

Opening Avenues to Reentry Success (OARS)

FISCAL YEAR 2012 ANNUAL REPORT

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INTRODUCTION

The OARS program, modeled after the DHS Conditional Release Program, is a joint venture between the State of Wisconsin's Department of Corrections (DOC) and Department of Health Services (DHS). The purpose is to fund, coordinate, and administer quality reentry services to the highest need and risk based population of mentally ill offenders as they prepare for their release from prison and transition to the community. The offenders who choose to participate in this voluntary program are provided an array of comprehensive, individualized, wrap-around services specific to their needs and risk factors. The OARS program employs a team approach involving institution treatment staff, contracted forensic case managers, community corrections agents, DHS program specialists, and community treatment providers.

The offenders served by the program include the most seriously and persistently mentally ill individuals releasing from the prison system who are assessed at a moderate or high risk for reoffending. Recidivism and revocation rates for this target population are much higher than average and the need for crisis intervention services (i.e. detoxification facilities, emergency detentions, emergency room visits, psychiatric hospitalization, law enforcement intervention, etc.) pose a significant financial burden to local county and city governments, as well as state taxpayers. Furthermore, members of this population that return to prison typically require far greater institutional resources than the average inmate.

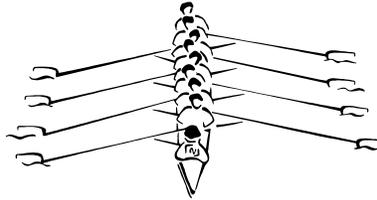
While the primary focus of the OARS program is to enhance community safety, the program is also likely to demonstrate substantial cost savings. Providing these individuals with intensive and effective transitional services for up to two years after release from prison the cost savings is substantial, in comparison to the average costs associated with incarceration. The FY 12 average annual cost to incarcerate a general population inmate is approximately \$33,221. The FY 12 average annual cost to incarcerate a mentally-ill inmate at the Wisconsin Resource Center is approximately \$136,427. There are also significant benefits for the individual offenders' in terms of offering them the support they need to successfully reintegrate into society.

OARS team members carefully manage risks by employing evidence-based practices such as targeting high-risk and high-need offenders; emphasizing medication compliance; utilizing person-centered, strengths-based, and motivational interviewing approaches; and drawing upon a hybrid of other proven program models.

This program strives to develop and share innovative ideas, program successes, resources, and comprehensive outcome data for the betterment of statewide correctional services and national forensic programs. Strong team relationships have been developed across departments and with private contractors in order to manage risks, maximize efficacy, and provide quality service to individuals in the pre-release and post release phases of the Wisconsin correctional system.

This report provides an overview of the OARS program's second year of operations and presents goals and initiatives for the coming year. For optimal effectiveness, services for this population must be well-coordinated through a seamless service delivery system. Therefore, this report also highlights information from the DOC, Division of Community Corrections (DCC), Wisconsin Resource Center (WRC), and Taycheedah Correctional Institute (TCI), as well as the DHS contracted case management service providers.

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MISSION:

