurred during the implementation of TJC happen because individual clients have demonstrated needs or barriers to success that can only be addressed through systemic change. In any collaborative effort, these changes are difficult. Here are some examples of systemic changes:

- **Integration of reentry programs is leading to improved reentry services.** One of the biggest successes is that *“there is growing discussion in the community about reentry*

*services and needs beyond the TJC project.*” Due to these discussions, the project is developing new coordinated systems that will benefit all reentry clients, regardless of the program they happen to be in. For example, multiple reentry programs are now using a common database to track the services provided to clients.

- **Important new partners were added to the mix.** Another important addition was Geocare. This is the organization responsible for behavioral health care within the jail system. Project leaders were able to partner with Geocare to get the assessments from the Jail to South County Mental Health Center, which provided crucial information about the participants. Another added partner has been Genesis Health Center. For those TJC participants who do not have a medical home, Genesis provides basic health care services. Reentry coaches transport men who need healthcare to Genesis for this important service.
- **Collaborative provider staffing meetings.** Another example of systems improvement has to do with the case management of the clients. Each participating agency has unique ways of doing its business. Agencies are historically not used to working together and sharing information about clients. The partnering agencies quickly realized that the only way this collaborative effort could work effectively is to meet regularly and ‘staff’ the cases together. The reentry coaches and other partnering agencies now meet to discuss the challenges of individual cases and look for creative solutions together. Service providers met consistently to collaboratively identify challenges for individual TJC participants and work together to solve problems. These ‘Care Team’ discussions work to solve problems one at a time and highlight systemic challenges that are needed. Everyone involved agrees that these are extremely valuable for collaboration and communication among agencies and lead to creative problem solving for the clients.
- **Communication and collaboration between providers greatly increased.** There is better communication between providers in the network. *“Communication and collaboration has truly improved among TJC Partners. With the opportunity to focus services specifically to the individual who is known by all parties in the monthly meetings, has created a synergy that rarely exists among nonprofits in our Community.”*
- **Armor and Lords Place staff fixed the problem of participants not having Medicaid when they are released from jail.** A man with a serious illness needed health insurance for health care and for medication. He had been out of jail for 2 months and neither Medicaid nor the Health Care District was willing to insure him. It turned out that the man appeared to have health insurance in the system. The computer showed that he was not Medicaid eligible if the jail did not share the cost by a certain time in the month. This issue was resolved and the knowledge will prevent this from happening again.
- **Inmates are more likely to get medical care they need while still in jail and be transitioned to a medical home once released.** As one stakeholder said *“Armor now looks to connect their guys to a medical home instead of just releasing them into the streets with no stable medical care.”*
- **Uniform Assessment of Clients.** Clients of the TJC program are receiving a more consistent assessment of their needs than was the case before the program existed.

- **Data collection about re-entry population more consistently gathered.** The project has encouraged the gathering community-wide data in a unified database.
- **Agencies have been willing to change long-standing policies and procedures to ensure the success of the initiative.** In addition to helping develop and administer a pre-release assessment instrument to use with prospective TJC program participants, the Palm Beach Sheriff’s Office has changed their policy of releasing TJC participants in the night and on weekends so that case managers could be available to pick them up at the jail. This immediately improves the changes that the participant will successfully make the transition directly from jail into the program. Needless to say, this is one of the most important systems changes this initiative could have instituted and the PBSO has been very cooperative in this matter.

**Successes**

Survey respondents were asked to rate the initiative on a variety of factors with a rating of 1-5. Areas in which the initiative received high ratings include:

<b>Answer Options</b>	<b>Rating Average 2014</b>
The overall purpose and goals of the TJC collaboration are clear to me.	4.53
I understand my role in the TJC initiative.	4.58
The communication among partners is good.	4.37
Unexpected issues are dealt with well.	4.33
The overall decision making/leadership process is working well for TJC.	4.47
The TJC partners are engaged in the collaborative effort.	4.21
TJC is coordinating well with other Reentry Programs.	4.44
The TJC program is doing all it can to prevent recidivism.	4.33

When asked to describe a success that can be attributed to this TJC effort, stakeholders’ responses fell into the following categories:

- **Strong collaborative partnerships and regular partner meetings regarding the client’s care (CARE team) resulted in the successful transition of many clients back into the community.**

