Planning for Successful Reentry
Strategies to Continue Connecticut’s Second Chance Initiatives

December 2018
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The CT Reentry Collaborative would like to extend thanks to the Office of Policy and Management’s Criminal Justice Policy and Planning Division for its assistance in both convening the meetings of the Reentry Strategy Workgroup and in the development of this document.

www.ctreentry.org
www.ccsu.edu/imrp
June 28, 2018

Under Secretary Mike Lawlor  
Criminal Justice Policy and Planning Division  
Office of Policy and Management  
450 Capitol Avenue, MS#52CJP  
Hartford, CT 06106-1379

Dear Undersecretary Lawlor,

The leaders of the CT Reentry Collaborative would like to thank you for all the work that has been done around criminal justice reform and reentry under Governor Malloy’s administration. We feel there have been many positive changes impacting thousands of individuals who have returned home or been diverted from incarceration. Connecticut is leading the way when it comes to these reforms.

With that being said, the CT Reentry Collaborative, a stakeholder in this process, is concerned about the continuity of this progress with the introduction of new executive branch administration that may be wholly unfamiliar with the current strategic objectives and strategies for reform. As such, the Institute for Municipal and Regional Policy (IMRP), as convener of the CT Reentry Collaborative, would like to work with your office to review and revise the 2011 State of Connecticut’s Reentry Strategy.

With an updated statewide reentry strategy, each community could align policies/goals around current best practices, reducing silos, building stronger collaborations; which, in turn, would allow us to be more united when a new administration comes in next year. Creating safer communities, supporting the rights of victims, and reducing recidivism are fundamental core beliefs of the CT Reentry Collaborative, along with treating individuals with dignity and respect as they return home from incarceration.

It is our hope you will grant us the opportunity to update the State of Connecticut’s Reentry Strategy as we believe this will have a positive impact on each of our communities across our state. Thank you for your time and we look forward to your response.

Sincerely,

Andrew Clark  Dana Smith  
IMRP/CCSU New Britain Reentry Roundtable

Rob Hebert  Earl Bloodworth  
Bridgeport Reentry Collaborative New Haven Reentry Roundtable

Sue Gunderman  Kia Baird  
Greater Hartford Reentry Council Southeastern CT Reentry Roundtable

Beth Hines  Martine Mikell  
Greater Waterbury Reentry Council Windham Regional Reentry Council
Planning for Successful Reentry
Strategies to Continue Connecticut’s Second Chance Initiatives

EXECUTIVE SUMMARY

Since 2008, the Criminal Justice Policy and Planning Division, within the Office of Policy and Management, has been required to produce an annual Reentry Strategy that “provides a continuum of custody, care and control for [people] who are being supervised in the community, especially those [people] who have been discharged from the custody of the Department of Correction, and assists to maintain the prison population at or under the authorized bed capacity.” This updated Reentry Strategy (December 2018) describes the continuous efforts and achievements over the past decade to improve the transition from incarceration to the community, break the cycle in and out of the justice system, provide public safety, and improve the lives of justice-involved people, their families and Connecticut communities. It also offers recommended strategic directions to continue to move Connecticut’s reentry initiatives toward the stated goals.

The process to produce the Reentry Strategy was overseen by the CT Reentry Collaborative and the Institute for Municipal and Regional Policy in collaboration with the Office of Policy and Management’s Criminal Justice Policy and Planning Division, state and municipal justice system stakeholders, nonprofit provider organizations, victim and community advocates, and justice-involved people and their families. The Reentry Strategy creates a recommended framework to guide comprehensive and coordinated policy development and service delivery systems for people transitioning from jail or prison to communities throughout the state, with the goals of reducing recidivism, improving public safety, saving and more efficiently using taxpayer dollars, and assisting people to return to and stay home.

Reentry Goals

This recommended Reentry Strategy is intended to have a positive effect on breaking the cycle in and out of jail or prison, reducing contact with the criminal justice system, and enhancing the likelihood of justice-involved people finding their way to full citizenship through the following while also meeting the unique needs of people in special populations.

- Livable wage employment
- Safe, affordable and appropriate housing
- Access to healthcare
- Educational opportunities
- Restoration of certain rights and privileges of citizenship
- Family involvement
- Community engagement

The Reentry Strategy recognizes the process of reentry begins at arrest and continues through discharge from prison and community supervision and even past the end of the sentence to remove any barriers
caused by the stigma of criminal record. This process is larger than the state criminal justice system, its success in achieving the stated goals is dependent on a multi-pronged approach including collaboration between state and municipal governments, communities, and justice-involved people.

- The state system provides information and resources to ensure an environment to allow opportunity for successful reentry of justice-involved people to their communities and families.
- Communities and municipalities throughout the state welcome justice-involved people and their families and provide information and integrated services to effect and support the reentry process.
- Justice-involved people are willing to be law-abiding citizens who recognize their role in the community and to advocate, educate and apply themselves to the reentry process.

Reentry is a community-centric approach. And, like all successful communities, it relies on a variety of people and sources to function efficiently and effectively. Connecticut’s reentry stakeholders must also seek out technical assistance, support, and opportunities to collaborate with nonprofit organizations, nongovernmental organizations, advocacy groups, faith-based organizations, and state universities and colleges. Guided by the recommended Reentry Strategy’s common vision, stakeholders should continue to pursue federal, state, municipal, and private sourced funding opportunities for the comprehensive network of reentry programs and services.

Finally, it is recognized that Connecticut must give equal attention to preventing people, especially young people, from coming into contact with the juvenile justice and criminal justice systems.

**Strategic Directions.** Strategic directions are provided for eight important need areas. The strategic directions are intended to provide a framework for collaboration, creativity and innovation to continue strengthening Connecticut’s reentry network on state and municipal levels.
## Reentry Strategic Directions

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| Oversight & Coordination        | • Create Director for Reentry Services within OPM Criminal Justice Policy and Planning Division  
                                  | • Establish Reentry Advisory Board to CIPAC                                             |
|                                  | • OPM provide grant writing technical assistance to community-provider organizations       |
| Housing                         | • Coordinate with public housing authorities and state commissions and authorities          |
|                                  | • Develop inclusive public housing policies                                                |
|                                  | • Provide information on tenant rights                                                     |
|                                  | • Offer counseling and support to families to stabilize housing                           |
| Employment                       | • Coordinate with Commission on Equity and Opportunity on livable wage employment            |
|                                  | • Provide vocational training to meet labor market needs and create union skilled labor training programs |
|                                  | • Coordinate with DOL to identify labor market needs                                       |
|                                  | • Eliminate restrictions on hiring people with criminal records and consider expedited pardons and expungement legislation |
| Mental Health & Addiction Treatment | • DOC and DPH provide people leaving jail or prison with medical records (W-10)               |
|                                  | • Increase access to community care including culturally competent and holistic care         |
|                                  | • Educate providers on psychological effects of justice-involvement                          |
|                                  | • Encourage use of trauma-informed interventions                                             |
|                                  | • Provide people leaving jail or prison with interim supply of prescription medication      |
| Family Support                   | • Subsidize transportation for families to jails or prisons                                 |
|                                  | • Reduce visitor restrictions for families & family members with criminal records           |
|                                  | • Ensure low-cost phone service between parents and children                                |
|                                  | • Expand family services, counseling and parent initiatives                                 |
|                                  | • Initiate child support modification at sentencing hearing                                  |
Access to Services

- Open reentry resource center in each municipality that has a Reentry Roundtable
- Establish forensic peer mentoring pilot program in courts and for probation and parole case management

Reentry Transition Planning

- Expand Reintegration Unit model to all level 2 and 3 correctional facilities.
- Assign full-time Reentry Counselors to all jails and prisons at all levels (2 through 5)

Parole Case Management

- Expedite implementation of EPICS, CBT/R&R and quality assurance initiatives and educate and train contracted providers
- Expand use of EPICS and CBT/R&R for all appropriate people on parole, special parole and community supervision
- DOC and BOPP collaborate on evaluation of DOC Time Out Program
- Adopt recommendations for parole remand and hearings (2017 report by Yale School of Law)

Access full version of Planning for Successful Reentry at www.ctreentry.org and www.ccsu.edu/imrp
INTRODUCTION

“My hope is that a plan can be developed in the coming months so that the next administration will be better prepared and so that my administration, as we complete our final five months, might be of some assistance in the process as well.”
Governor Dannel P. Malloy’s opening remarks at the OPM Reentry Strategy Workgroup Meeting (July 2018)

What is the desired outcome for someone leaving prison? Should it be left to chance? Should it be based on a person’s innate abilities or influenced by the systems and institutions from and to which they return? What, if any, investment should be placed in justice-involved people? What is the purpose of our criminal justice system? And finally, how do we define justice?

For too many years American society answered these questions not through careful deliberation and purpose in the planning phases, but in retrospect; often through the lens of a particular event, rather than the collective experiences of the multitudes impacted by our justice system. We predominately spent our energy defining the laws and criteria for sending people to prison, and yet precious little discerning the realities of the people exiting its gates.

It is difficult to imagine at this point, but the first time Connecticut asked what happened to people leaving prison was through the issuance of the 2001 Recidivism in Connecticut report by the Legislative Program Review and Investigations Committee (LPRIC). As a result, tracking the rate of recidivism (how often and when people leaving prison are arrested, reconvicted and returned to prison) became the sole outcome measure of success of the criminal justice system.

Due in part to the exponentially rising population within our prison walls, at the turn of this century our country could no longer cast a blind eye to the steady stream of people leaving jail or prison and re-entering society. The problem had become too large to ignore. In the midst of budget deficits and communities ravaged by mass incarceration, a rethinking of our justice system began.

Connecticut explored ensuring public safety while simultaneously lowering the prison population. In a confluence of fortuitous events, both local policymakers and a small office at the Council of State Governments began envisioning a system built on this premise. Its title: Justice Reinvestment.

The concept was simple enough: extract savings from the most costly elements of the justice system and reinvest in the very neighborhoods from which people entered the system, all while ensuring either equal or greater public safety than before. It was a convincing argument; so much so that the Connecticut Justice Reinvestment Act (Public Act 04-234) passed with near unanimous consent in both the state House of Representatives and the Senate. Connecticut became the first state in the nation to turn to multiple outcomes and measured the effectiveness of the justice system in fiscal, community and safety metrics to drive its criminal justice strategy.

In the years that followed, Connecticut built out its framework for ensuring outcome-based justice policy. In 2006, the Connecticut Sentencing Taskforce and the Criminal Justice Policy and Planning Division (CJPPD) at the Office of Policy and Management (OPM) were established via state statute. The first was meant to bring evidence, transparency, multiple perspectives and deliberation through a process that would aid the legislature in developing well-vetted, dispassionate criminal justice legislation. The second
was intended to replenish the depleted policy ranks at OPM in order to administer evidence-based policy throughout the executive branch.

And yet, the state could not do it alone. As Connecticut began educating itself on the virtues of an outcome-based system, it became evident that multiple partners were necessary to achieve success in its new strategy. Municipalities began to take ownership of those coming back to their communities. This primarily took the form of local reentry roundtables; a collective of municipal governments, local and state nonprofit service providers, advocates, faith-based organizations, and justice-involved people and their families. The reentry roundtables were designed to be the problem solvers for people released from jail or prison and coming back to their communities. In 2007, Bridgeport established the first reentry roundtable. Reentry roundtables were subsequently established in Hartford, New Britain, New Haven, Norwich/New London, Stamford, Waterbury and Windham. The reentry roundtables have led to the establishment of reentry resource centers to provide a coordinated hub to help people returning home from jail or prison. These hubs provide much-needed resources and services and serve as a “welcome home” center.