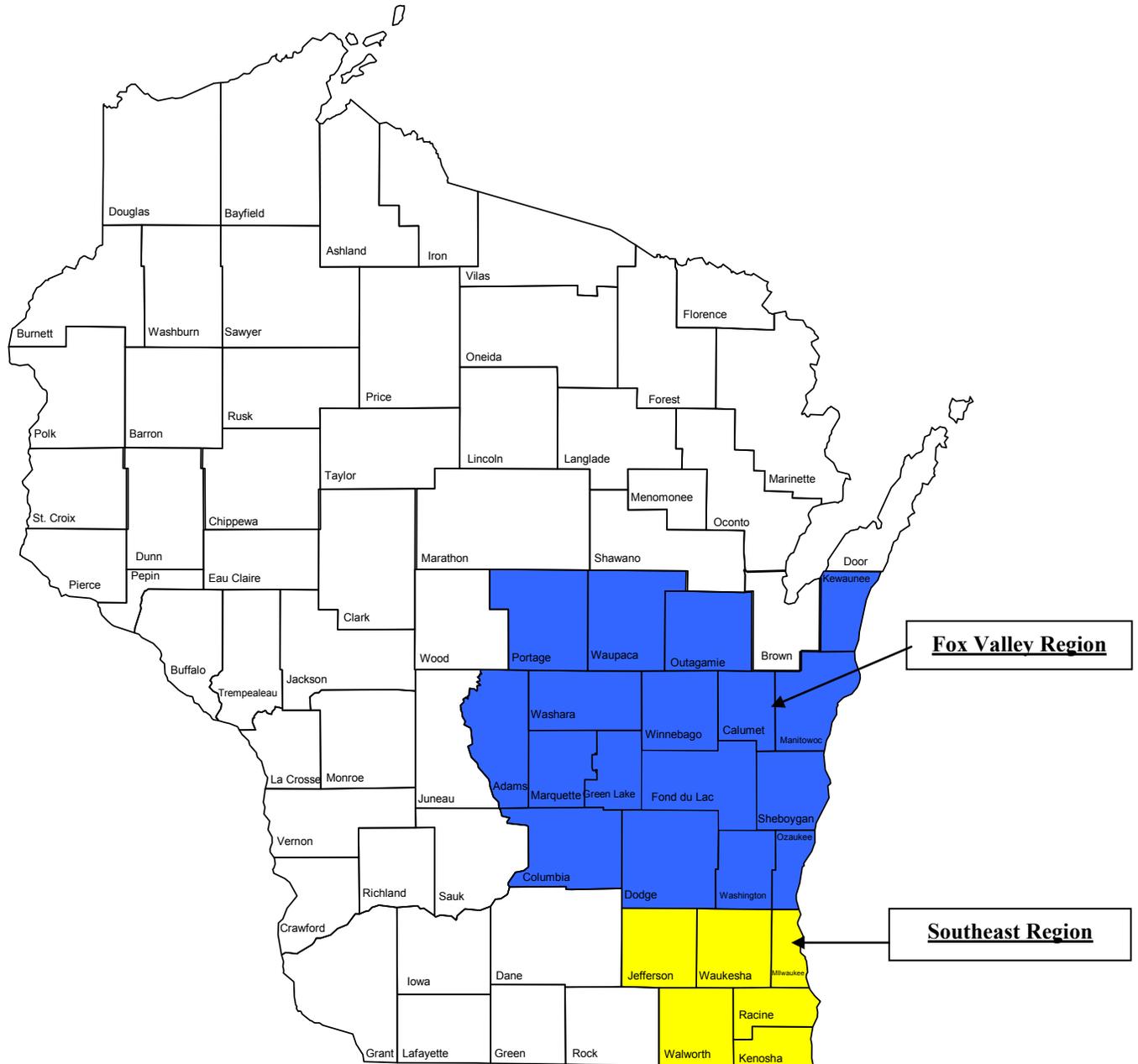
To reduce recidivism and revocation rates through specialized supervision and individualized case management.

VISION:

To enhance public safety by supporting the successful transition, recovery, and self-sufficiency of offenders with mental health needs as they reintegrate into the community.

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PROGRAM COVERAGE MAP



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PROGRAM ACCOMPLISHMENTS - FY12

During the second year of operations, the OARS program accomplished many tasks and finalized the program policy and procedure manual. The institutions, agencies, and staff supporting the OARS program are committed to the program mission and vision. The two DHS contracted case management providers, Adult Care Consultants (ACC) for the 17 counties of the Fox Valley region, and Wisconsin Community Services (WCS) for the 6 counties of the Southeast region, have a long-standing history of providing services within the DHS Conditional Release Program. Both agencies have expanded their scope to address the unique challenges presented by the OARS population. After two years of operating and serving many participants, the multi-disciplinary teams have developed creative ways of working together to address the needs of the population.

Institution Highlights:

- Wisconsin Women’s Resource Center (WWRC) and Robert E. Ellsworth Correctional Center (REECC) joined WRC and TCI as institutions working with the OARS Program;
- Approximately 35% of OARS participants have engaged in pre-release institutional AODA or Dual Diagnosis treatment programming;
- Refined internal institution processes for identifying potential OARS candidates and accurately screening them for program eligibility;
- Encouraged all program participants to engage in and complete the identified pre-release curriculum programming available at each institution.

Institution	% of institution enrollees who <u>participated</u> in pre-release curriculum	% of institution enrollees who <u>completed</u> the designated pre-release curriculum	% of institution enrollees that <u>participated</u> in the Applying Wellness and Recovery Program (AWARE) <u>WRC; WWRC ONLY</u>
TCI (women)	81%	6%	N/A
REECC (women)	100%	0%	N/A
WWRC (women)	34%	0%	67%
WRC (men)	72%	50%	70%

OARS program participant involvement in pre-release curriculum classes and treatment opportunities remains a priority for the institutions and the OARS program. The OARS program supports the institutions in their efforts and strategies for providing increased opportunities and encouragement to OARS participants to engage in these pre-release treatment programs and classes.