*“Over four years TJC partnerships have untied and formed a true collaborative that is sensitive to one*

*another's roles and needs, flexible and responsive. TJC clients benefit from the organization and partnerships."*

- **A particular strength of the TJC initiative was the fact that the services provided have led to stronger families.**

*"I have seen family lives rebuilt by the services of TJC."*

- **The TJC program has built strong bonds with other reentry efforts that have emerged in our community and all are stronger as a result of this collaboration.**

*"A countywide network of reentry services now exists. TJC and The Lord's Place played a major role in developing this network and implementing services"*

*Particularly successful is that we are 'continuing to improve collaboration between various reentry efforts.'*

*"We need one voice around the need for re-entry services to be thought of as part of entire continuum of care."*

- **Program participants have been provided with a variety of services that improve financial security and stability.**

*"Several clients have been successful in financial re-establishment in identity protection, tax returns and credit management."*

*"I feel one of the successes I can describe is being able to meet with the new TJC clients through their case managers and this provided the opportunity to allow us to enroll them into the job training program. We were able to watch them learn and grow with the process as well as find employment."*

*"A middle age client with multiple arrests for DUI completed 2 years of college and is now working full-time at a recovery center."*

*"Anthony participated in the TJC program. As a result he completed a Chef Training program at The Lord's Place. He was recognized for his leadership skills and his desire to be successful. When an opening became available for a Reentry Peer Mentor at TLP, Anthony applied for the position and was hired. He continues to work part time in our culinary program and part time mentoring reentry clients."*

- **Addressing the health and mental health needs of the participants was critical.**

*"Establishing a medical home for clients is key!"*

*"Expedited access to health care, especially mental health and therapy services [was extremely valuable]."*

- **Improved relationships among services providers helped to break down silos and improve our system of services.**

*"Great partnerships have developed. Terrific commitment from all partners. Our community has really come together to collaboratively address this issue from a systems perspective."*

*"There seems to an improved attitude of providers to work together for a client's betterment."*

*“Improved community based organization, service organization and PBSO relationship in support of program participants.”*

## **Challenges identified by Stakeholders**

Analysis of TJC Stakeholder survey and interview data have revealed a number of challenges affecting both the services delivered and the process of implementing the initiative. These challenges have in many instances been addressed but can be used as a cautionary tale for others wishing to implement a similar program.

**Pre-release and Intake.** A major accomplishment of the initiative has been the targeting people who are still in jail, picking them up when they are released and providing immediate services. However, many stakeholders still feel that there is not enough done in the pre-release phase.

**Family Reunification.** While many in the program wanted to do pre-release family engagement, the challenges to doing this have been significant. Two-thirds of the TJC participants report that they have children (64%). Some stakeholders believe that there should be an emphasis on service plans that engage the whole family as a way of reducing recidivism. There was some discussion about attempting family engagement through Skype—especially for those who scored high on family engagement in the LSI-R. However, jail officials state that the jail inmates could potentially ‘manipulate the computers systems’ and have not been willing to attempt this strategy. The Sheriff’s office and the Public Defender’s office have both suggested they could offer video visitation, however the families would have to find transportation to the video locations. However no significant pre-release family reunification occurred.

**Community-based participants difficult to reach.** A continuing challenge was to *“maintain engagement with community-based participants”*. A number of survey respondents said that it was a challenge to get *“community based clients to buy into the services and that people are trying to help them out.”*

## **Sustainability**

In a survey conducted in May 2014 (at the end of the initiative) concerns revolved around the sustainability of the program once Robert Wood Johnson Foundation funding ceases. Stakeholders are worried that *“funding will be reduced thereby affecting future opportunities for clients to start back on their path to prosperity.”*

*“If beds are not available when a referral is made, and the individual has shown an interest in the program, more effort should be made to find that person a bed, SOMEWHERE. Hot team/Lewis Center appointments need to be expedited for these clients so that they do not slip through the cracks.”*

*“As with any project of this scope and type - the main concern is sustainability and growth - are there enough resources to support the effort ongoing? From the meetings that I have attended it seems the collaborative nature and partnerships will go a long way toward that - and there seems to be a good proposed case for*