Building on the network created by the reentry roundtables, municipalities began to establish city positions designed to ensure successful reentry for people leaving jail or prison. For the first time since the beginning of the “tough on crime” era in American justice policy, municipalities began to publicly and compassionately welcome the people leaving jail or prison and returning to communities across the state.

Additionally, during the past eight years (2011 to 2018), under the administration of Governor Dannel P. Malloy, there has been a continued emphasis on improving the reentry system and reforming the state’s justice policies. The Governor’s Second Chance Society Initiatives and other legislative reforms resulted in major changes to the justice system.

As a result, state prisons and parts of prisons have been closed. The Department of Correction (DOC) and the Judicial Branch Court Operations and the Court Support Services Division (JB-CSSD) have implemented innovative programs and services intended to assist in successful reentry and to prevent people from becoming involved with the justice system. Policy development, implementation and funding are a multi-pronged effort of state and municipal governments, nonprofit service providers, faith-based organizations, victim and community advocates, state universities and colleges, families and justice-involved people. The state justice system has constricted allowing for some modest investment in preventive measures such as housing, education, transportation, and the economy.

In the 14 years since Justice Reinvestment and the corresponding shift in the state’s criminal justice policy, Connecticut has realized improvements. The state has its lowest arrest rate since the late 1960s and the prison population significantly decreased to its lowest point in 20 years. Another notable trend is people leaving jail or prison are older (30s and 40s) after serving longer sentences as compared to the young people (teens and 20s) in the 1990s. There is a recognition that the needs and challenges for the older population are different.

Even though Connecticut has focused substantial attention on improving the outcomes for people leaving jail or prison and reentering society, the rate of recidivism has not decreased dramatically. This suggests that new or improved outcome measures geared toward the demographics of the current reentry population are needed to more successfully reintegrate people released from jail or prison into
mainstream community living and to continue to improve public safety and the economic health of the state.

It is also important that the state step back and reassess its Justice Reinvestment Strategy. There has been great success in lowering incarceration and arrest rates; two of the three legs of strategy. In order to build on this success, Connecticut must now focus on funding its reentry system to meet the demand and needs of the target population and to purchase effective programs and services. Reinvestment must be purposeful, and designed through the collaborative efforts of the state, municipalities, academics, foundations, nonprofit service providers, communities and those most impacted by the system.

Another shift worth consideration is one highlighted by Connecticut’s relatively recent examination of European justice systems. These systems have significantly lower incarceration and recidivism rates than those of any American jurisdiction. These outcomes are primarily due to focusing the work in prison to that of normalization and reintegration, and hence successful reentry. The main driver of these outcomes is a philosophy of the justice system that sees the taking away of freedom as punishment, while the focus of life in prison as that of rehabilitation and reintegration.

The good news is Connecticut already has a strong foundational reentry system and is on the cusp of instituting a shift that is poised to bring about even more significant changes. This Reentry Strategy highlights areas vital to successful reentry and offers strategic directions to inform policy development and funding decisions, spark innovation and creativity in program and service design and implementation and improve the rate of successful transition from incarceration to the community. Continued success of the state’s reentry system will translate to improved public safety, greater economic health, and a positive transformation for communities and individuals disproportionately impacted by the justice system.

The CT Reentry Collaborative offers this recommended Reentry Strategy to set goals and plans to serve as the framework for Connecticut to continue reforming its justice system. The goals are to have a positive effect on both justice-involved people and the communities to which they are reentering. Implementation will help move people to break the cycle in and out of jail or prisons, reduce contact with the criminal justice system, and enhance the likelihood of finding their way to full citizenship. Connecticut recognizes the process of reentry begins at arrest and continues through discharge from jail or prison and community supervision and even past the end of the sentence to remove any barriers caused by the stigma of a criminal record. This approach is community-centric and is larger than the state criminal justice system. Success depends on a multi-pronged approach including collaboration among state and municipal governments, communities and justice-involved people.

Along with the CT Reentry Collaborative, this recommended Reentry Strategy was developed with input and review by the Office of Policy and Management’s Criminal Justice Policy and Planning Division, the Department of Correction, the Board of Pardons and Parole, the Judicial Branch Court Support Services Division, nonprofit provider organizations, victim and community advocates, state universities and colleges and justice-involved people and their families. The combined experience and expertise of this group identified areas of need and provided innovative strategic directions to make even greater strides in reintegrating justice-involved people into communities throughout the state and improving outcomes for all Connecticut citizens.
BACKGROUND

Each month approximately 2,000 people return to Connecticut communities from jails and prisons throughout the state. Many of these people face the same problems leaving jail or prison as they did upon entering, including poverty, unemployment, unstable housing or homelessness, mental illness or substance abuse and addiction. Such difficulties may contribute to involvement in the criminal justice system and detachment from families and communities. Addressing these problems, however, could reduce the likelihood that a released person will re-offend.

Data on incarcerated people often portrays a distressed and vulnerable population cycling in and out of the correction system. Many incarcerated people are repeat offenders, having been admitted and released from jail or prison at least once before. In Connecticut, the recidivism rate has remained constant at about 60 percent. It is difficult to move the needle on the rate of recidivism and Connecticut has seen only moderate decreases over the last decade. This suggests that new or improved services are needed to successfully reintegrate people released from jail or prison into mainstream community living and to continue to improve public safety and the economic health of the state.

Addressing the needs of vulnerable populations and reforming the criminal justice system has been a priority in Connecticut. As a result, the state has a strong foundation upon which to continue to build a comprehensive and well-coordinated reentry system.

Prison Overcrowding. During an economic downturn and budget crisis in 2002, then-Governor John Rowland ordered across-the-board layoffs throughout state government, including probation and parole officers. Sweeping budget cuts also acutely reduced state funding for community-based provider organizations that deliver programs and services to supervised people released from jail or prison. The total jail and prison population suddenly spiked; the population increased by more than 2,000 and peaked at 19,300.

Starting in 2004, with technical assistance from the Council of State Governments (CSG), criminal justice and municipal stakeholders collaborated on a variety of reentry initiatives focused on meeting the needs of people about to leave and leaving

\[1 \text{ OPM reports 60 percent of people released from prison are re-arrested within three years, 53 percent are returned to prison for at least one day, 45 percent are convicted of a new crime, and 34 percent return to prison to serve a new term of incarceration. (Office of Policy and Management, } \textit{Recidivism Report}, \text{ February 2018)}\]
correctional facilities and adopted the Justice Reinvestment Initiative (JRI).

**Justice Reinvestment.** The Justice Reinvestment Initiative, spearheaded by then-Connecticut State Representative William Dyson who was the co-chairperson of the Legislative Appropriations Committee, was intended to reduce correction populations and budgets and generate savings for the purpose of reinvesting in high incarceration communities to make them safer, stronger, more prosperous and equitable. The principles of JRI were aimed at reducing admissions to the prison system and lengths of stay in prison, changing incentives for system administrators, and reinvesting in public safety by strengthening community institutions. Possible savings in the form of “averted costs” for prisons and other traditional justice costs were to have been returned to communities to repair the destructive impact of high levels of concentrated incarceration on poor communities of color. The savings were to be reallocated to leverage other public and private resources for reinvestment.

In the years since 2004, Connecticut realized savings due to substantial decreases in the arrest rate and the prison population, enough to warrant the closure of prisons and parts of prisons. And, more justice-involved people participate in diversion, alternative to incarceration and community supervision programs. The savings from these reforms, however, were returned to the state general funds and used during the state’s most recent budget crisis.

**Reentry Strategy.** Under 2004 legislation (Public Act 04-234), the then-Prison and Jail Overcrowding Commission (PJOC) was required to submit an annual report on the status of prisoner reentry. The Department of Correction (DOC) was responsible for producing the report.

In 2005, it was recognized that reentry was not solely the responsibility of DOC, but rather required a more holistic approach. Under Public Act 05-249, the PJOC was reconstituted to include an expanded group of state and municipal administrators, nonprofit organizations, victim and community advocates and the public; its name was changed to the Criminal Challenges

2011 OPM REENTRY STRATEGY

**CHALLENGES**

- Exchange assessment data between agencies
- Coordinate community-based programming across agencies especially for people transitioning from once agency to another
- Provide housing that is safe, affordable and appropriate for reentry people with mental health or substance abuse needs
- Continue to develop community partnerships and integrate into the strategy

**GOALS**

- Continue to develop community initiatives, planning for sustainability upon completion of grant funding
- Expand housing partnerships, with focus on special populations
- Develop and implement Results-based Accountability methodology to measure and assess strategy
- Persist in data sharing activities with criminal justice partners
- Increase programming collaborations in the community to ensure continuum of care from custody to and through reentry.
Justice Policy Advisory Commission (CJPAC). A new Criminal Justice Policy and Planning Division, within the Office of Policy and Management (OPM), was given the responsibility to produce the annual reentry strategy that “provides a continuum of custody, care and control for offenders who are being supervised in the community, especially those offenders who have been discharged from the custody of the Department of Correction, and assists in maintaining the prison population at or under the authorized bed capacity.”

OPM produced the first state reentry strategy in 2008 and updated the strategy in 2010 and 2011. Challenges and goals were identified. As a matter of fact, some of the same challenges and goals continue to exist today and will be discussed in this strategy.

The process to produce this updated Reentry Strategy was overseen by the CT Reentry Collaborative and the Institute for Municipal and Regional Policy in collaboration with the Office of Policy and Management’s Criminal Justice Policy and Planning Division, state and municipal justice system stakeholders, nonprofit provider organizations, victim and community advocates, and justice-involved people and their families. This document is intended to provide updated information to the OPM’s 2011 reentry strategy and to offer a framework to continue to improve the state’s reentry policies and network.

Reentry Roundtables. In 2007, a group of like-minded community partners led by Career Resources and Family Reentry came together in Bridgeport to discuss a growing segment of their client population, people returning home from incarceration. This network of providers became known as the Bridgeport Reentry Collaborative and met monthly to share information on local resources. Gaps in services and significant barriers for people returning home from incarceration were easily identified. The network began to consider how they could work collaboratively together to foster opportunities for successful reentry.

As members of Bridgeport Reentry Collaborative returned to their communities across the state, they realized there were regional challenges facing people in other cities and towns. Over the next several years, reentry roundtables were established in New Britain, New Haven, Hartford, Southeastern Connecticut, Stamford, Waterbury and Windham.

As this grassroots movement began spreading across the state, IMRP began to convene these reentry roundtable leaders to: (1) foster communication; (2) build consensus around issues impacting justice-involved people; and (3) work toward finding community-based, innovative solutions to address the barriers to reintegration with the goal of reducing recidivism and increasing public safety.
Currently, there are eight active reentry roundtables across Connecticut and they are known collectively as the CT Reentry Collaborative. While each roundtable might look a little different, they are unified in their commitment to bridge the transition from jail or prison to Connecticut communities by fostering successful reentry for every person coming home.

**Results First.** As part of the effort to address adult criminal justice issues and reduce recidivism, Connecticut joined the Pew-MacArthur Results First Initiative in 2011. Administered by the IMRP, Results First Connecticut has used data submitted by DOC and JB-CSSD to calculate programs’ benefit-to-cost ratios. These include programs designed to impact the reentry process. In addition to the cost-benefit analyses, agencies can take advantage of the Results First Clearinghouse Database to identify additional evidence-based reentry programs that agencies as well as the Reentry Roundtables could implement that research shows to have been effective.

Armed with the information on evidence-based programs’ effectiveness and cost, these agencies, OPM, and the General Assembly make informed programmatic and budget decisions affecting justice-involved people.

The executive, judicial, and legislative branches can rely on the continued, expanded, and even more robust participation in Results First by all entities involved in the reentry process, including other criminal justice stakeholders (e.g., private providers), to support the use of evidence-based programs and collect and analyze data. Moreover, this basis for making decisions is even more critical in times of budget difficulties. The Results First Initiative can be applied to evaluate and measure the state’s progress in achieving the strategic goals set out in this report.

