

## Virginia Serious and Violent Offender Re-entry Initiative (VASAVOR Initiative): “Going Home to Stay”

### *Abstract*

National statistics are supported by Virginia data indicating that there are a large number of serious and violent offenders who are completing their sentences and “Going Home” to live in our localities. Many of these offenders are poorly prepared to survive in modern society. Whether due to lack of education, lack of job skills, lack of self-control, lack of respect for societal norms, or due to a chronic medical/mental health condition that limits their ability to become productive citizens; these offenders are likely to fail when they leave prison and move into our communities and neighborhoods. When these offenders fail, they commit violent offenses; creating more victims. Our federal, state, and local leadership has the obligation to bring all available resources to bear in protecting our citizens and helping these serious and violent offenders so that they are “Going Home to Stay”.

There are many resources available at all levels that can help our communities and help these offenders by giving them the opportunity to become productive citizens. Unfortunately, these resources are frequently fragmented due to each agency working to support its own mission. The purpose of the VASAVOR Initiative is to coordinate these resources into a planned program to support successful offender re-entry into the community. While this coordination will reduce redundant services, there will be gaps found in the services available. The “Going Home” Grant will provide short-term

16February 20, 2003

resources to help fill the gaps while other resources can be accessed to provide permanent solutions.

The first thoughts on an inmate's mind when he enters incarceration are "when is he going home" and "what will he do when he gets there". The same things must be on the mind of those agencies that deal with him during his incarceration and re-entry. The VASAVOR Initiative provides for creation, at intake, of an individual Re-entry Plan for each offender based on risk and needs assessments. That Re-entry Plan (periodically reviewed and updated) will guide institutional treatment and provide the plan for services needed in the community for successful re-entry. Besides this single, consistent plan for treatment services, a Transition Team formed by the local service providers and the supervising Probation/Parole Officer will enhance coordination of services. The unique feature of the VASAVOR Initiative is that offenders will be transferred from state institutions back to the local jail shortly before release so that they can connect with the Transition Team and the Probation/Parole Officer, begin to receive some services while in the jail, learn what is expected on community supervision and "hit the ground running" on his re-entry when he is released. The VASAVOR Initiative will begin with one locality, serving about 150 offenders in the first year and expanding to additional communities during the grant period. This model provides a directed, planned, controlled transition through incarceration, community supervision, and aftercare to provide every possible resource to help the offender transform into a productive citizen and to help provide public safety by ensuring that there are no more victims.

26February 20, 2003

36February 20, 2003

## Virginia Serious and Violent Offender Re-entry Initiative (VASAVOR Initiative): "Going Home to Stay"

### *PROJECT WORKPLAN*

#### 1. **Problems To Be Addressed.**

The Virginia Department of Corrections housed 29,446 inmates on December 31, 2000. Over half of those inmates (15,918, 54.1%) were classified as violent offenders. Of the 9,022 inmates released in 2000, over one fourth (2,360, 26.1%) had committed violent offenses. Of the violent offenders released, over half (1,349, 57.2%) were under the age of 35, which greatly increases the risk of re-offending. The aforementioned figures are based on Virginia Department of Corrections Research and Forecast Section data collection. Criteria for violent offender status includes Capitol Murder, Homicide 1<sup>st</sup> degree, Homicide 2<sup>nd</sup> degree, Manslaughter, Abduction, Rape, Sexual Assault Robbery, Assault and Weapons charges.

When offenders enter Probation or Parole supervision under Virginia Department of Corrections, Community Corrections, their supervision risks and needs are assessed so that they can be assigned appropriate levels of supervision and a supervision plan can be developed to address the identified needs and risk factors. Data collected on offenders who entered Virginia Probation and Parole supervision in 1994 through 1996 indicated that offenders that scored higher risk were more likely to unsuccessfully complete supervision in spite of more intensive supervision. Other Virginia data indicates that when a sex offender or other violent offender re-offends 64% commit the same offense again.

In a recent small study of Virginia 18 to 21 year old parolees, 36% were found to be at high risk of re-offending; 60% were found to be at moderate risk; 84% exhibit problematic use of alcohol and/or other drugs. Almost a quarter have a documented history of being abused and/or neglected; 16% have a parent figure or sibling on probation or incarcerated in the past three years; 32% have either dropped out or been expelled from school; 36% have mostly delinquent peers.

Females make up about 6% of the Virginia prison population. Although the female population is rising, relatively few commit violent offenses. Therefore the population served by the VASAVOR Initiative should be overwhelmingly male, but this does not preclude services for female offenders who may be considered serious and violent offenders. Very few of the available services are gender specific and those that are usually have parallel programs for male and female offenders. The small numbers involved probably will not justify development of special programs for female offenders, but they will be matched and referred to available services as indicated by their Re-entry Plans just as male offenders.

Therefore, there are a large number of offenders that have already committed violent offenses that are being returned to our localities with significant risk of committing more violent offenses and returning to prison. Additionally there are those offenders under the purview of the juvenile and adult criminal justice systems who are at high risk to commit the violent offense that will move them into the above group. Each violent offense creates a victim that has been injured or killed. Each convicted violent offender

faces a long, expensive period of incarceration. We must strive to have no more victims, no more recidivism. The wisest use of criminal justice resources is to turn these offenders into productive citizens.

