

The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA
APPROPRIATIONS SUBCOMMITTEE ON CRIMINAL AND
CIVIL JUSTICE
Senator Negrón, Chair
Senator Joyner, Vice Chair

MEETING DATE: Wednesday, October 7, 2015
TIME: 10:00 a.m.—12:00 noon
PLACE: *Mallory Horne Committee Room, 37 Senate Office Building*

MEMBERS: Senator Negrón, Chair; Senator Joyner, Vice Chair; Senators Bradley, Evers, Flores, Hutson, and Soto

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Workshop - Discussion and testimony only on the following (no vote to be taken): Department of Corrections' Re-Entry Programs.		
	1. Committee staff (overview of types of re-entry programs, locations, and number of participants).		Discussed
	2. Presentations by re-entry program providers:		Discussed
	a. Operation New Hope (established Jacksonville area re-entry program);		
	b. Ready4Work-Hillsborough (newer Hillsborough County re-entry program replicating Operation);		
	c. Horizon Communities in Prison (established program providing academic and vocational education and character development programs to inmates);		
	d. Jacksonville Re-entry Center (administered by Jacksonville Sheriff's Office to provide a single location for released prisoners reentering Duval County to connect with services and programs);		
	e. Second Chance Outreach Re-entry and Education Development, Inc. (program in Santa Rosa County that works with prisoners through transition and re-integration into the community); and		
	f. Department of Corrections Office of Re-entry.		
	3. Update from the Center for Criminology and Public Policy Research, Florida State University on the effectiveness of re-entry programs.		Discussed
	4. Committee member questions and answers and general discussion with re-entry program providers.		Discussed

COMMITTEE MEETING EXPANDED AGENDA

Appropriations Subcommittee on Criminal and Civil Justice
Wednesday, October 7, 2015, 10:00 a.m.—12:00 noon

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
	5.	Public comments.	

Other Related Meeting Documents

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date _____

Bill Number (if applicable) _____

Topic Horizon Program

Amendment Barcode (if applicable) _____

Name Johnny Branham

Job Title Marketing/Sales rep

Address _____
Street

Phone 813-900-3654

City _____

State _____

Zip _____

Email jayphib@yahoo.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Horizon

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date _____

Bill Number (if applicable) _____

Topic Horizon

Amendment Barcode (if applicable) _____

Name Mike Griffin

Job Title Pres

Address 405 El Camino Real
Street

Phone 407-282-6123

City Mesa Park

State CA

Zip 94025

Email Mike.Griffin@horizon.com

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing _____

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE

APPEARANCE RECORD

October 7, 2015

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting DateBill Number (if applicable)Topic Presentation on ReEntry ServicesAmendment Barcode (if applicable)Name Kevin GayJob Title CEO/FounderAddress 1830 North Main StreetPhone (904) 249-8900Street
JacksonvilleFlorida32206Email kgay@operationnewhope.comCityStateZipSpeaking: For Against InformationWaive Speaking: In Support Against
(The Chair will read this information into the record.)Representing Operation New HopeAppearing at request of Chair: Yes NoLobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

Duplicate

THE FLORIDA SENATE

APPEARANCE RECORD

October 7, 2015

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting DateBill Number (if applicable)Topic Presentation on ReEntry ServicesAmendment Barcode (if applicable)Name Robert BlountJob Title PresidentAddress 2921 North 29th StreetPhone (813) 247-3285Street
TampaFlorida33605Email Robert.Blount@abebrown.orgCityStateZipSpeaking: For Against InformationWaive Speaking: In Support Against
(The Chair will read this information into the record.)Representing Abe Brown Ministries, Inc.Appearing at request of Chair: Yes NoLobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date

Bill Number (if applicable)

Topic Re-entry

Amendment Barcode (if applicable)

Name Katherine BURRS

Job Title Re-entry Coordinator

Address 1024 Superior St.