**Second Chance Society Initiatives.** During the past eight years (2011-2018), under the administration of Governor Dannel P. Malloy, there has been a continued emphasis on improving the reentry system and reforming criminal justice policies. The Governor’s Second Chance Society initiatives and other legislative reforms resulted in major changes to the system, including a significant decrease in the number of people incarcerated. This, and to a lesser degree the economy, allowed DOC to close prisons and parts of prisons.

The following graphic highlights the reforms pertaining to the reentry of people released from jail or prison to communities across the state.
# Criminal Justice and Reentry Legislation and Initiatives in Connecticut (2011-2018)

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| **Risk Reduction Earned Credits**               | • Sentenced people earn up to five days' credit per month for compliance with Offender Accountability Plan.  
 |                                                 | • Incentive-based prison management tool                                      |
| **Risk Assessment Tools**                       | • DOC & BOPP adopted validated risk assessment tools  
 |                                                 | • DOC, under three-year federal recidivism reduction grant, adopted same tools in 2016 |
| **Structured Decisionmaking**                   | • Using structured decisionmaking, BOPP must explain the basis for each decision to grant or deny parole, including specific findings |
| **Specialized Nursing Home Release**            | • Elderly and debilitated inmates may be released from prison by DOC to a private nursing home.  
 |                                                 | • Federal Medicaid and Medicare reimbursements approved.                      |
| **Reintegration Units**                         | • Specialized person housing units for young adults, veterans, DUI and women nearing the end of their sentences at Cybulski and York prisons |
| **Community Release Unit**                      | • Specially trained DOC staff make discretionary release decisions based on assessment of risk and need. |
| **Expedited Parole and Pardon Processes**       | • BOPP administrative review based on risk assessment for low-risk, nonviolent people. |
| **T.R.U.E. Unit**                               | • Inmates 18 to 25 live in special unit with specially trained staff and older inmates serving as mentors.  
 |                                                 | • Truthfulness, Respectfulness, Understanding & Elevation                     |
| **Bail Reform**                                 | • Prohibits "cash-only" bail  
 |                                                 | • Prohibits money bail for misdemeanor crimes unless judge finds defendant poses a danger |
| **Worth Unit**                                  | • Specialized unit for incarcerated women.  
 |                                                 | • Based on the T.R.U.E. Unit model.                                            |
| **Best Chance Program**                         | • Department of Labor and Capitol Workforce Partners  
 |                                                 | • Integrated Basic Skills and Education Training and Employment through IBEST and Second Chance Society Initiatives |

Also, other legislative initiatives directly or indirectly contributed to reducing the prison population, including accused people in pretrial custody, and reformed drug sentencing laws. The possession of a small amount of marijuana (less than one-half ounce) was decriminalized, which resulted in approximately
6,000 fewer criminal arrests annually. The Second Chance Society legislation changed the charge for possession of narcotics from a felony to a misdemeanor and eliminated the mandatory minimum sentence enhancement for possession of narcotics within a “school zone.” People convicted of driving while under the influence of alcohol or drugs (DUI) can now be released on highly supervised “house arrest.” Newly admitted people convicted of DUI are screened for eligibility and appropriate people are now typically released from prison on “house arrest” within two weeks. Project Longevity was established in Bridgeport, Hartford, and New Haven. Under this project, police departments and communities work together to identify and focus deterrence and intervention efforts on people with a high risk for crimes of gun violence. The goal of the project is to reduce gang- and group-related violence. The Trust Act prohibits the police from detaining incarcerated people beyond their sentence based solely on a federal Immigration and Customs Enforcement (ICE) detainer, unless the person is a convicted violent felon, on the Terrorist Watch List, or a gang member. Finally, statutory restrictions were placed on the use of solitary confinement in prison. Its use is now prohibited for incarcerated people under 18 and limited for all other people. DOC must regularly report on the frequency and duration of its use of solitary confinement.

Reentry Resource Sites. The reentry resource sites model (commonly referred to as a “welcome center”) provides a coordinated hub to help people returning home from jail or prison. These sites provide access to much-needed resources and services, particularly to people who are released at the end of their sentences and are not under any form of community supervision. The sites are connected to the Reentry Roundtables and build upon coalitions and partnerships at the local level and address issues specific to a city or geographic region. The centers are typically funded through federal, state, municipal and private foundation grants and donations.

The cornerstones of the reentry resource sites are establishing partnerships with state and municipal governments, regional area employers, nonprofit and faith-based organizations, and community advocates. The hubs are designed to combine resources and information to help the basic needs of people leaving jail or prison and facing the challenges of reintegrating into their communities. Each site provides case management services for returning people by: (1) assisting them secure employment; (2) scheduling treatment for challenges such mental illness or substance abuse; (3) obtaining documents necessary to obtain a state identification card; (4) assisting in filing pardon applications; and (5) providing clothing, bus and food vouchers, and temporary shelter referrals.

DOC supports the work of the reentry resource centers by providing a list of incarcerated people returning to each city and their scheduled release date. Furthermore, DOC has recently agreed to transport people on the day of their release who are identified as homeless and returning to Hartford directly to the Reentry Center at Hartford City Hall. However, there is no requirement the people meet with Reentry Center staff.

Currently, there are four reentry resource sites located in Bridgeport, Hartford, New Haven and Waterbury. It makes the most sense for these municipalities to invest in opening a site because a majority of people leaving prison return to these cities, which are state’s largest urban areas.

New Haven partnered with DOC and Yale Undergraduate Prison Project to launch a prison reentry program, Project Fresh Start, in 2008 and revitalized the program in 2014. In 2016, Bridgeport launched the Mayor’s Initiative for Reentry Affairs (MIRA) to connect returning citizens to community resources, wraparound services, employment and educational opportunities and provides a framework to decrease recidivism by supporting collaborative partnerships for citizens returning to the Bridgeport community.
Bridgeport and New Haven do not currently have staffing or funding to effectively provide case management services to people returning from jail or prison. The directors from these centers reported a need for better coordination between Project Fresh Start, MIRA and DOC for people released at the end of their sentence and returning to Bridgeport and New Haven.

The Waterbury Reentry Center is an initiative of the Greater Waterbury Reentry Council (GWRC). The Reentry Center staff work collaboratively with GWRC to provide wrap-around services in areas of basic need such as housing, employment, health, mental health, substance abuse and others. The target client population are people recently released from prison or jail. The Waterbury Reentry Center has specially trained staff to provide short-term case management and navigation services to clients.

In 2018, the Reentry Welcome Center in Hartford was the most recently opened reentry resource center. Community Partners in Action, along with the City of Hartford as a strategic partner, using a three-year Innovation Grant from the Hartford Foundation for Public Giving, established the center. The Reentry Center has nearly 40 community partnership agreements to work collaboratively to provide wrap-around services in the areas of basic needs, housing, employment, health, mental health, substance abuse and much more.

**Future of Reentry.** Connecticut’s reentry network continues to expand and evolve on state and municipal levels. There has been significant progress in achieving the stated goals of reentry and assisting people transitioning from jail or prison to their communities and families. A greater emphasis has been placed on incorporating reentry policies and programs into the state’s criminal justice system from arrest to release from jail or prison.

Unfortunately, Connecticut’s serious budget crisis has reduced funding for services at all levels, including the reentry system. The effort has relied on federal and private foundation grants to subsidize initiatives but has no sustainable funding sources for them beyond each grant period.
Community-based services provided by nonprofit organizations have historically been the target for budget cuts and went into the most recent budget process already seriously underfunded. Contracts, especially for halfway houses and inpatient detoxification and addiction treatment beds, were canceled resulting in a loss of more than 200 DOC beds and 200 JB-CSSD residential beds in the community. Appendix A provides an overview of state criminal justice funding over the past decade. This strategy report supports opportunities to move resources away from traditional justice systems into our communities.

STRATEGY PLANNING PROCESS

On June 28, 2018, the CT Reentry Collaborative (housed at the Institute for Municipal and Regional Policy at CCSU) contacted the undersecretary for OPM’s Criminal Justice Policy and Planning Division and offered to oversee the process to update the state’s Reentry Strategy for adult justice-involved people2. The goal was to describe the progress made over the past eight years and to provide strategic directions to continue to develop the state’s reentry policy and network of protocols, programs, and services. This document will also assist with the transition to the new administration under Governor-elect Ned Lamont.

The process to update the state’s reentry strategy was a collaborative effort. A diverse group of state and municipal agencies, the eight Reentry Roundtables, representatives from nonprofit provider organizations, academics, community stakeholders, victim and community advocates, and reentry clients and their families was convened to assist in revising the state’s reentry goals. A reentry workgroup met monthly (between July and December 2018) to oversee the

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2 The Connecticut Juvenile Justice Policy and Oversight Committee is producing a strategy for justice-involved youth under 18.

GOVERNOR-ELECT NED LAMONT
JUSTICE REFORM PROPOSALS

- Support prosecution-led “smart-on-crime” initiatives to end mass incarceration
- Legalize marijuana and remedy the harms caused by discriminatory criminalization
- Expunge nonviolent marijuana convictions
- Continue DOC’s Risk Reduction Earned Credit Program
- Prepare incarcerated people for successful return to our communities
- Welcome formerly incarcerated people into society
- Enact “Clean Slate” legislation to automatically seal the criminal records of rehabilitated people with criminal records
- Strengthen the “Ban the Box” legislation to prevent most employers from asking job applicants about their criminal records until a conditional job offer has been extended
drafting of the state’s reentry goals and to propose strategies to achieve those goals.

IMRP staff met with administrators and staff from the Department of Correction, Board of Pardons and Parole (BOPP), and the Judicial Branch Court Operations and Court Support Services Divisions and attended monthly meetings of the eight Reentry Roundtables to better understand the existing reentry policies, practices and programs, resources for reentry, and gaps and needs for the system. Several Reentry Roundtables organized informational sessions for workgroup members to meet with justice-involved people to discuss their experiences and provide feedback. DOC organized an information session between people currently incarcerated in the T.R.U.E. Unit at Cheshire Correctional Institution and workgroup members. T.R.U.E. unit residents explained the program, discussed their experiences, and subsequently provided a list of recommendations to improve reentry services.

This recommended Reentry Strategy creates the framework to guide comprehensive and coordinated policies and services for people transitioning from jail or prison to the community, with the comprehensive outcome goals of reducing recidivism, improving public safety, saving and more efficiently using taxpayer dollars, and helping people to successfully integrate into their communities and families. All stakeholders involved in the development of this revised edition of the OPM’s Reentry Strategy (issued in 2011) have had the opportunity to provide input and to review it prior to its release and have endorsed the document.

REENTRY STRATEGY GOALS

The CT Reentry Collaborative’s recommended Reentry Strategy is intended to have a positive effect on both the people reentering and their families and communities. The Reentry Strategy also recognizes the unique needs of people in special populations. Implementation of its recommendations will move people toward a break in the cycle in and out of jail or prison, reduce contact with the criminal justice system, and enhance the likelihood of justice-involved people finding their way to full citizenship through the following.

- Livable wage employment
- Safe, affordable and appropriate housing
- Access to healthcare
- Educational opportunities
- Restoration of certain rights and privileges of citizenship
- Family involvement
- Community engagement

The recommended Reentry Strategy recognizes the process of reentry begins at arrest and continues through discharge from jail or prison and community supervision and even past the end of the sentence to remove any barriers caused by the stigma of a criminal record. This process is larger than the state criminal justice system. Success depends on a multi-pronged approach including collaboration among state and municipal governments, communities, and justice-involved people.
The state system provides information and resources to ensure opportunities for successful reentry of justice-involved people to their communities and families.