Virginia has an array of resources to address violent and serious offenders. Institutions and Probation/Parole supervision operate under the Department of Corrections (DOC). Both in the institutions and in the community, DOC provides, directly and through contracts, treatment services aimed at virtually any need. In each community there are various local service providers that can meet many offender needs. The problem is that each part of the process works independently to accomplish its own goals. The institutions provide primarily security and control, and then provide whatever treatment programs may be available wherever the inmate is assigned. Community Corrections tends to focus on providing supervision, ensuring that the offender follows his Probation/Parole conditions and invoking sanctions when he fails. There is no formal mechanism for coordination of local service providers and services may only be available if the offender knows how to find them himself. This disjointed system leaves the opportunity for gaps in services. The primary gaps have been identified as:

- Lack of best technology to aid supervision and promote public safety
- Lack of transitional housing, in particular, for serious and violent offenders
- Lack of adequate medical and/or mental health treatment and medication management

Fairfax City/County will be the initial site for implementation of the VASAVOR Initiative.

Fairfax City/County is a populous urban area that is essentially a suburb to Washington, D.C. Its population of 991,247 (2000 U.S. Census) is nearly one-seventh of the entire state

population. Fairfax median household income is 177% of the state average, which indicates the lack of unskilled jobs and the very high cost of housing that present barriers to the successful re-entry of offenders. The population is young, more Hispanic and Asian, less African American than the state average. The Virginia DOC Probation and Parole District 29, which supervises felons in Fairfax, has 2522 offenders under supervision. In 2000, 428 adult offenders were released from state prisons to Fairfax; 116 had been incarcerated for violent offenses; 69 of the violent were age 35 or under. Fairfax County was willing to address the gaps in supervision identified for this population by the Department. There is strong support for the initiative from the Community Corrections Justice Board. Fairfax initially applied for the grant when it was originally advertised and has an infrastructure in place which would support Department goals.

1. **PROJECT WORKPLAN/Goals and Objectives.**

The VASAVOR Initiative will support the Goals and Objectives as expressed in Appendix I to the Going Home: Serious and Violent Offender Reentry Initiative Solicitation.

Goal 1: Prevent reoffending through assessment and planning during the Institutional Phase.

.Objective 1: Begin the reentry planning process within the correctional setting and initiate contacts with key service providers, law enforcement, and community corrections agencies prior to discharge of the offender.

**•Proposed Action:** The Department of Corrections will identify serious and violent offenders as early as possible, ultimately at institutional intake; develop Re-entry Plans to guide institutional and community treatment; return to local jail 45 days before release to connect with local service providers and update Re-entry Plan. Local service providers to offer in-jail programs to prevent further victimization such as Restorative

Justice Programs offered by OAR of Fairfax and the Victim/Witness Unit of the local police department.

.Objective 2: Ensure the offender is fully engaged in the planning process and clearly understands expectations and consequences.

**•Proposed Action:** The Re-entry Plan will be developed with offender input and reviewed with him at least annually as the measure of his treatment progress and guide to future treatment. While back in the local jail, the offender will meet his Case Manager and Probation/Parole Officer and have explained to him the expectations while on supervision and the consequences of failing to meet those expectations. The offender's Plan of Supervision which includes the critical components of the Reentry Plan, will be reviewed with the offender.

.Objective 3: Identify needs and provide local, state and federal support and services designed to promote successful reentry.

**•Proposed Action:** The Re-entry Plan for each offender will be based on a battery of assessments and will ensure connection with the proper providers for the services needed.

.Objective 4: Exercise active supervision of the offender, ensuring accountability and/or appropriate graduated sanctions for non-compliance or criminal behavior.

**•Proposed Action:** Before release, each offender will be assigned the appropriate level of supervision including residential program, day reporting center, sex offender program, intensive supervision, and/or electronic monitoring. Probation/Parole Officers have the authority to ensure offender accountability and to impose a wide range of graduated sanctions as needed.

Goal 2: Enhance public safety prior to and during the Transition Phase.

•Objective 1: Work with local law enforcement to ensure joint supervision and accountability.

**•Proposed Action:** Each Probation and Parole District Office will have a method of communicating and coordinating with local law enforcement concerning VASOVAR offenders that are under supervision.

•Objective 2: Provide active ongoing management and supervision designed to hold the offender accountable and protect the public interest.

**•Proposed Action:** While he is under the formal supervision of the Probation/Parole Officer, the offender treatment is managed by the Reentry Panel and Transition Team who will collaborate on appropriate referrals/resources and coordinate treatment services.

•Objective 3: Utilize technology (electronic monitoring, etc.) to ensure that the offender's location is appropriate and does not pose an undue threat to the community or the victim.



•**Proposed Action:** One of the identified gaps is the lack of GPS monitoring resources to help manage and provide surveillance of offenders.

•Objective 4: Exercise zero tolerance for new criminal activity.

•**Proposed Action:** The Virginia DOC procedure and practice is to apply appropriate and documented sanctions for all supervision failures whether it is a technical violation or a new law violation.