Fox Valley Region Highlights (ACC):

- Partnered with Sheboygan County to provide Dual Diagnosis treatment that promotes recovery through hope, healing, and empowerment groups to program participants;
- Explored and created opportunities to offer peer support to program participants;
- Provided education and team building efforts to area CBRF's;
- Implemented monthly Motivational Interviewing skill-building exercises for the OARS case management team, in an effort to support and embrace the importance of on-going practice and professional enhancement.

Southeast Region Highlights (WCS):

- Developed a pre-release assessment process including a pre-release interview questionnaire to assist case workers in securing significant participant information and formalizing essential treatment information and risk factors into one comprehensive document;
- Established incentive programs to motivate participants to avoid problematic behaviors and to follow through on positive behaviors;
- Expanded community resources (in all service areas) and developed relationships with new provider agencies;
- A cognitive restructuring group was developed by Traci Gauthier, MS, LPC, SAC at Unlimited Potential, designed specifically for OARS participants, which incorporates DBT and *Thinking for a Change*;
- Collaborated with Milwaukee County's Mi-LINC program to serve women with substance abuse issues being released from TCI.

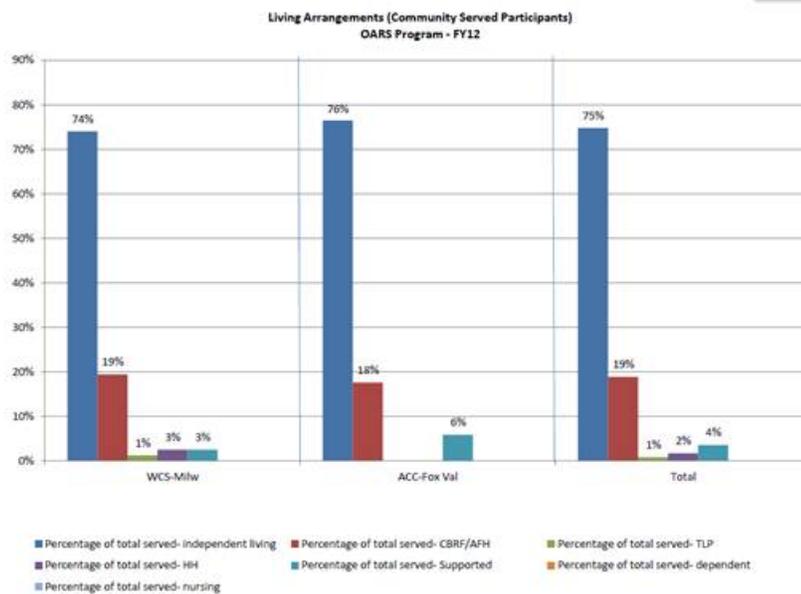
OARS Program Highlights:

- Focused on enhancing the opportunity for eligible inmates to participate in the program by lower the costs associated with serving each individual;
- Completed and distributed OARS program manuals to all stakeholders and staff;
- Partnered with WRC to offer an NIC grant funded *Thinking for a Change* facilitator training to select staff associated with ACC and WCS, in an effort to enhance cognitive behavioral strategies for working with this population;
- Organized training and educational opportunities for OARS program staff, including: Person Centered Planning (PCP), Trauma Informed Care, and Sex Offender Supervision;
- Worked with the contracted case management agencies to educate community organizations about the OARS program in an effort to build resources and treatment opportunities for the program participants.