Communities and municipalities throughout the state receive and welcome justice-involved people and their families and provide information and integrated services to effect and support the reentry process.

Justice-involved people are willing to be law-abiding citizens who recognizes their role in the community and to advocate, educate and apply themselves to the reentry process.

Reentry is a community-centric approach. And, as necessary for all successful communities, it relies on a variety of people and sources to function efficiently and effectively. Connecticut’s reentry stakeholders must also seek out technical assistance, support, and opportunities to collaborate with nonprofit organizations, nongovernmental organizations, advocacy groups, faith-based organizations, and state universities and colleges. Guided by the Reentry Strategy's common vision, stakeholders should continue to pursue federal, state, municipal, and private funding sources to support opportunities for the comprehensive network of reentry programs and services.

Finally, Connecticut must give equal attention to preventing people, especially young people, from coming into contact the juvenile justice and criminal justice systems in the first place (“no entry”).

**REENTRY STRATEGY PLAN**

The recommended Reentry Strategy is intended to serve as a resource and starting point for stakeholders involved in meeting the state’s goals for successfully reintegrating justice-involved people into our communities. Under this recommended strategy, state and municipal governments, the CT Reentry Collaborative, nonprofit provider organizations, faith-based organizations, state universities and colleges, advocacy groups, and justice-involved people and their families will continue current effective activities and develop the legislative and administrative initiatives to continue to strengthen the state’s reentry network.

The proposed goals for the next three years (2019-2021) are to:

- Improve the availability of housing options for people leaving jail or prison.
- Improve rates of self-sufficient, gainful employment for people leaving jail or prison.
- Improve health outcomes and coordination for mental health, chemical dependency, and primary care for people before and after their release from jail or prison.
- Sustain access to government assistance programs for people leaving jail or prison.
- Maintain people’s connections to their families while in jail or prison and support them and their families after release.
- Improve people’s access to basic community resources and services after release from jail or prison.
- Continue to improve reentry transition planning for people leaving jail or prison.
- Expedite implementation of parole best practice initiatives.
The CT Reentry Collaborative recommends OPM oversee its implementation, in collaboration with state and municipal stakeholders. It will develop objectives based on the goals stated above, articulate and require implementation activities, create timelines, and establish a process to evaluate progress.

REENTRY POPULATION

It is clear that any period of incarceration can have seriously destabilizing effects on justice-involved people including, but not limited to the loss of a job, housing or entitlement benefits; disruption to families and child support; and interruption of medical and mental health treatment and other services. Incarceration increases the rate of conviction and results in longer prison sentences. These factors also increase the likelihood of recidivism.

Managing the transition from incarcerated to “released,” therefore, is most effective when it is focused on identifying and meeting a person’s needs and appropriately matching them to effective programs and services. Person needs are identified through validated assessment tools and case management techniques and engagement strategies. Needs are often further defined based on individual characteristics such as age, gender, race and ethnicity, geographic location, and legal status. Historically, however, programs and services were often developed based on broad population groups and the legal or administrative status of justice-involved people.

This Reentry Strategy is focused on three distinct populations: (1) pretrial detainees, (2) sentenced people released from prison under community supervision, and (3) sentenced people discharged from their sentence with no community supervision.

These are legal statuses as well as descriptive groupings used for population and case management purposes by the state criminal justice agencies. The criminal justice system is a process and therefore the status of justice-involved people can change as a case progresses.

Reentry needs for these populations are often similar and overlapping. Stabilizing the disruption caused by any period of incarceration to justice-involved people’s lives, families and communities is a priority regardless of their legal or administrative status. State criminal justice agencies and the network of community-based providers may respond differently and provide differing types or levels of specific services and programs. And, typically, for people who are no longer under a sentence (end of sentence) no services are provided.
Pretrial Status

The pretrial group is comprised of people accused of a crime and confined in correctional centers (jails). They are not serving time but rather are waiting for their cases to be disposed in court. Most accused people are released on bond. Processes like bail review hearings and the Jail Re-interview Project help people meet the conditions of pretrial release. The recent bail reforms prohibit the use of “cash-only” bonds and require bond for misdemeanors only if the defendant is found to be a danger to public safety. However, the number of accused people incarcerated in pretrial status has not significantly decreased.

Connecticut has implemented pilot programs to attempt to divert accused people from prosecution or to provide alternatives to pretrial incarceration. The Hartford Alternative to Arrest Program (HAAP) provides screening and referrals to detention alternatives for accused people with mental health, substance abuse, and housing needs. The Collaborative Ongoing Review Team, a pretrial court processing pilot program in New Haven, will attempt to increase the number of accused people who are diverted to community-based programs instead of jail and reduce the length of stay in jail by two weeks. The Judicial Branch Court Support Services Division’s Treatment to Pathways Program (TPP) provides immediate diversion at arraignment to treatment and services. The Early Screening Intervention (ESI) Program, implemented by the Office of the Chief State’s Attorney in pilot court locations, screens cases at the first court appearance for dismissal or “nolle” if the accused people comply with the program referrals for six months. All pilot programs are promising and are being evaluated for effectiveness and expansion.

There are specific dynamics that have resulted in benefits from reentry services for two pretrial populations. Accused people falling into one of these two groups are classified as pretrial for administrative purpose but are not actually in custody because they are a danger or cannot post bond.

Research has shown most pretrial detainees are charged with nonviolent, low level crimes but have challenges that impact the courts’ bail release decisions, such as history of failure to appear, mental health and/or addiction issues or chronic homelessness.

Connecticut Sentencing Commission
**Negotiated Sentences.** Almost all criminal cases (97 percent) are disposed of through plea bargaining.\(^3\) Pretrial detainees often agree to plead guilty in exchange for a reduced prison term. The issue is that they serve their sentence prior to entering the guilty plea during which they remain classified by DOC as pretrial detainees. Once they serve the negotiated sentence and enter a guilty plea, the case is disposed as a “time served” sentence. The person is then released from jail. Some are sentenced to a period of supervised probation following incarceration. These people must report to a JB-CSSD probation officer several days later. So, while they will eventually receive reentry services, they are left to their own resources to manage during those first few days after release from jail.

During the initial days after their release, these people can face challenges with housing, transportation, and maintenance of prescription medication or medical treatment. They often are released at court without returning to the DOC jail to retrieve their personal property or to arrange for transportation home. They often have no money or cell phone. In some cases, they are released from a court that is not in their hometown.

Another factor impacting their successful reentry is DOC jails do not offer the continuum of education, training, treatment and counseling programs, and rehabilitative and reintegration services and planning that are provided in prisons. Pretrial detainees can access only basic services such as recreation and religious and medical care and are not provided rehabilitation and reintegration services or reentry planning. For these people, the benefits of plea bargaining often remove access to DOC’s prison-based reentry services.

**Special Parole.** Sentenced people on special parole who are arrested for another crime are remanded to prison. DOC classifies them in pretrial status (unsentenced) based on the new arrest. BOPP does not order them released from prison to continue special parole supervision until after a parole revocation hearing, which is not held until the disposition of the new case. These people may not be released on bond for the new arrest because they are also held on a violation of special parole. This may result in the person remaining in prison for several months or years.

This is an administrative issue based on DOC’s classification protocols. Classifying people on special parole remanded to DOC custody as pretrial (unsentenced) helps to keep the general sentenced population number down. This is not a priority reentry issue since once released from custody these people will return to supervision and DOC can amend its classification of this population to more accurately reflect their status. However, it is imperative to reduce the number of new arrests while under supervision.

\(^3\) A plea bargain (also a negotiated plea or sentence) is any agreement in a criminal case between the prosecutor and defendant whereby the defendant agrees to plead guilty to a particular charge in return for some concession from the prosecutor. Plea bargaining is the process applied for the disposition of about 97 percent of criminal convictions.
Community Supervision

Sentenced people released early from incarceration to a period of community supervision comprise the largest reentry group. Incarcerated people are discretionarily released into the community by DOC or BOPP to supervision on parole, transitional supervision, placement in a halfway house or nursing home, and other early release programs. Probation and special parole are post-incarceration community supervision imposed by court and are not within the discretionary release authority of DOC or BOPP.

As sentenced people, they participated in DOC treatment, counseling, education, vocational training, religious, recreational and other programs; received medical and mental health care; and received rehabilitative and reintegration services. Following early release, parole or probation officers provide supervision, case management, and reintegration assistance. All community supervised people must comply with standard and specialized release conditions that can include participating in programs or services, maintaining employment or enrolling in education or training programs, and securing housing and conditions that promote prosocial behavior.

End of Sentence

This group includes sentenced people discharged from incarceration after serving their sentence with no community supervision, either discretionary release or court-imposed probation or special parole. This status is commonly referred to as end of sentence or “EOS”.

Like the community supervised group, these sentenced people participated in DOC’s programs and services and reentry planning. They could have obtained a state photo identification, reconnected with family or friends to arrange for housing and transportation, and mostly have been provided with some basic transition information by DOC prior to their release. (If they do not have someone picking them up from the prison, DOC will arrange for transportation to a drop-off point.) And, their personal property and any funds in their DOC account will be returned to them at release.

FOUR MAIN REASONS WHY INCARCERATED PEOPLE ARE DISCHARGED AT THE END OF THEIR SENTENCE:
(1) VOLUNTARILY WAIVE EARLY RELEASE TO PAROLE, TS, OR OTHER PROGRAM; (2) UNABLE TO FIND STABLE HOUSING DUE TO CHRONIC HOMELESSNESS OR UNSUITABLE SPONSOR; 3) NOT ENOUGH TIME FOR DOC TO ARRANGE FOR PROGRAM PLACEMENT OR SUITABLE HOUSING FOR PEOPLE SERVING SHORT PRISON TERMS (30 DAYS OR LESS TO A FEW MONTHS); OR (4) DENIED DISCRETIONARY RELEASE BY BOPP OR DOC.

Department of Correction

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4 The Department of Correction has discretionary release authority for people sentenced to two years or less. BOPP has discretionary release authority for people sentenced to more than two years. State law requires a person to serve 50 percent of their sentence to be eligible for parole, except that people convicted of a serious, violent offense must serve 85 percent to be parole eligible.
However, not everyone leaving prison having served his or her sentence has the advantage of such accommodations, particularly people who served long sentences. They face the same challenges as people discharged from pretrial status and are left to their own resources to manage during those first few days after release from prison. They may have no stable housing, transportation, or employment. They may have no or only limited funds and no cell phone; often people who served a long sentence are not familiar with current technology like smartphones and the internet. They may have interim prescription medication, but no resources to continue medical treatment. If they have lost connections with family or no longer have a home community, they are transported by DOC to a drop-off point usually in a city.

Because they have been discharged from prison and are no longer under a criminal sentence, EOS people are no longer eligible to receive further assistance or participate in the state-funded reentry program like those under community supervision. The reentry resource centers in Bridgeport, Hartford, New Haven and Waterbury were designed to be a resource hub for these people to assist during their initial release period.

REENTRY POPULATION TRENDS

The Criminal Justice Policy and Planning Division at OPM identified trends in the state’s reentry population. New additions to jail and prison have significantly deceased over the past decade. In the early 2000s, the prison population grew to almost 20,000 incarcerated people and it is now just under 13,500 (13,343 on November 1, 2018). As fewer people are admitted to prison and the prison population decreases, fewer people are eligible for discretionary early released programs like parole and TS.

Source of data: OPM Criminal Justice Policy and Planning Division
The trends that have not moved in a positive direction are (1) the steady number of pretrial detainees, (2) the increasing number of people sentenced to special parole, and (3) the dramatic increase in the number of people on special parole placed in halfway houses. As previously discussed, plea bargaining is driving the pretrial detainee trend.