•Objective 5: Develop and implement individual reintegration plans with appropriate levels of supervision.

•**Proposed Action:** Each offender will have an individual Re-entry Plan developed and implemented as early in his incarceration as possible. While in the local jail awaiting release to the community, the Probation and Parole District Office will conduct a risk assessment to determine the appropriate level of supervision and develop a Supervision Plan. Periodic reassessments and adjustments in level of supervision will occur based on the offender's progress.

Goal 3: Re-deploy and leverage existing community resources by fostering linkages and accessing currently provided services (e.g., community-based corrections agencies, social services providers, local police departments, faith-based organizations, educational services providers, businesses, civic organizations, family/parent organizations; domestic violence, sexual assault, and other victim advocates).

•Objective 1: Use federal funds only to design, build, test, and improve a system that utilizes ongoing resources so reentry programs do not depend on temporary federal funding.

•**Proposed Action:** Meet with state and local service providers in each participating locality to assess and coordinate existing services and resources and develop cooperative agreements where none exist to work with VASAVOR offenders.

•Objective 2: Use federal funds only to enhance existing state or local resources and provide options not otherwise available or sufficient.

•**Proposed Action:** The Department of Corrections acting as Grantee, will reinforce through face to face meetings and correspondence, the need for each partner to attempt to ensure services begun with grant funds will be sustained when the grant has ended.

•Objective 3: Increase communities' leveraging and allocation of resources to provide for the sustainability of the reentry initiative.

•**Proposed Action:** The Department of Corrections will meet with partners and local decision makers to reinforce the fact that all collaborative efforts are aimed at reducing recidivism of, and victimization by, offenders from their localities. When Federal funds are no longer available, the offenders will still be returning to their area and what is implemented now, will hopefully prove to be beneficial to the offender and community, thus making worthwhile continued state and local participation in

continuing the initiative.

- Objective 4: Enhance partnerships among government agencies and community organizations.

- Proposed Action:** Meet with local decision makers and service providers to identify who can provide services to fill gaps in transitional services. At the offender level, the Transition Teams will be formed as multidisciplinary partnerships to coordinate service delivery.

- Objective 5: Enhance the availability and quality of reentry services.

- Proposed Action:** Through coordination and communication between the Reentry Panel and Transition Team, overlapping, redundant and needed services will be easily identified and addressed.

Goal 4: Assist the offender to avoid crime, engage in prosocial community activities and meet family responsibilities prior to and during the Stabilization Phase.

.Objective 1: Promote productive engagement between the offender and community organizations (e.g., law enforcement, community groups, schools, substance abuse and mental health treatment providers, training centers, employers, victim advocates, civic and faith-based organizations).

- Proposed Action:** The Transition Team will serve as the conduit to connect the offender to all appropriate local resources/services and broaden the base of alternatives through proactive community involvement.

.Objective 2: Provide for and expect the offender to be a contributing productive citizen.

- Proposed Action** Through evaluation, assessment and surveillance determine if the offender is complying with goals and objectives of his/her Supervision Plan and remaining free from new law violations.

.Objective 3: Increase involvement between members of offenders support networks and returning offenders.

- Proposed Action:** Programs will be offered by the local service providers to help each offender develop his support network which will include faith based agencies and peer support groups.

Goal 5: Ensure program sustainability.

- Objective 1: Ensure current community and government resources are utilized and will remain accessible once federal funds are unavailable.

- Proposed Action:** All partnerships will be developed with knowledge that any and all cooperative agreements must be sustained when Federal funds are no longer available. This will be communicated in meetings between state and local decision makers and service providers.

- Objective 2: Ensure that broad government and community support exists and that these relationships are

enhanced and built.

•**Proposed Action:** Fairfax has already built a strong coalition among government and community bodies including endorsement of the VASAVOR Initiative by the Fairfax Community Corrections Board which includes agency heads from all criminal justice system agencies, mental health/substance abuse agency, schools, local government, and other agencies. Similar coalitions will be developed in other localities as they implement the VASAVOR Initiative.

•Objective 3: Ensure that this initiative is viewed as integral to community and public safety.

•**Proposed Action:** Efforts will be made to ensure that the system of early identification, assessment and services needs is built into Virginia Department of Corrections protocol for all offenders. Partnerships developed at the local level will be duplicated in each locality and enhanced by formal agreements to coordinate and leverage available services for offenders who are “Going Home”.

#### 1. **Identifying the Target Population.**

Although the sort of planned, organized re-entry effort proposed for the VASAVOR Initiative should work equally well for any offender returning from incarceration, the primary target population to be served are those offenders who have current or prior convictions of violent offenses, and have been adjudicated as adult in the Circuit Court, particularly those that are under age 35 at release. The Department defines violent offenders to be those convicted of Capitol Murder, Homicide 1<sup>st</sup> and 2<sup>nd</sup> degree, Manslaughter, Abduction, Rape/Sexual Assault, Robbery, Assault and Weapons charges. Participation in the VASAVOR Initiative for those offenders from the identified participating localities will be mandatory. Those inmates who refuse to participate in this program can be removed and administratively placed in Class IV, according to the Code of Virginia 53.1-32.1 for refusal to participate in a treatment program. Interviewing to assess, treat and surveil these offenders will provide no additional risks to the

communities they are going to, as they either were sentenced from the same communities or have a valid home plan there.