Phone 904-301-2406

Street

Jacksonville
City

FL
State

32254
Zip

Email katherineburrs@jaxsheriff.org

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Jacksonville sheriff's office

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10-7-15
Meeting Date

Bill Number (if applicable)

Topic Re-entry

Amendment Barcode (if applicable)

Name ALTON JOHNSON

Job Title CEO

W PA - 850-623-4507

Address 6779-A Caroline Street

Phone 850-686-4409

Street

Milton
City

FL
State

32570
Zip

Email

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Spread Chance Outreach Re-entry and Education Development

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10/7/2015
Meeting Date

Bill Number (if applicable)

Topic Connections

Amendment Barcode (if applicable)

Name Bill Boles

Job Title Professor

Address Copeland St

Phone 644-7113

Tallahassee FL 32306-1127
City State Zip

Email wboles@fsu.edu

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing FSU College of Criminology and Criminal Justice

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

[READY 4 WORK]

REENTRY. RETRAIN. REINTEGRATE.

REDUCING RECIDIVISM IN AMERICA BRINGING PRISONER RE-ENTRY AND EMPLOYMENT PROGRAMS TO SCALE

EXECUTIVE SUMMARY:

The past decade has witnessed a remarkable transformation in the debate over public policies relating to crime, incarceration and the re-entry of formerly incarcerated individuals into American society. In 1973, U.S. jails and prisons held 200,000 prisoners. Beginning in the late-1970s, incarceration rates began to skyrocket as federal and state governments implemented tougher criminal sanctions, especially for drug-related offenses, and sentencing requirements. By 2012, the prison, jail and juvenile detention systems of the U.S. held more than 2.2 million inmates, amounting to 1 out of every 32 Americans. While the U.S. accounts for less than 5% of the world's population, it accounts for 25% of the world's incarcerated population with a price tag of close to \$100 Billion per year. To make matters worse, this hefty price tag comes with a 70% failure rate.

THE COSTS TO SOCIETY FOR FAILING TO SUPPORT THIS POPULATION IS ENORMOUS. CONSIDER THE COSTS OF:

- Re-incarceration at \$79 per day
- Court time and costs for new proceedings
- Income and social security taxes not being generated
- Social services costs like SNAP, disability, unemployment compensation
- Child support not being generated
- Families not having an opportunity to reunite
- Additional contribution to GDP from lack spending

**OPERATION
NEW HOPE**

**PARTNER
WITH
US NOW:**



/renewhope



®Ready4Work (™R4W™), an initiative of Operation New Hope, Inc., (ONH™), is a proven, replicated model for facilitating the return of nonviolent ex-offenders back into the community, providing employment in the private sector and reducing recidivism significantly below state and federal re-incarceration rates. With over twelve years of learning and refinement, the ®R4W program is now ready to be introduced to other communities, cities, states and countries.

What sets ®R4W apart from other re-entry programs is its employment-centric design combined with a unique “underwriting approach” to provide a broad array of social services that a Client may need. By underwriting each client to determine their individual challenges we can develop a tailored Plan of Care to increase their chances of becoming employed and avoiding recidivism. Each Client is assigned to one of four tracks based upon an assessment of their skill sets and life experiences, including employment history and behavioral background. The tracks indicate the amount of support, resources, and time a Client may need to achieve success.

This process, along with an integrated treatment approach providing as much care as possible in site, creates the perfect environment for successful re-entry.

There is one other important element to ®R4W's success: our team. This is our “special sauce”. Our team has personal experience, not only with the socio-economic

demographics of our Clients, but most also have personal experience with ex-offenders because they, or family members, are ex-offenders. They have credibility with the Clients because they have “walked the walk”. Visitors from around the country always comment on the incredible company culture that is evident in the ®R4W operation in Jacksonville. This culture has been critical in our ability to recruit and retain Clients throughout the program.

We know ®R4W works because it has been proven in Jacksonville and in Tampa where it was replicated in 2014 with a social services agency (Abe Brown Ministries, Inc.). ONH's ®R4W Clients had a recidivism rate of only 35% recidivism rate over a 3 year vs. a national average of 67.8%.