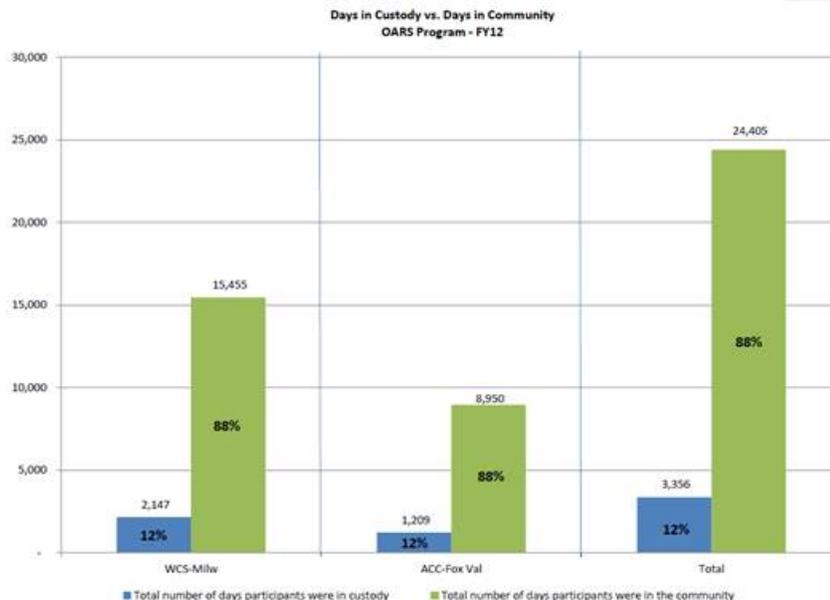
OARS Program Data Highlights: (please see data section for more details)

- The program provided services to 142 participants, of which 111 participants were served in the post release phase
- 61% of participants were referred to the program with a high risk rating, based on DOC assessment tools
- 97% of participants had a primary major mental health diagnosis
- 75% of participants suffered from a diagnosed co-occurring substance use disorder

- 72% of participants were diagnosed with a co-occurring Axis I major mental illness and an Axis II personality disorder
- 21% of participants were subject to sex offender supervision rules
- 4% were convicted of a new crime during their enrollment in the program
- 66% of post release participants were receiving SSI and/or SSDI benefits
- 87% of post release participants were receiving Food Share
- 2% of post release participants were receiving benefits through Family Care
- 75% of participants resided in independent living during the majority of the post release phase (See bar graph below for more information)
- 19% of participants resided in a CBRF or Adult Family Home throughout the majority of the post release phase (See bar graph below for more information)

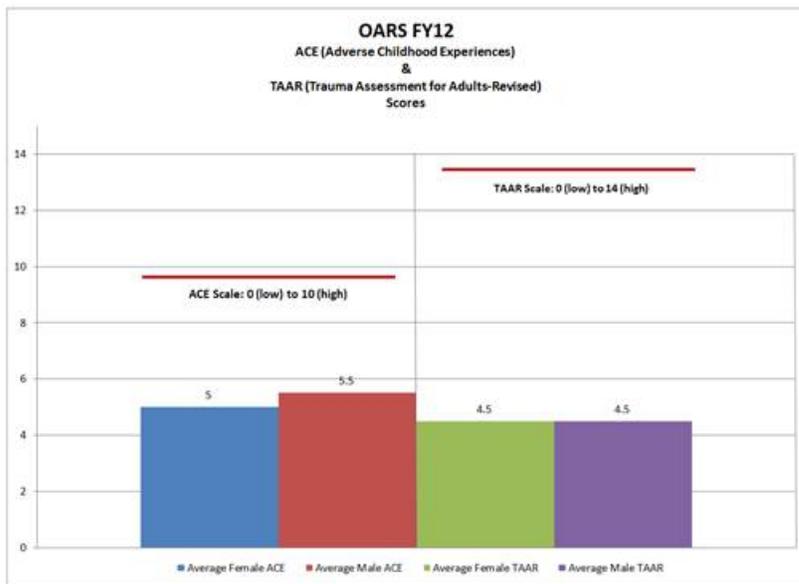


- During the post release phase, OARS participants spent 88% of their time in the community vs. 12% of their time in custody (See bar graph below)



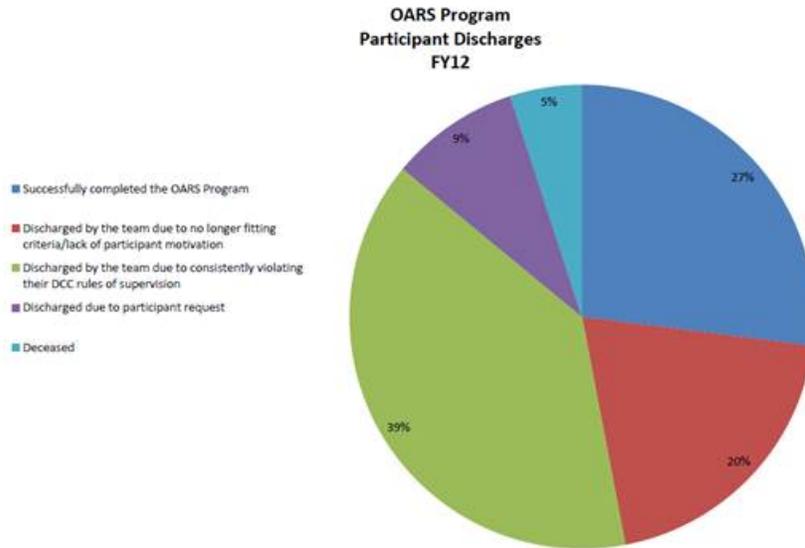
As part of a larger Trauma Informed Care initiative, the OARS program utilizes two trauma screening tools: The Adverse Childhood Experiences (ACE) and Trauma Assessment for Adults- Revised (TAA-R).