With the support of the “Going Home” grant, the Virginia DOC is planning to implement the VASAVOR Initiative in one locality to begin with and then spread to additional localities during the grant period. The initial locality was chosen for the unique challenges for re-entering offenders and the strong support of local service providers. Additional localities will be chosen with the same criteria leading to the ultimate goal of implementing the VASAVOR Initiative statewide for all re-entering offenders. Discussions concerning participation in the Initiative have been held with at least four additional localities, but the decision has been made to begin with Fairfax City/County and include additional localities as we gain experience with the model.

Fairfax City/County is a populous urban area that is essentially a suburb to Washington, D.C. Its population of 991,247 (2000 U.S. Census) is nearly one-seventh of the entire state population. Fairfax median household income is 177% of the state average, which indicates the lack of unskilled jobs and the very high cost of housing that present barriers to the successful re-entry of offenders. The population is young, more Hispanic and Asian, less African American than the state average. The Virginia DOC Probation and Parole District 29, which supervises felons in Fairfax, has 2522 offenders under supervision. In 2000, 428 adult offenders were released from state prisons to Fairfax; 116 had been incarcerated for violent offenses; 69 of the violent were age 35 or under. Fairfax County was willing to address the gaps in supervision identified by the Department for

this population. There is strong support for the initiative from the Community Corrections Justice Board. Fairfax initially applied for the grant when it was originally advertised and has an infrastructure in place which would support the Department's goals.

Services available to non-participating offenders includes substance abuse treatment, both outpatient and residential, sex offender services to include assessment, treatment and polygraph, electronic monitoring, limited community residential program services, dual diagnosis treatment and drug testing.

The population to be served in Fairfax could be approximately 116 offenders annually. When the initiative is developed in Richmond the overall population could increase by 200 annually. The third potential site Charlottesville and Albemarle County could add an additional 40 offenders annually for a potential total of 356 offenders.

Depending upon an offender's sentence of incarceration, his initial identification for the VASAVOR Initiative could be between 24 and 12 months.

Once transferred to a local jail or detention center, his stay there will be approximately 45 days. An offender's length of stay on supervision once released from confinement varies based on the direction of the Courts or Virginia Parole Board.

4. **Organizational Capacity.**

The Virginia DOC will be designated as the lead agency in the VASAVOR Initiative as it controls correctional institutions and Probation/Parole services. DOC has always worked closely with the Virginia Parole Board, which although it is an independent

agency shares the headquarters building with DOC. Although Virginia abolished parole in 1995, the Parole Board has jurisdiction over offenders who committed their offense before that date and the Parole Board sets supervision conditions and has revocation authority for those non-parole eligible offenders that have post release supervision obligations. The Circuit Courts have revocation authority over those offenders that are serving probation obligations (pre or post incarceration).

The DOC has the following treatment services available through contracts with private vendors: residential substance abuse treatment, outpatient substance abuse treatment, community residential services, sex offender assessment, sex offender treatment, sex offender polygraph, electronic monitoring, and drug/alcohol testing. The Fairfax area is one of nine pilot sites for the Virginia Sex Offender Containment Model. Pilot sites receive extra state funds to manage sex offenders; grant funding may be needed to help implement this model in additional areas as the VASAVOR Initiative expands.

Virginia provides Probation, Parole and Post Release services to approximately 45,000 offenders. Approximately 25% of these offenders are classified as violent. Currently, approximately 53% of inmates confined in Virginia's prison system are violent offenders. These offenders are provided various levels of secure confinement and community supervision based on their risk and needs.

The Virginia Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS) is the state agency providing mental health and substance abuse treatment services. The DOC has had a long-standing relationship with

DMHMRSAS through their local Community Service Boards to provide mental health and substance abuse treatment services to offenders through the state Probation and Parole District Offices. This situation is typical of the relationship between Virginia state agencies providing services to offenders in that each of the Probation and Parole District Offices works with the local representatives of the appropriate agencies rather than there being a formal statewide agreement to provide services. While this model has been adequate in the past, the VASAVOR Initiative could provide the impetus for more formal central agreements to ensure consistent access to uniform services.

The Department is currently involved as a lead agency working with the Division of Motor Vehicles and private non-profit offender support groups to develop and obtain identification documents for offenders prior to and upon release from incarceration which will enable them to obtain DMV identification. This has been a significant issue for offenders since September 11, 2001.

The Department also plays a lead role in Drug Screening Assessment and Treatment (DSAT) a legislatively mandated program which involves coordination of state and local agencies to provide a seamless continuum of substance abuse treatment services recognized by state and local agencies for those offenders under supervision of Department personnel.

Fairfax was selected as the initial site for the VASAVOR Initiative, in part, due to the impressive array of local service providers that are available. The lead coordinating local agency will be the Opportunities, Alternatives & Resources of Fairfax County (OAR),

a community-based organization with extensive support from an array of faith-based service partners and established volunteer programs in the local jail and community.