**Special Parole.** Special parole was statutorily established in 1998 and, each year since, the number of people sentence to special parole has increased. Starting in 2013, the rate of growth increased; 1,647 people were sentenced to special parole in April 2013 compared to 2,231 in April 2016 (a 35 percent increase). OPM has predicted this number will grow to approximately 2,700 in early 2019. Daily, approximately 20 people are released from prison to special parole, but there are typically 400 to 500 people on special parole incarcerated due to technical violations or new arrests awaiting revocation proceedings by BOPP.

In addition, the term (length) of special parole sentences imposed by the courts has also been gradually getting longer. From 2009 to 2017, the number of people sentenced to a term of special parole between one and five years decreased 15 percent (from 502 to 543) and the number sentenced to more than five years to 10 years increased 46 percent (from 154 to 296). There was no real change in the number of people sentenced to special parole for a term of more than 10 years (12 in 2009 and nine in 2017).

Originally, special parole was intended to provide a period of post-incarceration for the highest-risk people who would otherwise be unlikely to be released on discretionary parole. Over the years, however, its use has expanded beyond serious and violent people and is more frequently used by prosecutors as a plea bargain tool and imposed more often by the courts. As a result, in 2018, its use was statutorily limited (Public Act 18-63). Specifically, special parole may not be imposed for convictions related to drug dependency. The courts are prohibited from imposing special parole unless it is deemed necessary for public safety based on the crime and the defendant’s criminal and community supervision histories. Finally, BOPP is now authorized to grant an early release from special parole if it is believed the person will “lead an orderly life.” BOPP is currently developing a policy and hearing protocols to hear special parole cases.

It will take years to affect the trends in special parole because people have already been sentenced to special parole and most have long terms. The new restrictions on imposing new special parole sentences and BOPP’s early release of suitable people from special parole reverse the trend. But, this is not a reentry issue other than in the fact that the system can successfully reintegrate people on special parole so that they do not return to prison and meet the criteria to possibly be released early from their terms of special parole.

**Aging Reentry Population.** OPM reported a dramatic change in the age composition of Connecticut’s prison population. In 2000, 47 percent of the total prison population was under the age of 30, but in 2018 they represent only 33 percent (a 30 percent decrease). On the other hand, incarcerated people over the age of 40 represented only 20 percent of the prison population in 2000 and in 2018 they are 36 percent (an 80 percent increase). The total number of older incarcerated people is growing. Those leaving prison tend to be much older than 20 years ago and, consequently, their risks and needs are significantly different than those who re-entered the community in the 1990s and 2000s.

Many older people re-entering the community from prison have a period of special parole. This has posed special challenges to DOC in housing newly released older people. A growing portion of the limited
number of halfway house beds controlled by DOC are now used to accommodate special parolees and, therefore, are not available to others approved for community release. This creates an obstacle to appropriate reentry supervision, services and treatment. Projections indicate that this problem will grow for the foreseeable future unless addressed by administrative or legislative action.

REENTRY COORDINATION AND OVERSIGHT

Connecticut recognized that the multiple needs and challenges facing people returning from jail and prison require a multi-pronged response. As a result, reentry policies and initiatives have been developed and are implemented at all levels of state and municipal governments and address issues like state and municipal justice, economic development, social services, public health, mental health and addiction, and housing systems. The effort extends beyond government agencies and includes nonprofit provider organizations, treatment and health care networks, schools, colleges and universities, victim and community advocates, faith-based organizations, public and private funding sources, and families and justice-involved people and their families. As such, a comprehensive, holistic reentry strategy needs oversight at all of its multiple levels and fronts.

As previously discussed, in the early 2000s, Connecticut adopted justice reforms to reduce prison overcrowding and recidivism and control criminal justice system spending. After two years, the initiatives were not as successful as anticipated. There was recognition that there was a lack of leadership among the state’s criminal justice and social service agencies. No one agency was responsible for the required planning, coordination, and collaboration. The stakeholders determined there was a need to have a single entity oversee implementation to: (1) assist in developing policy in collaboration with various agencies; (2) track and evaluate the effectiveness of the reforms; and (3) provide information necessary for funding decisions. Thus, the Criminal Justice Policy and Planning Division was established, headed by an undersecretary, within the Office of Policy and Management.

CJPPD has successfully overseen criminal justice reforms resulting in significant decreases in the number of arrests and the state’s prison population. It has assisted in the development of diversion, alternatives to incarceration, and early release from incarceration programs. The division coordinates with labor, education, health and medical care, and federal and state entitlement systems to provide services to people leaving jail or prison to reduce the challenges they face returning to their communities. It partners with public and private foundations to secure grants and alternative funding.

Traditional justice systems and policies that drive programs and services, however, still receive the bulk of state funding. Reentry requires going beyond the criminal justice system to create “out-of-the-box” inventiveness to bring together government and nongovernmental systems that have historically operated separately. Again, this requires oversight, authority and responsibility to make state policy and funding decisions.

**Strategic Directions.** This plan envisions a position whose incumbent reports to the CJPPD undersecretary and is solely responsible for overseeing the drafting of the state’s reentry strategy in collaboration with all stakeholders and implementing those strategies consistent with legislative and gubernatorial policies and funding. It is suggested the following recommendations be considered.
• Create a Director for Reentry Services - possibly within OPM’s Criminal Justice Policy and Planning Division.
• Establish a Reentry Advisory Board (REB) to the Criminal Justice Policy Advisory Council that includes membership of all stakeholders and justice-involved people and family members.
• Identify ways in which OPM can provide technical assistance and training in grant writing to nonprofit provider organizations that offer reentry services and programs.

REENTRY STRATEGY DIRECTIONS

The following proposed strategies address important areas of need: housing, employment, mental health, drug dependency, access to government assistance, and broad municipal and community-based organization involvement and support.

Housing

Improve the Availability of Housing Options for People Leaving Jail or Prison.

A place to live is one of the most fundamental components of a stable life. Stable housing is particularly critical for people returning from prison and jail, who face a myriad of challenges while reestablishing themselves in their communities. Yet significant barriers to stable housing for these re-entering people exist. The lack of stable housing increases the likelihood of contact with the justice system. (The Federal Interagency Reentry Council, A Record of Progress and a Roadmap for the Future, August 2016).

For several reasons finding stable affordable housing can be especially difficult for people who have been incarcerated. They may lack the resources to pay rent or are often barred from other housing options

In 2016, the City of Denver and eight private investors closed on the City’s first Social Impact Bond (SIB), an $8.6 million investment to fund a supportive housing program for 250 of the city’s most frequent users of the criminal justice system. The city makes outcome payments over five years based on the initiative’s goals of housing stability and decreased jail days. The supportive housing combines a permanent housing subsidy with wraparound services to help people gain increased stability in their lives. The program uses a Housing First Approach, which does not require that participants meet preconditions to entry, such as entering treatment, achieving sobriety, or committing to ongoing service participation requirements. The program targets people experiencing homelessness with additional challenges that result in frequent use of the criminal justice system and other public systems. The program initially targets people having eight or more arrests over three consecutive years and three of those arrests had to be marked as transient, meaning the person had no address or gave a shelter as an address.

Urban Institute, From Homelessness to Housed: Interim Lessons from the Denver Supportive Housing Social Impact Bond Initiative, November 2018
because of their criminal records. In addition, parole conditions and supervision requirements (such as not associating with people who have criminal records or living with a sponsor) can further limit their housing. Often, living with family members is the best-case scenario for people returning from jail or prison. However, even when the families are willing to open their doors to returning relatives, they may not be able to do so if they reside in buildings managed by public housing authorities, according to their regulations. Re-entering people with disabilities may also face significant barriers to obtaining housing that is both accessible and affordable. Even without these restrictions, the lack of employment or rental history can negatively impact housing applications. Finally, many landlords, property managers and public housing authorities reject applicants who have criminal records.

Homelessness and poverty are inextricably linked and are two of the priority issues facing re-entering people, especially immediately after release from jail or prison. Other major factors that can contribute to homelessness are mental illness and addiction and the lack of affordable or available treatment. (National Coalition for the Homeless) Some people were homeless before going to prison and some after release, for at least some period. Most reentry people are considered transitionally homeless after a catastrophic event like incarceration led to losing their home, even when they may need only one stay in the shelter system before finding stable housing. However, some reentry people become chronically or episodically homeless, often due to serious mental illness or addiction and chronic unemployment. Research suggests that a person is at a much higher risk of recidivism if he or she is unable to find stable housing or is homeless after release.

**PAY FOR SUCCESS PERMANENT SUPPORTIVE HOUSING PROGRAM (PFS/PSH) MAKES NEW HOUSING AVAILABLE FOR PEOPLE CYCLING BETWEEN THE JUSTICE SYSTEM AND HOMELESS SERVICE SYSTEM WHILE MAKING NEW PERMANENT SUPPORTIVE HOUSING AVAILABLE FOR THE REENTRY POPULATION. UNDER AN INNOVATIVE FORM OF PERFORMANCE GRANT CONTRACTING FOR THE SOCIAL SECTOR THROUGH WHICH GOVERNMENT PAYS ONLY IF RESULTS ARE ACHIEVED, THE GRANT SUPPORTS THE DESIGN AND LAUNCH OF THE PROGRAM TO REDUCE BOTH HOMELESSNESS AND JAIL TIME, GENERATING SAVINGS IN CRIMINAL JUSTICE AND SAFETY NET SYSTEMS.**

**THE CONNECTICUT HOUSING AUTHORITY AND THE CONNECTICUT FAIR HOUSING CENTER ARE SCHEDULED TO RELEASE A REPORT ON STATE-FUNDED HOUSING COMPLEXES FOR THE YOUNG, ELDERLY AND DISABLED. THE CONNECTICUT COMMISSION ON EQUITY AND OPPORTUNITY IS ALSO SCHEDULED TO RELEASE ITS COMPREHENSIVE STUDY ON IMPROVING STABLE HOUSING OPTIONS FOR VARIOUS POPULATIONS, INCLUDING PEOPLE WITH CRIMINAL RECORDS.**
Strategies should build upon the information and recommendations presented by the Connecticut Commission on Equity and Opportunity that is releasing its comprehensive report on improving stable housing options in the state (report to be released in January 2019) and the report on state-funded housing complexes for the young, elderly and disabled released by the Connecticut Housing Authority and the Connecticut Fair Housing Center (December 2018).

**Strategic Directions.** New strategies focus on: (1) reducing the number of people leaving jail or prison who become homeless or reliant on public shelters; (2) increasing stability for marginally-housed people; and (3) increasing the number of people who retain existing housing during short-term incarcerations. It is critical that reentry transition planners and service providers are familiar with the full range of available housing options. The following support these strategies:

- Consult and collaborate with the Connecticut Commission on Equity and Opportunity, the Connecticut Housing Authority, and the Connecticut Fair Housing Center.
- Coordinate with public housing authorities to adopt more inclusive eligibility criteria for Section 8. Formalize the process for applying for a public housing exemption for people with criminal records.
- Develop admission and eviction policies for public housing that consider a person’s individual circumstances and eliminate blanket prohibitions against people with criminal records.
- Encourage government and public housing programs to develop housing options accessible to people leaving jail or prison.
- DOC Reentry Counselors and the CT Reentry Collaborative work together with housing authorities and advocacy groups to provide workshops and information on tenant rights and appropriate housing services.
- Offer counseling and support to the families of people going to jail or prison for only short terms to help stabilize the relationship and housing.

**EMPLOYMENT**

**Improve Rates of Self-Sufficient Employment for People Leaving Jail or Prison.**

There is little disagreement that employment is a critical issue for people leaving jail or prison. People under probation or other post-incarceration supervision like parole, special parole and TS are required by the conditions of their sentence or release order to hold legitimate, part- or full-time employment.