*sustainability - but can the lead agency keep the support beyond the grant period? Fingers are crossed..."*

One stakeholder said that the program *"needs to be sustained and funded through the Sheriff's Office."*

In addition, many of the recommendations from our last report have been implemented including:

- The LSI-R risk assessment tool has been adopted for use starting July 1, 2012
- A new Data Management System (developed by the county and in use by other reentry programs) has just been adopted for use starting in July 2012.
- Participants are entering the program through an organized system created by the Sheriff's office and TJC staff.
- Increasing numbers of TJC participants are being picked up at the jail to get them engaged in the program as soon as they are released.
- Leadership has developed new policies about how long someone is in the program and from what regions of the county they can come from.
- TJC client cases are 'staffed' by service providing partners to improve communication and create collaborative solutions.

## **Discussion and Lessons Learned**

TJC produced significant results and advantages for the ex-offender participants, stakeholder participants, and for improving the system as a whole. Data from 177 ex-offenders were included in this analysis. (Final data analysis began on May 25, 2014.) For the overall program, 61 men have successfully completed the program and have not recidivated for at least 2 years.

While those who wrote the original proposal hoped for a 20% recidivism rate (optimistically), the TJC program achieved a recidivism rate of 34.5%, which is significantly lower than the literature predicts (44% according to the Pew research). This rate was achieved in spite of the fact that the Transition from Jail to Community project tended to admit high-risk participants to the program as measured by the LSI-R risk assessment tool, which was administered to a sample of the participants (N=70). Seventy-five percent (75%) of the participants assessed fell into the high risk category and 33% of those did recidivate compared to only 11% of the low-risk group.

The success of this program relies heavily on several factors:

- **Housing.** Whether the ex-offenders were assigned to residential housing with close proximity to case managers or went back to the community (48% were assigned to housing upon release from jail). Those in the community had a higher recidivism rate (37%) than those that had been in residential housing at any point in their participation (32%).
- **Collaborative teams involving multiple agencies.** Collaborative teams involving 25 agencies provided a wide array of services to the participants designed to lower their risk of recidivism proved extremely successful. Care teams co-staff the participants and

looked for creative ways to serve them without duplicating services—thus reducing the silos that had existed in the past.

- **Case Managers.** The diligence of the reentry specialists in engaging the ex-offenders despite enormous challenges in communication was critical—particularly with the participants living in the community.

Participants reported that they really appreciated knowing that someone cares, and further that a lot of people from different agencies were willing to work together using a team approach were willing to work together to help them. They needed a fresh start. Through the TJC support they were provided the opportunity to improve their path. The active participants reported a sense of community and appreciated being part of a supportive system.

Many of the men in the program have demonstrated reduced risk of recidivism by taking advantage of the TJC services such as: job training and placement in employment, assistance in obtaining stable housing, and by taking advantage of other TJC services. In other words, they are ‘working the program’ and the return on investment is positive. In addition, the longer a person is in the program, the lower their risk of recidivism.

**Lessons Learned.** The lessons learned about the needs of the reentry population and the challenges of serving them with a multi-agency strategy will be valuable to any community that attempts to replicate this effort. Following is a summary of recommended components of the initiative. Some of these recommendations are very challenging and some were added or modified as we learned along the way:

### **Pre-Release Contact**

- When possible, provide pre-release contact, education and skills building services for participants. This requires buy in from higher levels of law enforcement, policy makers and elected officials. Jail offenders are often released with little notice, but their chances of recidivism are increased if they are not engaged in the program or do not have the education and skills building required to enter the work force. This becomes an important variable in whether they will recidivate or not.
- Find ways to incentivize prospective TJC participants to engage pre-release—especially if they will be in jail for several months before their release.
- Work to make sure that prisoners are released from jail at a time when case workers can be there to pick them up.

### **Program Considerations**

- Administer the LSI-R risk assessment tool from the beginning. This enables the program staff to customize the services to the level of risk of each participant. This information is also valuable to the evaluation team and will enable us to compare risk and success levels of participants consistently in the fourth year of the evaluation. Focus on matching the level of services to the individual risk level; higher risk men should receive more targeted services.