Opportunities, Alternatives and Resources (OAR) Inc. of Fairfax County, is a local non-profit restorative justice organization providing human resources to offenders in Fairfax since 1971. They develop, promote and operate community based programs that provide opportunities, alternatives and resources to restore criminal offenders to productive roles in the community, offer options to prosecution, and support families. The Department has worked closely with OAR for years. This organization is a critical partner in the criminal justice infrastructure in Fairfax. The Director of OAR and case manager designated to support the initiative will coordinate treatment service delivery between all partners. The Chief Probation and Parole Officer in District #29 will coordinate offender supervision with OAR and other partners.

In Fairfax, the following individuals have expressed support for the VASAVOR Initiative and are expected to sign an Memorandum of Agreement lending the support and defining the roles of their respective organizations: Katherine K. Hanley, Chairman, Fairfax County Board of Supervisors; The Honorable Michael P. McWeeney, Chief Judge, Fairfax County Circuit Court; The Honorable Stan G. Barry, Sheriff, Chairman of Community Criminal Justice Board of the Fairfax Area; Lesley A. Bubenhofer, Chief Probation & Parole Officer, District #29; Colonel J. Thomas Manger, Chief of Police, Fairfax County; Colonel Richard J. Rappoport, Chief of Police, City of Fairfax; David Hunn, Director, Workforce Investment Board; James A. Thur, Executive Director, Fairfax-Falls



Church Community Services Board; Daniel A. Domenech, Ph.D., Superintendent of Schools, Fairfax County; George Stepp, Superintendent of Schools, City of Fairfax; Catherine A. Belter, Local Education Representative; Sandy Chisolm, Faith Communities in Action; and Carla Taylor, Executive Director, OAR of Fairfax.

Additional Fairfax area service providers available through referrals although not expected to be part of the formal Memorandum of Agreement include: Fairfax County Department of Family Services, Job Corps, Northern Virginia Community College, Virginia Department for the Visually Handicapped, Virginia Department of Rehabilitative Services, Construction Training and Opportunities Program, United Community Ministries, Service Source, Northern Virginia Family Service's Training Futures Program, New Hope Housing, Brain Injury Services, Inc., Fairfax County Department of Housing and Community Development, Fairfax County Health Department, Northern Virginia AIDS Ministry, Affordable HealthCare Network Clinics, Medicaid, Medical Care for Children's Partnership, and FAMIS.

All partners in this initiative have been and are currently being advised of the need for Virginia to sustain any service or supervision that is developed with grant funds at the conclusion of the three year grant period.

The Department of Corrections' will plan to sustain residential services for this target population by leveraging direct appropriation funds and development of new Memorandum of Agreement and contracts with public and private service providers.

Technology for surveillance (GPS) will be used to enhance existing Department

funding used to cope with the increasing number of serious and violent offenders being released into communities throughout Virginia.

In light of current fiscal constraints for Virginia state and local governments, plans to sustain mental health services as set forth in the grant application will require ongoing study.

5. **Project Design and Management.**

**Making a Plan: Phase One—Protect and Prepare:** Institutionally Based Programs.

Through the VASAVOR Initiative, inmates will be identified progressively earlier as participants. As these inmates are identified, Re-entry Plans will be developed to guide the institutional Treatment Plans for the inmate to access all possible needed services while incarcerated. These services include but are not limited to medical and mental health needs, educational and vocational services, sex offender treatment, substance abuse treatment, basic living skills etc. The ultimate goal is for all inmates to be fully assessed at intake for development of individual Re-entry Plans that will guide institutional service delivery. The institutional Re-entry Plan will serve as the document to convey all available assessment and treatment information to allow the Transition Team to update and continue the Re-entry Plan through the remaining phases.

The Transition Team will be a local partnership led jointly by the offender's Probation/Parole Officer and the caseworker from the lead service providing agency (OAR in Fairfax) and including representatives from the other principal local government,

non-profit, private, and faith-based service providers. While the Probation/Parole Officer will have exclusive authority for offender supervision, the Transition Team will determine, coordinate, and access the services appropriate to guide and facilitate his re-entry into the community based on his Re-entry Plan and previous treatment history.

### **Preparing to Come Home: Phase One and a half-Make the Connection: Local Jail Based Programs.**

About 45 days before his expected release date, the institutional inmate will be moved to the local jail. This will allow him to connect with his Probation/Parole Officer and the rest of the local Transition Team for revision of his Re-entry Plan and scheduling of transition programs and resources. The inmate should participate full-time in prerelease and transitional programming offered in the jail. In Fairfax, this programming includes life skills training, employability training, vocational training, education, mentoring, support classes for offender families, faith based programs, restorative justice (stop victimization) program, and a plethora of other classes and services provided by over 125 volunteers in addition to the community service providers.

This additional Phase eliminates the lost time and allows better planning for risk assessment and access to community-based services rather than the traditional method of releasing the offender to the community and then figuring out what to do with him.

This step also ties in with the Virginia DOC Reentry Transition Program which began, on a pilot basis, in April 2002 to return inmates to their local jail before release to

participate in 45 days of prerelease programming and, if eligible, to participate in 45 days of work release. It is not expected that serious and violent offenders would be eligible for the work release phase of the Reentry Transition Program.