People often enter jail or prison having had limited educational opportunities or employment histories. Both the stigma of incarceration and the temporary

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**EXPAND WORKFORCE DEVELOPMENT PROGRAM**

Under a $400,000 Harford Foundation for Public Giving grant, Capitol Workforce Partners, BEST Chance Partnership and state DOL, DOC, and DSS implemented the Second Chance Integrated Basic Education Skills Training (IBEST) program in the Capitol Region. The program provides outreach, assessment, work readiness training, and customer service training to people returning from prison. Training is provided in manufacturing, culinary, and construction. Participants receive stipends and other support services and job placement and retention.
disconnection from the workforce are among the challenges people face when trying to find a job after release from jail or prison. People who have been incarcerated earn 40 percent less annually than they had earned prior to incarceration and are likely to have less upward economic mobility over time than those who have not been incarcerated (Pew Charitable Trusts, *Collateral Costs: Incarceration’s Effect on Economic Mobility*, 2010).

A comprehensive reentry system must offer access to education, job training in fields where there is a labor demand in the community, job readiness support, and transitional employment before and after release to help people find and sustain meaningful employment and support their families.

**Strategic Directions.** New strategies should (1) increase the availability and expand the current evidence-based education, job training and vocational programs and (2) support incarcerated people in initiating a job-search prior to release. The following support these strategies:

- Consult and coordinate with the Commission on Equity and Opportunity on recommendations for livable wage employment.
- Provide vocational training that meets the local labor market needs and work with labor unions to create programs for people to train for skilled jobs as union apprentices.
- Coordinate with the state Department of Labor (DOL) to analyze the local job markets to identify labor market needs. Determine which industries and major employers hire workers with criminal histories.
- Develop or expand support-employment programs for people with disabilities who have criminal records.
• Review laws that affect employment of people with criminal histories and eliminate those that are not directly tied to public safety. (The Connecticut Sentencing Commission is reviewing laws that restrict or prohibit people with criminal records from obtaining professional licensure or certification.)

• Consider legislation for expedited pardons records for people with low-level, nonviolent criminal records and automatic and discretionary expungement of criminal records for people convicted for offenses that have been decriminalized.

MENTAL HEALTH AND ADDICTION TREATMENT

Improve Coordination and Continuity of Care for Mental Health, Chemical Dependency, and Primary Care for People Before and After Their Release from Jail or Prison.

Compared to the general population, a disproportionate number of people involved with the justice system struggle with mental illness and addiction, which can be co-occurring. Further, people involved with the justice system tend to have poor access to primary and specialized medical care, and many receive no medical examinations or medications despite chronic conditions. This lack of attention to health care after reentry can disrupt treatment plans and aggravate serious health problems such as diabetes, asthma, or HIV. Ensuring the provision of adequate health and behavioral health services will not only improve health and stability, but will reduce costs, inside and outside the prison system by avoiding preventable medical complications and ensuring stability for those with behavioral health disorders. (National Healthcare for the Homeless, Criminal Justice, Homelessness and Health, 2011 Policy Statement)

Health professionals have not generally viewed the criminal justice system as part of community health, and criminal justice practitioners have only recently begun to consider the impact that addressing physical and behavioral health conditions can have on reducing criminal behavior. This has contributed to a long-standing perception of correctional health as separate from mainstream health care in the United States, with detrimental effects on both public health and public safety. The Affordable Care Act (ACA) is generally not viewed as being applicable to correctional populations; but, in fact, it opens the door to enormous reforms in the continuum of care between correctional and community-based providers.

Community providers inherit these problems. Drawing people released from jail or prison into the community health care framework is critical for the nation; and it is especially relevant for poor communities, communities of color, and other socially marginalize groups that are both disproportionately imprisoned and often disenfranchised from medical care. (J. Rich, R. Chandler, How Health Care Reform Can Transform the Health of Criminal Justice-Involved People, March 2014)

Health care providers in the corrections systems should ensure that medical plans are continued, treatment and medications are provided, and health screenings are conducted regularly for all inmates.

Connecticut criminal justice agencies and nonprofit provider organizations utilize appropriate and validated screening and assessment tools to inform supervision and services, provide evidence-based treatment in facilities and the community, and work to increase access to treatment and continuity of care. These can help ensure people receive the help they need to promote recovery and have a healthy transition to their communities once they are released from jail or prison.
However, community-based treatment programs, particularly residential programs, have been historically under-funded. During the most recent state budget crisis, many contracts were reduced further or entirely de-funded. DOC and JB-CSSD eliminated all but approximately 200 residential treatment beds. The immediate issues are the availability of treatment beds and their location, often outside the person’s community. Given the opioid crisis, there is an even more urgent need for detoxification and inpatient addiction treatment beds, as well as outpatient treatment for addiction and mental health.

**Strategic Directions.** There is a critical need to conduct a comprehensive assessment of mental health, addiction and primary care programs to ensure the network of programs and services effectively meet the needs of the reentry population and are adequately funded. The assessment should: (1) gauge the therapeutic program needs of people released from jail or prison, including appropriate matching of people to programs; (2) determine current and projected needs for in-patient program beds and outpatient program slots including waitlists; (3) identify geographic needs (the locations of clients versus beds); (4) conduct a cost-benefit analysis of evidenced-based programs; and (5) calculate appropriate funding needed for identified levels of programs and identify funding alternatives other than traditional state contracts.

Other strategies should:

- Increase access to community-based care.
- Provide culturally-appropriate and holistic community treatment.
- Educate community mental health providers to understand the psychological effect of justice-system involvement on mental health treatment.
- Encourage the use of trauma-informed interventions for justice-involved people.
- Provide people leaving jail or prison who have mental health prescriptions with a sufficient interim supply upon release.

**PILOT MEDICAL RECORD PROGRAM**

DOC is in the process of completing implementation of an automated inmate medical record system. Once the system is in full use, DOC in consultation with DPH and DSS and medical and treatment service providers should develop a process to provide people released from jail or prison with medical records and prescriptions (W-10) to enable them to continue appropriate medical, mental health and substance abuse treatment in their communities. The medical records can be part of the discharge packet that already includes their identification card or documents necessary to obtain an identification card, reentry resources, resume, training certificates, and education records.
GOVERNMENT ENTITLEMENTS

Sustain Access to Government Assistance Programs for People Leaving Jail or Prison.

A key factor for incarcerated people to successfully return to their communities is the continuation of basic services that were provided in the correction facility and address financial instability during the first days, weeks, and months in the community. Federal and state entitlement programs can help stabilize this transition.

Welfare reforms dismantled entitlements as a safety net for the poor. Because people with criminal records were thought less deserving than others, they were banned from public housing and made ineligible for welfare benefits such as Temporary Assistance to Needy Families (TANF) or General Assistance (GA). These prohibitions limit the housing options of returning people and place family members in precarious scenarios (Jeremy Travis, 2002). Conditions of supervision and program requirements can often conflict with entitlement guidelines. For example, people on parole or probation are required to work, but many earn a non-livable wage. However, because they have incomes, they cannot receive TANF or GA benefits if they have children.

The needs of the reentry population are complex. State criminal justice agencies have made significant progress in enrolling justice-involved people for federal and state government assistance programs and should continue to do so.

Strategic Directions. Strategies should continue to support access to and reduce restrictions for government assistance programs for people leaving jail or prison and their families. Justice agency stakeholders should collaborate with federal, state and municipal public assistance staff to eliminate barriers to the public assistance necessary to support successful reentry transition.

FAMILY SUPPORT

Maintain People’s Connections to Their Families While in Jail or Prison and Support Them and Their Families After Release.

Many people who are incarcerated in jails and prisons are parents of minor children. Due to their incarceration, they and their families can face financial difficulties, housing instability, loss of emotional support and guidance, and the social stigma of having a parent or loved one in prison. These challenges often have significant impact on children of incarcerated parents, who have an increased risk of poor school performance, substance addition and mental health needs.
Research shows that visitation between incarcerated people and their children, spouses and families (when legally allowed) strengthens family ties, reduces prison violence, and decreases recidivism. Strong families are an essential part of the reentry process because people returning to their communities often rely on relatives for help with housing, transportation, finances, and emotional support. Programs that focus on cultivating and strengthening these relationships can improve outcomes for both incarcerated people and their families. Families must be engaged in the reentry process and provided with pre- and post-release services, especially during the initial transition back home. Incarcerated people with children can benefit from parenting workshops, peer support, financial literacy classes, and organized family visits to jails and prisons.

During the process to develop this Reentry Strategy, an issue that was raised frequently was that incarcerated people often accumulate tens of thousands of dollars in child support debt during and after incarceration. Although Connecticut law allows incarcerated people who are the noncustodial parent to modify their child support orders when in jail or prison, many are unaware of this right and continue to accumulate debt while incarcerated. This financial burden produces negative consequences for the parents, children, and the state. Custodial parents and children rarely recover the child support they are owed, while the debt makes reentry even more difficult for the formerly incarcerated noncustodial parent. Connecticut may only incarcerate people who refuse to pay child support, not those who are unable to pay. However, a person may be incarcerated for violation of any court order, like a child support order. This cycle of debt and incarceration is counterproductive as well as expensive. (The Arthur Liman Public Interest Program, Yale Law School, Incarceration and Child Support Obligations: A Report to the Recidivism Reduction Committee of the Connecticut Sentencing Commission, June 2013)

**Strategic Directions.** This Reentry Strategy recommends consideration of the following reforms to improve family engagement and support for incarcerated people and those leaving jail or prison.

- Create more subsidized transportation options for families to less-accessible jail and prison facilities.
- Reduce DOC restrictions on the number of people that may be placed on visiting lists and increase flexibility regarding the number of people who can visit at one time, especially allowing sibling groups to visit together when seeing a parent.
- Ease restrictions, within security parameters, on visits with family members with criminal records.
- Ensure low-cost phone service to allow communication with co-parent, foster parents, caregivers, pediatricians, school officials, etc.
- Expand family services, counseling and parent initiatives seeking to reconnect incarcerated people with their families before and after release.
- Initiate automatic child support modification proceedings upon incarceration at a person’s sentencing hearing.
ACCESS TO SERVICES

Improve People’s Access to Basic Resources and Services in the Community after Release from Jail or Prison.

Reentry Resource Centers. The state’s four reentry resource centers, located in Bridgeport, Hartford, New Haven, and Waterbury, provide triage, support and program referrals for people released from prison at the end of their sentence (the EOS population). While each center has the same general goals, they are each structured and funded differently in response to unique geographic characteristics. The centers are not a “one size fits all” model, but are adapted to the municipal governments, local provider network, communities, and released people and their families that they serve.

While use of the reentry resource centers is voluntary, DOC encourages people to visit the centers. DOC drops off people who are identified as homeless on the day of their release and requesting transportation to Hartford at the Reentry Welcome Center. DOC also provides to each Reentry Roundtables monthly lists of the people scheduled for release (name and release date) and the city to which they will be returning.

The Reentry Welcome Center in Hartford is undergoing a three-year evaluation based on identified outcome measures. This evaluation can help to inform the work of the existing welcome centers and to develop best practices for municipalities looking to open welcome centers.

Forensic Peer Mentoring. The reentry strategy has identified the challenges faced by incarcerated people returning to communities across the state. Incarceration often exacerbates the factors that contributed to criminal activity such as no prosocial network, under-employment or unemployment, homelessness or unstable housing, limited education, and poor problem-solving skills.
For many incarcerated people, the few hours and days after release from prison or jail are critical. Many, particularly those released from pretrial status or at the end of their sentence, have no or limited supports available to them. Many incarcerated people are unaware and ill-prepared for release either at court or from jail or prison. For example, many walk out of the courthouse wearing institutional uniforms, without their identification or any other personal items lost since arrest or still stored at the jail or prison. This is problematic for both the person and community as release may not be in their home community, which means they may have no family ties or community support.