These screening tools are administered by the OARS case manager in the pre-release and post release phases. Screening provides an opportunity to enhance the professional working relationship, reduce the stigma and silence surrounding traumatic experiences, and to recognize many ‘problem’ behaviors as coping strategies. Initial results from these tools indicate a significant degree of trauma history in both the male and female populations served.



Program Discharges (see pie chart below for more details):

- 27% of participants successfully discharged from the OARS program
- 39% discharged due to consistent violations of their rules
- 20% discharged due to team decision (primarily due to lack of motivation and meaningful follow through)
- 9% discharged due to participant request
- 5% passed away while in the program (both instances were due to physical health conditions)



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REVIEW OF FISCAL YEAR 2012 GOALS AND INITIATIVES

Goal: To refine the definitions used in the data collection process, ensuring the information gathered is both necessary and accurately depicts the realities of the program functions.

Outcome: Achieved

The OARS Program Specialists and contracted case management providers worked diligently to refine the data definitions and data collection process during the early months of FY 2012. This goal will require regular review as the program evolves in the coming years.

Goal: To complete and distribute the OARS program operations and procedures manual.

Outcome: Achieved

The OARS implementation team members (includes DHS and DOC administrative staff, the case management provider agencies, institution leadership, DCC leadership, and an attorney advocate from Disability Rights Wisconsin) participated in the development of the OARS program operations and procedures. The manual was developed and finalized by the DOC Disabilities Reentry Coordinator, DHS Community Forensics Director, and DHS OARS Program Specialists. Manuals were distributed to program staff and stakeholders in March 2012. Revisions to the OARS manual will occur as the program model is further refined.

Goal: To partner with the DHS OARS contracted case management providers to develop a comprehensive and consistent method of coordinating costly treatment and housing services for the OARS population utilizing a service agreement.

Outcome: Ongoing

DHS OARS program staff engaged in discussions with the OARS contracted case management providers early in fiscal year 2012 to discuss the advantages and disadvantages of utilizing a service agreement within the program. In July 2012, the agreement between DHS and the contracted case management providers contained guiding language requiring the agencies to develop a service agreement and internal utilization process, with the offer of support and assistance from the DHS OARS Program Specialists.

Goal: To identify a comprehensive trauma assessment tool for use within the program. To research and improve access to trauma treatment services in institutions and the community.

Outcome: Achieved

In May 2012, the OARS program began utilizing two self-screening trauma tools: the Adverse Childhood Experiences (ACE) and Trauma Assessment for Adults-Revised

(TAA-R). These screening tools improve awareness on the prevalence of trauma among this target population. These tools also increase the opportunity for case managers to build rapport, see the whole person, and connect program participants with treatment services to aid in their recovery.

Goal: To collaborate with Women's Wisconsin Resource Center (WWRC) and Taycheedah Correctional Institution (TCI) in developing an institution Alternative to Revocation (ATR) with a focus on psychiatric stabilization and symptom management for the female OARS population.

Outcome: On-going

Administrative staff supporting WWRC, TCI, DOC, and DHS are working together to develop a mental health ATR program for Wisconsin female offenders.

Goal: To provide Person Centered Planning (PCP) training to OARS program staff and incorporate concepts of PCP and motivational interviewing into OARS participant Individualized Case Plans.

Outcome: Achieved

The DHS OARS and Conditional Release programs partnered to offer Person Centered Planning (PCP) training. In addition, the OARS Individualized Case Plan (ICP) was modified to include Person Centered Planning and Motivational Interviewing concepts to increase opportunities for the OARS teams to better employ techniques in the field with OARS program participants.