**Coming Home:** Phase Two–Control and Restore: Community-Based Transition Programs.

Virginia has the advantage of having both the incarceration authority and community supervision authority residing within the Department of Corrections so that there is the ability and goal of smoothly transitioning the offender to re-enter the community. The Probation and Parole Officers under guidance of the Parole Board and Circuit Courts have the authority to set and enforce Conditions of Supervision including the authority to instruct the offender to participate in appropriate treatment. In response to any failure by the offender to comply with his conditions or instructions, the Probation/Parole Officer has access to a range of progressive sanctions including arrest authority to jail the offender pending final resolution of the case by the Parole Board or Circuit Court.

The Transition Team will coordinate access to community-based services to meet the needs identified in the Re-entry Plan. The Probation/Parole Officer and the rest of the Transition Team monitor the offender's progress and move him through programs and supervision levels as appropriate. The Transition Team will guide the offender toward self-reliance and building of his own support system to prepare him for Phase 3 of re-entry.

Phase 2 of the VASAVOR Initiative is where the major service gaps have been identified that require temporary use of federal funds. The electronic monitoring system currently available to Probation/Parole Officers provides only curfew monitoring. Upgrading to GPS monitoring will provide offender location information at all times to enhance control of offender movement, activity, and location in the community. This information can be tied into local law enforcement crime maps to eliminate suspects or identify suspects or witnesses. The GPS system also provides warnings and alerts if the offender approaches an "off limits" area such as prior or potential victims or a known drug dealing area. Once this technology is in place and proven in Virginia, current electronic monitoring funds can be applied to this technology and additional funds can be sought through the state budget.

Transitional housing for serious and violent offenders is very limited or totally lacking in almost all areas of Virginia. In Fairfax, there is a system of shelters available for short-term temporary housing, but transitional housing is needed while the offender saves money and achieves an independence level that will allow him to enter conventional housing. Grant funding will be needed to support transitional housing. One of the local non-profit shelter providers has expressed interest and intent to obtain federal Housing and Urban Development Continuum of Care Process and/or Community Development Block Grant funding to provide transition housing that would be available to serious and violent offenders.

Access to medical and mental health care and medication management is a major

problem for many offenders returning to the community. While in prison, many have been diagnosed and treated for chronic conditions for which they were not receiving treatment before incarceration. The offender needs assistance to access these services until he is working to have funds or insurance, or if not employable, to access SSI, Medicare or other benefits. There are some free clinics for medical care and the state mental health agency will work with the seriously mentally ill, but most offenders fall into a gap that needs to be filled. For purposes of this initiative a memorandum of agreement will be developed with the Community Service Board to provide mental health assessments and services to include monitoring and distribution of medications. Reentry Plan Data will provide mental health professionals a history of the offenders mental health screening, assessments and needs. The Probation and Parole District Offices have limited funds for offender emergencies, but community and other resources must be accessed for a long-term solution.

The other gaps that would require temporary funding are as diverse as the communities themselves. Additional needs expected in Fairfax are for casework staff for OAR to facilitate services and to help the Workforce Investment Board provide job training. OAR plans to redistribute existing staff and obtain additional funding from existing sources to replace the federal funds. The Workforce Investment Board is currently experiencing severe budget cuts. Either increased services provided will justify future budget increases or local resources will need to be found to support job training.

**Staying Home:** Phase Three—Responsibility and Productivity: Community-Based Long-Term Support.

The offender is expected to have achieved self-sufficiency, responsibility, and productivity with his own support system, including family, mentors, and peer support groups. Although there is no continued authority over the offender, the Transition Team remains available on an as needed basis to provide guidance toward available community resources. Peer support groups will be encouraged and supported by providing time and space for meetings and staff to facilitate such meetings. By Phase III offenders will have been made aware of available community support services including those provided by faith based organizations.

**Months 1-9, Initiate Phases 1, 1.5, and 2.**

Once preliminary notice is received that the VASAVOR Initiative will be awarded grant funding, a Memorandum of Agreement will be executed between the Virginia DOC and the local partners in Fairfax.

The inmate database will be used identify inmates according to the following criteria:

- Within 8 months of expected release date
  - Convicted in the courts of the VASAVOR locality
  - Current or prior conviction of a violent offense or identified high risk due to high security level
  - Has a proposed release plan or permanent address in the VASAVOR locality
- Institutional counselors will develop a Re-entry Plan for each identified inmate.

This Re-entry Plan will include any available assessment information, medical and mental health information, and information on any programs completed by the inmate. Also included should be subjective information such as overall institutional adjustment and

perception of the inmate's commitment to succeed at re-entry. These inmates will then be given priority to enter available prerelease programs such as Productive Citizenship.

On the local level, work would begin on setting up the Transition Team. As the Re-entry Plans become available from the institutions, the Transition Team would review the plans and prepare to begin the jail programs.

As inmates identified above come within 45 days of their release date, they are transferred to the local jail and the jail programs begin. During the stay in the local jail, the Transition Team will update the Re-entry Plan and schedule the inmate to begin community-based programming immediately on release from jail. The local partners would then be mobilized to begin service delivery. As their release dates arrive, the first offenders will begin to move into Phase 2 in the community.