Although there are well-documented best practices and evidence-based models for successful reentry programs, there is no “one size fits all” model. Peer-delivered services are an innovative intervention that supports returning people and potentially shifts the state’s judicial policies while reducing costs associated with criminal justice. Many states have begun to explore and benefit from evidence-based peer models.

One study examined the development and implementation of Project New Opportunity (PNO). This project provided reentry support for people released from federal prison. It was developed under President Barack Obama’s Clemency Initiative and the United States Sentencing Commission’s (USSC) reduction in drug sentencing guidelines (2014). Key elements of the PNO model include a staffing plan that uses formerly incarcerated people as Reentry Consultants. This "inside/outside" model connects incarcerated people with Reentry Consultants prior to release with continued support services available following release. In the first year following release, PNO participants were neither rearrested nor violated post release supervision. PNO participants identified the pre-release connection with Reentry Consultants as critical to their reentry success. [http://communityalternatives.org/pdf/PNO-Document-New-Version-Final.pdf](http://communityalternatives.org/pdf/PNO-Document-New-Version-Final.pdf)

As identified in the PNO model, the forensic peer mentor can help returning citizens navigate barriers and systems, find stability and avoid new encounters with the criminal justice system. A forensic peer mentor serves as a first line of support to assist in the reentry process. Forensic peer mentors can serve as role models and provide a level of credibility and understanding; they have been there and can relate to the stressors and challenges, understand how to navigate the justice and social service system, and can provide referrals and suggestions for specific problems.

DOC uses specially trained forensic peer mentors in its T.R.U.E. and WORTH programs. Older incarcerated people serve as mentors to the younger people in the program. DOC is currently examining ways to expand forensic peer mentorship to the general incarcerated population.

CONNECTICUT SHOULD EXPLORE THE USE OF FORENSIC PEER MENTORS, SIMILAR TO THE MODEL USED IN PROJECT NEW OPPORTUNITY (PNO), AT THE COURTS, REENTRY RESOURCE CENTERS, AND ALTERNATIVE TO INCARCERATION CENTERS (AICS), AND FOR PAROLE AND PROBATION CASE MANAGEMENT.
Justice agencies providing community supervision and the court could benefit from a pilot program like the PNO model that employs specially trained, formerly incarcerated people to work with those released from jail or prison. Employing forensic peer mentors would offer the state an affordable opportunity to provide positive encouragement, paired with motivational goal setting and role playing to navigate reentry barriers. These techniques can be offered at the court and integrated into reentry resource centers, probation and parole case management, and other reentry programs.

Currently, people participate in a reentry process that is initiated only 60 days prior to being released from prison or jail. This is not enough time to properly prepare for the return to community after incarceration, especially after long sentences. The best outcomes for successful community reintegration have been achieved with adequate preparation and support before, during, and after release.

The forensic peer mentor training and program administration can be provided for a fraction of the cost of justice system staff. The program also provides a career path for incarcerated mentors and released people who have successful reintegrated.

**Strategic Directions.** It is recommended the following strategies be considered.

- Open a reentry resource center in each municipality that has a Reentry Roundtable.
- Establish a forensic peer mentoring pilot program in the courts and for probation and parole case management.

**Reentry Transition Planning**

**Continue to Improve Reentry Transition Planning for People Leaving Jail or Prison.**

Reentry doesn’t mean just “letting them go.” Instead, reentry prepares incarcerated people to be released, presuming they are much better off at the time of release than they were at the time of their admission to prison.

Ideally, reentry planning begins at the time of intake/admission and extends beyond the time of release to prepare incarcerated people for long-term post-release success. Release planning represents a distinct component of the broader process of reentry planning, focusing on success at the time of release and in the days and weeks that follow. Ideally, preparing for the moment of release will represent a natural phase in the progression from intake to reentry (Council of State Governments, 2005).

Over the past several years, DOC has strengthened and improved its discharge planning process. Specifically, DOC has established Reintegration Units and uses Reentry Counselors.

**Reintegration Units.** DOC’s Reintegration Center model embodies a programmatic concept that takes a holistic approach and combines a focus on reintegration, community and family engagement with rehabilitative model of corrections. It is a departure from traditional correctional philosophies that relied mainly on risk and needs assessments to identify criminogenic needs to require an incarcerated person to
complete prescribed programming. While assessments still guide center staff in determining appropriate interventions, the concept of the Reintegration Centers includes the incarcerated person as an active participant in the creation and implementation of the treatment plans.

Center staff formulate treatment plans that incorporate the needs and concerns communicated by the incarcerated person in addition to the program needs and facility expectations on accountability and responsibility. Incarcerated people are prepared for release back into the community by participation in programs and chosen pathways in Recovery, Education/Vocational, Faith-based, Community Service, Positive Support Network, Health and Wellness, Family Reunification, and Employment.

The Reintegration Centers target interventions for young people aged 18 to 25, veterans, people convicted of driving while intoxicated (DUI), and women. The three centers for men are at the Cybulski Correctional Institution and the women’s center is at York Correctional Institution.

**Reentry Counselors.** Correctional counselors typically meet with incarcerated people scheduled for discharge 60 days before their release to coordinate transportation, clothing, and commissary accounts. If a person has specific, unmet needs, the correctional counselor will refer him or her to the Reentry Services Unit.

The Reentry Counselors then assist incarcerated people prepare for release by:

- connecting with the state’s 2-1-1 service, community providers, and the Department of Social Services for state assistance;
- coordinating with the Medical Discharge Planners to ensure medical, mental health or substance abuse treatment continues after release from prison;
- helping to obtain state photo identification or driver’s license and other documentation of identification (e.g., birth certificate, Social Security card); and
- conducting “in reach” with community providers to visit the prison and conduct assessments and intakes prior to the person’s release.

Reentry Counselors also attend Reentry Roundtable meetings and meet with community providers. They do not meet with or assist people being released to community supervision (parole, special parole, halfway house, etc.) because parole officers are responsible for case management.
Reentry counselors are currently in all prisons, but some prisons only have part-time coverage. There is a Reentry Counselor assigned to the Hartford jail to assist in DOC’s partnership with the Reentry Center in Hartford, but there are no such services at the Bridgeport or New Haven jails.

**Strategic Directions.** Expand the Reintegration Unit model to all level 2 and 3 correctional facilities for the general incarcerated population and assign full-time Reentry Counselors at all jails and prisons at all levels (2 through 5).

**PAROLE CASE MANAGEMENT**

**Expedite Implementation of Best Practices in Parole Case Management.**

The need for parole supervision agencies to effectively carry out their mission of aiding reintegration and reducing crime is a critical component of successful reentry. Parole and community supervision strategies must focus on improving outcomes related to substance abuse and addiction, employment, housing, health and mental health, and family and community relationships while holding people accountable for their behavior and advance public safety objectives.

The culture and practice within the DOC’s Parole and Community Services Division has traditionally relied on a surveillance model. The surveillance or law enforcement model has repeatedly been shown to have little impact on reducing recidivism and, in fact, increases the likelihood a supervised person will return to prison. According to the Crime and Justice Institute, “the conventional approach to supervision in this country emphasizes personal accountability from [supervised people] and their supervising [parole] officers without consistently providing either with the skills, tools, and resources that science indicates are necessary to accomplish risk and recidivism reduction” (Bogue et al., 2004, 1).

**EPICS**

EPICS is an engagement strategy based on the most current research that suggests the relationship between a parole officer and supervised person and what is discussed is important. The relationship quality involves caring and fairness, trust, and a respectful style. EPICS shifts the relationships between parole officers and supervised people from confrontational and authoritarian to more helpful interactions.

EPICS is designed to use a combination of monitoring, referrals, and face-to-face interactions to provide supervised people with a sufficient “dosage” of treatment interventions and make the best possible use of time to develop a collaborative working relationship.

EPICS assists in supervision and guides interventions when appropriate and necessary, using graduated incentives and consequences and provides evidence-based interventions. Parole officers are taught to match supervised people to services and programs that address risk factors and remove or accommodate barriers related to responsivity considerations. Simply, EPICS assists parole officers to target criminogenic factors to reduce risk and to target non-criminogenic factors to reduce barriers.

An EPICS sessions are structured in the following way: (1) check in, (2) review, (3) intervention, and (4) homework.
Using a $3 million federal recidivism reduction grant, however, DOC Parole and Community Services Division developed a plan for a more progressive approach to parole supervision, reentry assistance and reintegration, which is now more aligned with the department’s overall mission. The initiatives are evidenced-based national best practices and include Effective Practice in Community Supervision (EPICS), Cognitive Behavioral Therapy and Reasoning and Rehabilitation (CBT/R&R), graduated sanctions, and quality assurance. The initiatives expand on the division’s implementation of a Risk, Needs and Responsivity assessment model.

DOC Training Academy provided all parole officers and supervisors with training in EPICS and CBT/R&R. The University of Cincinnati and the former head of the Oregon Division of Parole and Community Supervision provided guidance as to the implementation of these techniques and tools. DOC is slowly phasing in implementation of the initiatives. Parole officers are directed currently to use these techniques and programs for only 10 percent of high-risk supervised people. Full implementation is scheduled for 2020.

JB-CSSD has been successfully using engagement strategies, CBT, graduated sanctions and incentive-based supervision, and quality assurance processes for decades. In the 1990s when the BOPP had consolidated responsibility for hearing and supervision, it also used similar best practices and tools. These agencies can serve as a technical assistance resource for DOC. For example, DOC is currently purchasing CBT/R&R services through an existing JB-CSSD contract, but only for high-risk supervised people.

**Time Out Program.** The DOC Time Out Program (TOP), in specific prisons, was intended to provide programs and services to assist people remanded (returned) to incarceration from parole and community supervision. Supervised people are typically remanded for a technical violation of parole or community supervision or for a new arrest. TOP was designed as a short-term period of incarceration to stabilize the person by resolving the problems or challenges that led to the technical violation or new arrest.

Due to the recent budget crisis, the state reduced the number of available in-patient addiction detoxification and treatment beds for people supervised on parole and community supervision. The opioid crisis has significantly increased the need for these beds.
Many of the reasons for reincarceration in TOP were related to addiction or mental health problems. DOC, therefore, has established substance abuse treatment programming as a key element of TOP. As a result, TOP is a resource to address high-risk substance abusers on parole or community supervision.

Due to the efforts being implemented, recent data reflects a lower rate of re-incarceration for technical violations. However, new criminal arrests for parolees have increased, thereby influencing the persistently high rate of reincarceration of people on parole, special parole, and community supervision.

**Strategic Directions.** DOC should consider the following strategies:

- Expedite full implementation of EPICS, CBT/R&R, and quality assurance process initiatives and educate and train contracted providers on these tools.
- Expand use of the EPICS and CBT/R&R for all appropriate parole, special parole, and community supervised people including those placed in halfway houses.
- Collaborate with BOPP on an evaluation of the Time Out Program (TOP) to determine (1) admission criteria (2) length of stay and discharge guidelines, (3) program and service needs, and (4) scheduling parole hearings.
- Adopt with BOPP the recommendations contained in the report *Parole Revocation in Connecticut: Opportunities to Reduce Incarceration*, by the Samuel Jacobs Criminal Justice Clinic of the Jerome N. Frank Legal Services Organization at Yale School of Law (September 2017).
Appendix A
Overview of Connecticut Criminal Justice Budget
Cost-Benefit Analysis and Budget Trends for Reentry Initiatives and Programs

Background
The primary state entities involved in the reentry effort are the Department of Correction and the Judicial Branch. While other agencies play a role in aiding justice-involved people (e.g., the state Departments of Mental Health and Addiction Services, Social Services and Labor), this report focused on the primary agencies’ spending. This review is based on the DOC and the Judicial Branch spending from the General Fund appropriation (by appropriated account) for the past 10 years from state fiscal year (SFY) 2008 through 2018.