Goal: To provide sex offender supervision training to DHS contracted OARS case management agency staff and improve understanding of sex offender rules and restrictions.

Outcome: Achieved

DHS, in partnership with DOC, coordinated two regional sex offender supervision trainings. The OARS case managers and DCC agents are encouraged to continue asking proactive questions and keep open dialog with regards to the supervision and coordinated Individualized Case Planning for sex offenders enrolled in the OARS program.

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FY 13 GOALS AND INITIATIVES

The DHS Community Forensic Services annual report is produced in November and reports on a fiscal year running from July 1st to June 30th of the preceding year. This means that approximately seven months remain before the next reporting period begins. The measurable performance goals below strive to bolster the program's quality, effectiveness, and efficiency.

1. The DHS OARS program contracted case management agencies will incorporate monthly case management Motivational Interviewing (MI) skill building activities and peer learning groups.
2. The DHS contracted provider case management agencies will utilize trauma self-screening tools with OARS program participants in an effort to promote a culture of Trauma-Informed Care. DHS Program Specialists will work with the contracted case management agencies to develop a data tracking mechanism for annual reporting purposes.
3. The DOC Disabilities Reentry Coordinator will work with DCC and DHS to increase accessibility and ability for DCC OARS agents to conduct urinalysis screens among the program participants that struggle with addiction.
4. To work with the DHS contracted provider case management agencies, OARS institution staff, DCC, and DOC to refine the existing program design in an effort to improve the quality and fidelity of the program.
5. To offer Smoking Cessation training to OARS program staff and explore this practice as an initiative to adopt in FY 2014.
6. To collaborate with the Women's Wisconsin Resource Center (WWRC) and Taycheedah Correctional Institution (TCI) to develop an institution-based Alternative to Revocation (ATR) with a focus on psychiatric stabilization and symptom management for the female OARS population.
7. To partner with the DHS OARS contracted case management providers to develop a method of coordinating costly treatment and housing services for the OARS population utilizing a service agreement with subcontracted provider agencies.
8. To develop a participant satisfaction survey for use following discharge from the program.

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SUMMARY AND CONCLUSIONS

In the second year of operations the OARS Program staff throughout the service delivery system found numerous ways to coordinate between one another to accurately identify and address the profound needs of the population served. 142 individuals were served in the program, a 61% increase from the first year, with many successful outcomes. Addressing the increasing population allowed all team members to find a rhythm and flow to their communication between one another, identify additional resources, and to better understand and address the unique challenges inherent in the population. The OARS Program Manual was also completed early in FY12 through a multidisciplinary collaboration between stakeholders.

The institution staff refined their referral and treatment services, case management providers enhanced their engagement strategies with the participants and found creative ways of addressing concerns following release, and the community corrections agents found the additional collateral support and options provided through the program to be invaluable to enhance community safety and address situations as they arose.

As the OARS Program continues, further refinements and systems integration will be ongoing, but these adjustments will be minor in comparison to the first two years of program creation and implementation. The DOC and DHS institutions, DHS contracted providers, DCC agents, and DOC representatives have developed a solid baseline for collaboratively addressing the needs of the population.

Some lessons learned in the second year of operations include: 1) the importance of intensive pre-release reach in efforts and comprehensive treatment planning; 2) the significance of trauma histories inherent among the participants; 3) the challenges presented by the severe Axis II diagnoses present in the majority of the population; and 4) the importance of monitoring and proactively addressing participant follow through and motivation as a multidisciplinary team. These topics will continue to be collaboratively discussed and addressed by program stakeholders as the program continues to operate.

The evaluation of the program's success remains a work in progress, and the overarching theme of community safety continues to be the primary focus for all team members. While 27% of the discharges in the second year of the program were considered to be successful program completions, there were many other marks of success reflected in the individual cases that resulted in custodies and revocations. Treatment success for high risk, dually diagnoses individuals also takes time and can be a difficult outcome to measure. As such, the safety of the participants and the community truly is the benchmark of success for this population.

In October 2012, the WI DOC published a project titled, "*Recidivism after Release from Prison*". This provides data related to the general population DCC offender during a three year post release period. The WI DOC also plans to provide baseline data of the target OARS population, in an effort to utilize an accurate benchmark in evaluating

program effectiveness in the future. The OARS Program continues to collect data, and while initial data highlights show promising results, it is anticipated that a meaningful comparison of recidivism with other corrections populations will be reviewed when the longitudinal data and sample population is statistically significant.