#### **Months 9-12; Expand Phase 1, Identify additional localities**

Efforts will be made to evaluate and adapt existing assessment instruments and/or implement new assessment instruments. Using these assessment instruments combined with the offense history, inmate participants should be identified 12 months before expected release date.

Developing the Re-entry Plan will serve as the final annual institutional review for inmates selected to participate in the VASAVOR Initiative.

The Virginia DOC will work with additional localities to develop Memoranda of Agreement and prepare to incorporate them into the VASAVOR initiative and begin to



identify inmate participants from the additional localities.

#### **Months 13-24; Expand Phase 1, Initiate Phase 3, Begin operations in additional localities**

Institutions will attempt to identify inmates that will participate in the VASAVOR Initiative 24 months before their projected release date. The assessment information will be used to construct Re-entry Plans to replace Institutional Treatment Plans to guide inmate programming during the remainder of his incarceration.

Offenders will begin to move into Phase 3 having established their individual support systems through mentors, family reintegration, and peer support groups.

All VASAVOR Initiative participants (including offenders) should participate in a review of Phase 1, Phase 1.5, Phase 2, and Phase 3 systems looking for areas of potential improvement. These improvements should be implemented as rapidly as possible.

The Virginia DOC and local partners will use the lessons learned in Fairfax to begin Phase 1.5 and then Phase 2 in the additional localities.

Charlottesville and Albemarle County represents a more rural setting where the first expansion of the VASOVAR Initiative is expected to occur. There are residential, mental health and substance abuse treatment and employment services available there. The next locality to be included in the initiative would be Richmond. Richmond is an urban area with a large minority population and is the seat of state government. Project Exile, a Federally supported program was piloted in Richmond to reduce the use of violent crimes involving firearms by providing mandatory sentences of confinement for those

convicted of illegally possessing a firearm. In calendar year 2000, Richmond had the largest percentage of serious and violent offenders released in the state.

#### **Months 25-36; Expand Phase 1, Make self-sustaining**

Continue to review all phases for potential improvements and find ways to make the re-entry process work smoothly as a seamless system. This review should include some cross-pollination between participating localities to facilitate idea sharing.

At the beginning of this period, do assessment on all inmates from project areas and incorporate the assessment and findings into a Re-entry Plan to replace the Institutional Treatment Plan. By the end of this period, have a plan to assess all inmates and incorporate assessment into intake process. These assessments would be used to develop Re-entry Plans for each inmate as early as possible and ultimately at intake. These Re-entry Plans would replace the current Institutional Treatment Plan as the document guiding inmate program participation.

Leverage federal, state, or local funds to support the functions that have been supported by grant funds.

Begin Phase 3 in the additional localities.

Using the lessons learned, develop a plan to spread the VASAVOR Initiative to additional areas and ultimately statewide.

The Virginia DOC must maintain authority and responsibility for the custody and supervision of each offender as long as they are under legal obligation even though the

offenders will reside for a time in the local jail. Virginia DOC institutional and community program staff will coordinate Phase 1 and the transfer to Phase 1.5 in the local jail. Once the offender reaches the local jail, the District Probation and Parole Office and the local partners will convene a Transition Team to guide the treatment aspects of offender re-entry. Although the service providers and the local police will help monitor offender activities, supervision and imposition of sanctions for violation of Conditions of Supervision must remain the sole responsibility of the District Probation and Parole Office. The hope is that each offender will successfully re-enter society, but the sad truth is that many will fail and they must be detected, apprehended, and returned to incarceration as rapidly as possible to minimize victims and protect public safety.

A primary purpose of the VASAVOR Initiative is to integrate and coordinate existing DOC and community resources to focus on management of offenders based on an assessment driven Re-entry Plan that is developed as early as possible in the incarceration period and is updated throughout the institutional incarceration period, the community supervision period and into aftercare when the offender has completed his legal obligations. The purpose of this integration and coordination is to move the offender smoothly, seamlessly, and purposefully through incarceration and supervision with the goal of successful re-entry. Through an extensive locally developed employment network, each offender should become a tax-paying contributor to society instead of a consumer of expensive incarceration and treatment services.

Although the offender involvement in the VASAVOR Initiative begins with the

institutional counselor that conducts the assessments and develops the original Re-entry Plan Data Form, each Transition Team must be led by local representatives of service providing and public service agencies including the Probation and Parole District Office. This local leadership must design the model for the re-entry program in each locality, as they best know the services that are available locally and how to access these services.

As re-entry begins at institutional intake, the Transition Team will include virtually everyone who has contact with the offender in conducting an assessment, preparing/revising his re-entry plan, or providing any type of treatment services. For purposes of this grant proposal, the Transition Team will refer primarily to the community based decision makers that interact with the offender in Phase 1.5 and Phase 2. The Probation and Parole District Office as the supervision agent and the primary local service provider (in Fairfax, this will be OAR) shall lead this local Transition Team. As many localities in the state do not have local OAR chapters, the primary local service provider must be individually determined as the VASAVOR Initiative moves to additional localities.

