2013 Program Report Card: Residential Services – Department of Correction

Quality of Life Result: All Connecticut working age residents will have jobs that provide self-sufficiency.

Contribution to the Result: Placement of these special populations in a controlled and safe environment allows the Department of Correction to orchestrate a wide range of community-based services. This includes arranging substance abuse services, mental health services, gender-responsive services for women, and housing.

Program Expenditures	State Funding	Federal Funding	Other Funding	Total Funding
Actual FY 12	\$29,674,525.00	\$0	\$0	\$29,674,525.00
Estimated FY 13	\$32,027,695.00	\$O	\$0	\$32,027,695.00

Partners: Connection, CT Renaissance, Neon, Perception, Department of Mental Health and Addiction Services, Department of Social Services, Department of Labor, Board of Pardons and Paroles, University of Hartford, University of Connecticut, local city and town governments, local colleges and universities, business community, other non-profit agencies, and other state agencies



Number of offenders admitted.



Story behind the baseline:

The number of offenders referred to residential programs increased by 355 from FY10 to FY12 (8%, relative). The current capacity is satisfactorily meeting the demand for slots.



Number of contracted beds utilized.



Story behind the baseline:

From FY11 – FY12 the occupancy rates decreased 15% (relative). We believe that there were at least three causes for this decline. The first was a policy change requiring that the offenders have to be parole approved prior to placement in halfway houses. The second was that Risk Reduction Earned Credit (RREC) led to a number of offenders who otherwise would have been candidates for halfway house placement to be released End of Sentence (EOS). The third cause was a delay in the implementation of the Casenote System, which slowed up the placement of individuals into halfway houses. We fully expect that these issues will be resolved.

Nonetheless, given the reduction in the prison population in recent years we will monitor the occupancy rates closely to determine if we have the appropriate number of halfway house beds. **Trend:** ▼

How Well Did We Do It?

Established programs – length of stay (days).



Story behind the baseline:

In FY11, DOC expanded the shorter version of Substance Abuse [SA (L)] programs to align the programs with offenders needing brief community stabilization (30-45 days) and referral other than longerterm treatment (120-180 days). For FY12, there is a decrease in the average length of stay for individuals in each program.

S.A. = Substance Abuse, M.H. = Mental Health, W. & C. = Women & Children, and S.H. = Supportive Housing.

Trend: ▼

Is Anyone Better Off?

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the Parole staff and non-profit organizations to provide residential and non-residential services to offenders.

Data Development Agenda:

We are not currently collecting data that helps explain some of the poor trends. The DOC Best Practices Unit will lend assistance to Parole to attempt to sort this out and develop a corrective action plan.

Story behind the baseline:

We began to collect this data in FY11. Successful completion is defined as completion of required programming while housed in a residential program. A determination had been made that there was a group of releasing offenders who needed shorter-term treatment. If this is the case and DOC placed the appropriate individuals into these programs, one would expect at least the same, if not better outcomes. Instead, in both the short-term substance abuse and the mental health programs, the percentage of successful completions declined. This is going to require a comprehensive evaluation.

*Supportive Housing is when an offender has housing, case management and typically a number of services in place when successfully completing a program. The fact that individuals in these housing units have multiple problems, explains their relatively low success rates.

Trend: N/A

Proposed Actions to Turn the Curve:

One important step that DOC has taken was to add new Addiction Services staff to assist