- Reentry coaches must also examine whether the services being provided are the ones that will be most helpful to the men. An individualized plan of action should be developed for each participant prior to release. Based on the assessment, the plan should address each participant's risk behaviors, strengths, and areas of need including: behavioral health and substance abuse treatment needs, employment and education, health diagnoses, housing, available resources, and the logistics of release. A strong plan helps guide and manage reentry preparation, the moment of release, and the reintegration process. The plan should also include supervision level, programming, daily schedules, community service hours, and any court-ordered conditions. It is important that case managers screen for domestic and family violence and take these issues into consideration when developing plans.

To maximize the effectiveness of the plan of action, participants must be engaged, adhering to the plan in jail and especially in the community. Reentry coaches serve an important role in planning and overseeing service delivery both in jail and in the community and in engaging individuals in their own transition process. Reentry coaches should work intensively with participants to develop comprehensive and dynamic plans at least 30 days prior to release. The plan of action should address all life domains and identify necessary wraparound supports. It is important for Reentry coaches to meet with service providers and other partners for soon-to-be-released program participants to plan for and coordinate post release services and prepare the continuum of care in the community. The Reentry coaches should actively work with participants after release to assist with family reunification; employment; legal matters, such as child support; permanent housing; education and job training; and logistical items that are necessary to restore basic life liberties, such as a driver's license or photo ID, emergency food, clothing for a new job, or a bus pass. All activities need to be appropriately documented in the participant's case file.

- Reentry Coaches should create a solid transition plan from jail to the reentry program for participants and make sure that all program participants are going through the same intake process and that residential and community based program participants are receiving the same services (except housing). At discharge from jail, participants have basic and immediate needs. To varying degrees, they may need identification, personal clothing, appropriate medication, other health and mental health services, housing, and transportation. Through creation of an individually tailored transition plan, participants will be prepared for the first 24-48 hours after release. The transition plan guides them in accessing basic necessities and plan where they will go immediately upon release, how they will get there, where they will sleep the first night out, and where they will go for initial health care or treatment appointments.

Focusing on the discharge from jail process is not a replacement for a more broad-based Service Plan or Individual Action Plan (IAP); rather, it is a specific tool for managing the discrete period immediately following release from jail. This can be accomplished by doing the following:

- Provide resource guides and reentry handbooks.
- Identify community-based services and as needed, make appointments to carry out a post release treatment plan.
- Arrange transportation at the gate and, ideally, for a family member, mentor, or other positive contact to meet the individual at release.
- Prepare applications for identification documents.
- Provide a temporary supply of medication or appropriate prescriptions and coordinate the application or immediate reinstatement process for federal benefits.
- Develop detailed service plans or Individual Action Plans (IAPs) for each client that include goals and service provision that will help reduce recidivism and engage community partners. Reentry Coaches need to ensure that immediate care is provided to all participants. The work that is done in jail to begin treatment, develop relationships with service providers, and connect individuals to service appointments in the community will have little impact without immediate follow-up in the community. It is important to provide continuity of care, initiating immediate care through services, training, treatment, and case management as soon as the participant is released.
- Develop care teams that meet regularly to discuss individuals' needs comprised of agencies in the community to work together to provide the services needed.
- Think about focusing on providing housing to all or most of the participants because it is so difficult to stay connected to participants living in the community.
- Provide increased incentives for the men to become and stay engaged—especially those living in the community. A significant challenge of this initiative is that of engaging all the participants, whether they are living at Lord's Place or in the Community. This starts at pre-release and continues through the life of the program. The initiative will never achieve 100% participation, but there may be creative new ways to keep especially the community men involved. Continuing to work with the men before they are released, picking them up at the jail when they are released, and doing a formal intake with them into the program with significant orientation activities will help.
- Provide structured pro-social activities and outings improve recidivism rates. Events include cookouts, bowling, theatre events, fishing and more.

#### **Documentation**

- It is critically important to accurately document all services needed and provided so you can map all the resources and services needed by an ex offender. A unified database accessible by all providers in the collaboration works best.
- Start from day one collecting data for evaluation. Keep careful records of what services are being delivered and the outcomes.

#### **Larger Advocacy and Sustainability issues:**

- Create funding partnerships with a variety of national and local, public and private funders to ensure the long-term sustainability of the initiative.