The success of the VASAVOR Initiative is dependent on a valid diagnostic and risk assessment process. This process will determine the supervision level and the treatment services to be provided to each offender. In this time of limited resources, each offender must be matched only with the services that will do the greatest good, but due to the risk associated with this offender population, each offender must be matched with all services that have the greatest chance of preventing new offenses and new victims.

Inmates currently undergo an extensive diagnostic and risk assessment process. By the time an inmate completes institutional intake he has received the following diagnostic and assessment tests:

- .Addiction Severity Index
- .Custody level scoring
- .Test of Adult Basic Education
- .Vocational Assessment
- .Medical examination
- .Mental Health Evaluation

When he is released from institutions to Probation and Parole supervision, he is given a Risk/Needs Assessment that is based on the Wisconsin Model and validated to the Virginia offender population by a recent university study. This Risk/Needs Assessment includes periodic reassessments.

The first step of the VASAVOR Initiative will be to ensure that information determined in the diagnostic and risk assessment process moves with or even ahead of the offender as he progresses through and beyond his legal obligations. The principle method of information sharing will be through the Re-entry Plan which will ideally be developed in cooperation with the offender at institutional intake and repeatedly reviewed with him and revised as he progresses through incarceration, re-entry, and community supervision. This Re-entry Plan will be the guide to manage all treatment and programmatic services to be provided to the offender at all levels and involve all applicable service providers.

The development of the Re-entry Plan as early as possible and then having that plan, as updated, guide the management of the offender's treatment ensures continuity of services in that the same assessment tools and the same re-entry goals are followed

consistently.

Coordinating the services and resources that are already available to meet the offender's needs ensures another sort of continuity of services. Beyond coordinating, enlightened and creative leadership can find ways to connect offenders with services that may not routinely be available to them. Utilizing community-based, faith-based, and family-based resources to mentor and provide services to offenders instead of using grant funds to establish new programs ensures that the VASAVOR Initiative can continue after grant funds are no longer available and make it easier to expand the Initiative to additional localities. As the VASAVOR Initiative becomes integrated into the existing systems, it will become the normal way of doing business, which is proactive planning and coordination of the offender's "Going Home". This initiative provides a mechanism to enhance coordination with community partners, to reduce redundant efforts, to maximize efficient use of available resources, and to temporarily fill gaps in services and resources while exploring permanent solutions.

The Virginia DOC has authority and responsibility for control and supervision of the felony offender from court sentencing through incarceration and/or any period of community supervision under probation, parole or post-release supervision. While in the community, the offender will be supervised according to the risk level he presents.

Options include:

- Restrictive, structured environment housing
- Day Reporting Centers
- Intensive team supervision with or without electronic monitoring

- Sex Offender Containment Model
- Regular supervision
- Relaxed supervision

While the offender is under community supervision, each Probation and Parole District works closely with local law enforcement and treatment providers to monitor and track the offender's behaviors. If needed, the Probation and Parole District Office has the authority to impose graduated sanctions ranging from verbal reprimand through increased supervision, mandatory drug testing, mandatory program participation, and electronic monitoring up to having the offender arrested pending revocation of his supervision privilege by the court and/or the Parole Board.

While the courts and/or the Parole Board set maximum terms of supervision, Probation and Parole Districts have the ability to request that an offender be released from supervision if he has complied with supervision requirements. There is also the authority to place the offender in a reduced level of supervision if the request is denied.

Each offender is subject to standard conditions of supervision based on his status of probation, parole, and/or post-release. In addition to these standard conditions, the court or Parole Board may impose special conditions. One of the standard conditions is that the offender must follow instructions given by his Probation/Parole Officer. Thus the Probation/Parole Officer has authority to impose special conditions and requirements to fit the individual offender and his current circumstances.

The Virginia DOC has existing staff resources in institutions and community to carry out the VASAVOR Initiative. This Initiative does not require additional DOC staff.

It only requires the coordination of existing efforts to take a broader “whole system” view of offender management.

In the short term, it is expected that the OAR of Fairfax County as the lead in coordinating local service providers may need additional case management staff to connect offenders with the local services and find additional, non traditional services that can be made available to meet offender needs. This need will decrease as the local service network develops and precedents are established to provide offender services. It is hoped that in Phase III ex-offenders who serve as mentors and peer support guides to offenders re-entering the community can eventually augment part of the case management and referral need. Other service providers would be expected to meet the needs with existing resources or resources that can be obtained from their usual support system.

There is currently data collected within Virginia DOC Community Corrections to track offender success under supervision. This capability will improve within the next year as the DOC implements a new Offender Management System database to merge and streamline the current institutional and community information systems. OAR also maintains a database of the offenders that it serves. DOC is currently working with Virginia Commonwealth University to develop a model evaluation system and data collection model that may be applied to any Community Corrections Program to measure outcome success.

The results of these and any Federal evaluations would be used to measure the success of the VASAVOR Initiative and provide directions for fine-tuning components to



increase the success. It is expected that if the Initiative is demonstrated to be successful, this model will be spread to other localities and become the statewide model of offender treatment management and the model of cooperation among state and local agencies.