Department of Correction
Table A-1 shows the DOC budget in SFY 08 and SFY 18. The following are trends in the DOC spending over the past 10 years:

- Actual total spending decreased by 13 percent.
- Spending within the largest components of the budget, specifically Personal Services, Other Expenses, and Inmate Medical, decreased by 15 percent.
- Spending in some smaller appropriated accounts showed growth over the 10-year period, namely, Stress Management (4%), Parole Staffing and Operations/Board of Pardons and Parole (21%) and Legal Services to Prisoners (7%). Also, the following smaller accounts showed decreases: Aid to Paroled and Discharged Inmates (-32%), Volunteer Services (-73%), and Community Support Services (-6%).
- Authorized staff positions for the DOC decreased by 11 percent.

These budget changes generally follow the 22 percent decline in the total DOC population, although not in proportion. While the prison population declined by 30 percent and the community population declined by 15 percent, the budget declined only 13 percent over the same period.

In terms of reinvested savings and an on-going available funds basis, there were some portions of the budget that increased while others decreased and these can be seen as reinvestments, such as Stress Management, the Board of Pardons and Parole and the STRIDE program. Reinvestment within the Personal Services account could also have occurred since it is large and did not decline in direct proportion to the population decline. New programs such as the TRUE Unit program could have been created with such reinvested savings.

There were other accounts that either began after 2008 or ended before 2018 that were funded and not included in the percentage changes over the whole 10-year period. These intermittent accounts ranged in spending from approximately $31,000 to over $1 million annually. They included: STRIDE, Persistent Violent Felony Act (later re-allocated among other accounts), Cheshire Prison Effluence, Distance Learning and Program Evaluation. (Note: The Children of Incarcerated Parents account was appropriated funds during this period, but funds appear not to have been spent.)
### A-1. Department of Correction Financial Data: Operating Budget

<table>
<thead>
<tr>
<th>Actual Expenditures</th>
<th>SFY 08</th>
<th>SFY 18</th>
<th>% Change</th>
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<tr>
<td>Personal Services</td>
<td>$436,915,348</td>
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<td>Other Expenses</td>
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<td>Equipment</td>
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<td>Stress Management</td>
<td>$20,130</td>
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<td>Worker’s Compensation</td>
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<td>Inmate Medical Services</td>
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<td>Parole Staffing &amp; Operations/Board of Pardons &amp; Parole</td>
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<td>STRIDE</td>
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<td>Mental Health AIC</td>
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<tr>
<td>Persistent Violent Felony Act</td>
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<tr>
<td>Cheshire Prison Effluence</td>
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<td>Distance Learning</td>
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<tr>
<td>Children of Incarcerated Parents</td>
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<tr>
<td>Program Evaluation</td>
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<td>Aide to Paroles &amp; Discharged Inmates</td>
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<td>Legal Services to Prisoners</td>
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<td><strong>TOTAL AGENCY GENERAL FUND</strong></td>
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<td><strong>$603,835,118</strong></td>
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Source of Data: Comptroller’s Annual Report: Budget Basis

On an intermittent basis, additional funds were made available between SFY 08 and SFY 18 that were not made in SFY 08 and sustained in SFY 18, such as STRIDE, Persistent Violent Felony Act, Cheshire Prison Effluence, Distance Learning and Program Evaluation.

A review of the relationship between the DOC budget and the General Fund reveals that DOC spending ranged from 5 percent of the General Fund in SFY 08 to 4 percent in SFY 18.

The Program Budget, included in the Governor’s Recommended Budget, indicates that support for Management Services declined by 39 percent and for Staff Training and Development declined by 34 percent.

Support for the Board of Pardons and Parole rose 45 percent.

**Judicial Branch**

Table A-2 shows the Judicial Branch budget in SFY 08 and SFY 18. Trends in the Judicial Branch including the Court Support Services Division are as follows:

- Actual spending increased by 1.87 percent over the 10-year period from SFY 08 to SFY 18.
The largest components of the budget are Personal Services, Other Expenses, Alternative Incarceration Center program and Juvenile Alternative Incarceration Center program, which account for 93 percent of the total budget, decreased only by 2.75 percent.

The appropriated account with the greatest percentage increase was Youthful Offender Status (a 133% increase) while the Juvenile Alternative Incarceration Center had the largest decrease (32%).

The Juvenile Justice Centers spent nothing in SFY 17 or SFY 18 due to holdbacks and were subsequently eliminated.

<table>
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<th>A-2. Judicial Branch Financial Data: Operating Budget</th>
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<td><strong>Actual Expenditures</strong></td>
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<td>------------------------</td>
</tr>
<tr>
<td>Personal Services</td>
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<tr>
<td>Other Expenses</td>
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<td>Forensic Sex Evidence Exams</td>
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<td>Probate Court</td>
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<td>Worker’s Compensation Claims</td>
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<tr>
<td>Youthful Offender Status</td>
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<td>Victim Security Account</td>
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<td>Children of Incarcerated Parents</td>
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<tr>
<td>Legal Aid</td>
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<tr>
<td>Youth Violence Initiative</td>
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<td>Youth Services Prevention</td>
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<td>Judges’ Increases</td>
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<td>Children’s Law Center</td>
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<td>Juvenile Planning</td>
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<td>Juvenile Justice Outreach Services</td>
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<td>Board and Care for Children – Short Term Residential Care</td>
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<tr>
<td>Nonfunctional – change Accruals</td>
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<tr>
<td>TOTAL AGENCY GENERAL FUND</td>
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</tbody>
</table>

Source of Data: Comptroller’s Annual Report: Budget Basis

Since the Judicial department implements a diverse set of programs from courts and court support to alternatives to incarceration, it is difficult to estimate a relationship between spending by account or general program and services provided without more activity-based cost accounting.

Since SFY 08, the largest programmatic portion of the budget (the Superior Court) did not have the greatest percentage growth. The greatest growth was in the Judicial Branch Administration.

In terms of reinvested savings and on an on-going basis, there were some portions of the budget that increased as other decreased and these can be seen reinvestments. Spending for Juvenile Alternative
Incarceration and Juvenile Justice Centers decreased while Alternative Incarceration Center Program and Youthful Offender Status increased. With only less than one percent (0.67%) increase in Personal Services in 10 years including wage increases larger than that, it would seem that there were some savings occurring in that account.

New programs such as: Children of Incarcerated Parents, Legal Aid, Youth Violence Initiative, Children’s Law Center, Juvenile Planning, Juvenile Justice Outreach Services and Board and Care for Children - Short-Term Residential Services could have been created through reinvestment of some savings.

**Effect of the 2008 Recession**

In SFY 08, the inmate population was increasing higher than the SFY 07 averages and the agency experienced a need for additional resources to address this and new legislation requiring greater funding. Shortly thereafter the prison population began a downward trend that continues today. This, and to a lesser degree the economy, has allowed the department to close prisons and parts of prisons.

Governor Dannel Malloy attributed the ability to close units of and whole prisons to recently-enacted juvenile justice reforms and a decline in the crime rate with its ensuing decrease in the prison population. The direct impact to DOC and the Judicial Branch during the SFY 08 recession is largely manifest in negotiated labor contract savings allocated to each agency’s appropriation and also in subsequent allotment rescissions or appropriation changes necessary to mitigate forecast deficits. For example, in SFY 11, nearly $19 million was saved due to negotiated labor savings and management savings. However, a year ago (in 2017), Governor Malloy announced that with the closure of a housing unit at the Manson Youth Institution, the list of recently downsized facilities totals approximately $50 million in annual savings.

With specific regard to the Judicial Branch, as mentioned above, the recession affected the budget by distributing savings related to the labor concessions. However, over the course of this 10 year period, the budget grew slightly versus contracting. This was due in part to investments in services supporting court operations, probation, youthful offenders and the implementation of the state’s Raise the Age legislation.

In SFY 18, funds to support the re-assignment of juvenile justice services were transferred from the Department of Children and Families (DCF) to the Judicial Branch Court Support Services Division (Public Act 17-2, June Special Session). Funding of $8,856,922 was transferred in SFY 18 (half-year) and $17,713,843 in SFY 19 (full-year) from DCF to the JB-CSSD, which reflects the reassignment of: (1) the entirety of DCF’s Juvenile Justice Outreach Services account ($11,149,525 in SFY 19), and (2) the funding in DCF’s Board and Care for Children - Short-Term and Residential account that supports juvenile justice people in residential care settings ($6,564,318 in SFY 19). Nominal decauses were made to these amounts pursuant to revisions to the SFY 19 appropriation to reflect the annualization to budget lapses in SFY 18.

**Justice Reinvestment from Prison Closures and Downsizing**

In December of 2017, Governor Malloy tallied a list of prison closures and the resulting annual savings in recent years as follows:

- One unit at the Manson Youth Institution, $600,000.
- Enfield Corrections Institution, $6.5 million.
- Radgowski Annex Building at the Corrigan-Radgowski Correctional Center, $3 million.
• Four housing units within the Osborn Correctional Institution, $2.2 million.
• Niantic Annex of the York Correctional Institution, $7.6 million.
• Fairmont building at the Bridgeport Correctional Center, $2.1 million.
• Bergin Correctional Institution in Storrs, $12 million.
  Gates Correctional Institution in Niantic, $12.3 million.
• Webster Correctional Institution in Cheshire, $3.4 million.

There have been increases to the budget for some initiatives to add teachers or community support services. The most significant decreases in spending came in SFY’s 10, 13 and 17. In those years or the ones immediately following, it does not appear that funds were re-invested in nearly the amounts of the decrease. Much of the re-bounding increases appear to relate to necessary wage and compensation-related costs, not program enhancements. However, there may have been re-investments done internally within the larger accounts such as Personal Services and the creation of the TRUE and WORTH Units.

While spending by the Judicial Branch generally increased, the Juvenile Alternative Incarceration account decreased. After this decrease began, other accounts were created with new investments in spending such as: Youth Violence Initiative, Youth Services Prevention, Children’s Law Center and Juvenile Planning.

**Measuring Benefit of Reentry Programs**

**Key Performance Indicators (KPI).** A clear definition of the reentry system and its purpose should be established. This statement should be written in terms that allow those operating, measuring and evaluating the program to understand and measure the achievement of the purpose, goal or objective. This success should be defined by measures of performance which indicate efficiency and effectiveness of the efforts to achieve the purpose/goal of the system/program. Such indicators usually involve an expression of intended and actually achieved workload, outcomes/results and cost/savings. In this way, all parties and their efforts that contribute to the goal of this system or program can understand their role and be included and measured to determine the operation of the system. Some examples would include the numbers served, system processing efficiency, outcomes achieved and program cost effectiveness and efficiency. Some measures could pertain to how well clients acquire and maintaining housing, employment, health (eliminate substance abuse), recidivism, average and marginal costs that can be used for productivity and cost-benefit analyses.

**Cost-Benefit Analyses (CBA).** Generally, a cost-benefit analysis requires the enumeration of costs and benefits to be measured in the achievement of an outcome, the determination of how you will measure them and producing the analysis of the comparative resulting ratio of cost to benefits to indicate the productivity of an effort. This is a simple description of a complicated process that can be an important aid in making decisions. However, Connecticut has access to an econometric model that may help. It is called the Pew-MacArthur Results First Model and it is managed by the Institute for Municipal and Regional Policy in cooperation with Pew-MacArthur Results First Initiative. In simple terms, this model requires certain information to be gathered about a program so it can be input into the model to produce a benefit-cost analysis.