- Combine advisory committees of multiple reentry programs to develop one voice around the need for re-entry services to be thought of as part of entire continuum of care.
- An ex-offender should not leave jail without an identification card. However, they can't get ID without an address. Every person should be able to get some form of ID before leaving the jail.
- A suspended license should not result in re-arrest.
- We have to 'Ban the Box' so that ex-offenders who are applying for work do not have to check a box at the top of an application saying they are felons. Let's give them a chance!

In conclusion, this evaluation suggests that there have been significant successes in the Transition from Jail to Community Initiative. It is clear that the partners have been committed to the initiative, and that this commitment is making a difference in the lives of the participant clients.

*"TJC has renewed my passion for the reasons I chose to work in nonprofits. It is a shining star among many programs which promise much but deliver little. Keep up the great mission and I will say my prayers for continued support for TJC!"*

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## Appendix A: Evaluation Overview

### Purpose of the evaluation

The TJC evaluation team is collecting data that will provide a basis for program improvement recommendations as well as to deliver a measure of accountability of program benefits for funders and the community. In addition, this evaluation is generating knowledge about the challenges and successes of this program, the number of clients served, the collaboration as a whole, and the benefits to the community and will be used to highlight policy and community needs in order to advocate for positive change. Finally, we hope to prove that the TJC model of providing men who are reentering the community with supportive services from a collaboration of partners is the primary reason those men do not get re-arrested and thus cause the recidivism rate to go down.

### Evaluation Outcomes, Indicators, and Performance Measures *(from evaluation proposal)*

The program services of TJC address the systemic causes of re-incarceration and the challenges caused by the stigma of being former prisoners; namely the lack of full employment, housing instability, inadequate support systems, insufficient resources, inappropriate living skills, and minimal self-sufficiency.

We also take into account the [2009 Florida Prison Recidivism Study](#), which looked at releases from 2001 to 2008, May 2010 by the Florida Department of Corrections. This research shows the male recidivism rate for a three-year period is **34.7%** and the factors that influence an inmate's likelihood of recidivism include:

- prior prison commitments (more priors → higher recidivism);
- their age at release (younger → higher recidivism);
- their behavior while in prison (more disciplinary reports → higher recidivism);
- their tested education level (higher grade level → lower recidivism); and
- number of theft/fraud offenses in criminal history (more offenses → higher recidivism).

Some other relevant data reported in this study: "The Bureau of Justice Statistics report, "Recidivism of Prisoners Released in 1994 (2002)" shows overall recidivism rates for releases from 15 different states. That report shows a **51.8%** recidivism rate (return to prison for any reason within three years) for this group of inmates." (p.2)

Primary performance measures for this project include:

- At least 80 percent of all clients will stay out of jail for the duration of the grant.
- At least 80 percent will have a medical home and at least one primary health care visit per year.
- At least 80 percent will achieve progress toward the goals of their Individual Action Plans (IAP).

A variety of secondary measures were also examined. The following is a preliminary list of the potential indicators to be tracked through self-report and through independent verification. The

Methodology Section will describe in some detail the methods for collecting both quantitative and qualitative data to measure these indicators of success.

**Baseline data:**

- Historical and assessment data taken from each client during initial assessment.
- Generic data from the community as a whole regarding recidivism, housing, employment, and other indicators.

**Primary Indicators:**

- Percent of all clients that stay out of jail for the duration of the grant.
- Percent that have a medical home and at least one primary health care visit per year
- Percent that make progress toward achieving the goals of their Individual Action Plans (IAP) including:
  - Housing and food stability
  - Economic stability and financial literacy
  - Mental Health and Substance abuse treatment
    - Medication compliant (if they have mental health diagnoses requiring medication)
    - Keeps appointments
  - Receive life skills training
  - Resolve legal issues and gain legal self-sufficiency
  - Supported employment
  - Improved literacy and job skills
  - Self-sufficiency
  - Family reunification achieved

**Secondary Indicators we attempted to study include:**

- Percent with positive, caring relationships
- Percent that have consolidated debt, paid off dept and saving toward the purchase of a home
- Percent with academic degree
- Percent with no dependency issues
- Percent of children of clients who are doing well in school; lack involvement with the juvenile justice system,
- Percent of fathers that are screened as having positive father involvement
- Percent that receive individualized coaching/case management and aftercare services