We also know the data from every site will be homogenous because of the rigor given to insuring the program is implemented precisely as designed. To make sure of the fidelity to the process, ONH has the capabilities to view a replication site's ETO data, allowing remote process audits in addition to on-site process audits.

The Hillsborough County Commission (Tampa) endorsed the program, providing funding for the replication in Tampa and the ongoing funding needed for ®R4W in Tampa.

The Florida Governor's Office has embraced ®R4W, including the program in the budget.

The ®R4W program includes:

- **Rigorous Candidate Underwriting**
- **Comprehensive Case Management**
- **Extensive Work and Life Skills Training**
- **A Data-Driven Approach**
- **Electronic Audit Capability**
- **Business Partnerships**
- **Post-Employment Support**

The Florida Department of Corrections has partnered with Operation New Hope to offer ®R4W before Candidates are released. Not only are they seeing improved results in the recidivism rates, but they are seeing cost savings from on-line access to case files.

The U.S. Attorney's Office for the Middle District and Northern District of Florida have also expressed interest in piloting ®R4W in their districts.

®R4W is ready to go to scale. ONH has process maps, position-specific operating manuals, position-specific ETO manuals, departmental and position specific performance metrics with data-based reporting. ONH also provides start-up staff with up to a week of peer-to-peer training in Jacksonville, on-site training as needed at their offices, and on-going peer to peer telephone support.

A systematic application and review process is in place to qualify potential replication partners, detailing in advance what to expect in terms of process, timeline and costs. ONH will only partner with organizations it believes can successfully replicate ®R4W on a sustainable basis.

Now more than ever, Federal, State and Local officials recognize the need to proactively address the re-entry challenge. With this in mind, ONH is hosting a national re-entry summit in the fourth quarter of 2015 underwritten by The Ford Foundation. The goal of the summit is to highlight successful approaches and to share best practices with an ever-widening audience dealing with the same issues in their communities.

There are currently serious expressions of interest to replicate ®R4W from two other major Florida cities, other states and other cities, even from a European NGO.

The time is right to take ®R4W to scale.

PROPOSAL:

ONH is seeking a partner to underwrite the replication costs for new sites approved by ONH. This will allow ONH to maintain a vendor/client relationship with the replicating organization and to focus on the launch and implementation of the program.

A novel opportunity for the underwriter and ONH may exist in structuring a bonus from the host government(s), or from the federal government in the event of a federally supported pilot project, based on the savings to that government from the success of the ®R4W program. Target metrics could be based upon recidivism rates, employment rates, etc. The savings to the government entity could be quantified through publically available data.

It would be important to ensure the savings are included from that entire government, not simply one agency, e.g., Corrections or Labor.

CASE STATEMENT FOR REPLICATING THE [®]READY4WORK PROGRAM NATIONALLY

THE PROBLEM:

The past decade has witnessed a remarkable transformation in the debate over public policies relating to crime, incarceration and the re-entry of formerly incarcerated individuals into American society. There is now a realization that major rethinking is required.

As David Keene, a former NRA President recently said, *"the problem that we face consists of putting too many people in prison, treating them badly when they are in prison and then not doing much to prepare them for their release and their going back into a civil society when they leave prison. Those are big, big problems that have a lot of complications."* (Keene, 2015)

VOLUME: In 1973, U.S. jails and prisons held 200,000 prisoners. (Badger, 2014) Beginning in the late-1970s, incarceration rates began to skyrocket as federal and state governments implemented tougher criminal sanctions, especially for drug-related offenses, and sentencing requirements.

In October 2013, the incarceration rate of the United States of America was the highest in the world, at 716 per 100,000 of the national population. (Walmsley, 2013) While the United States represents about 5 percent of the world's population, it houses around 25 percent of the world's prisoners. (Holland, 2013) In 2012, 2.2 million people were incarcerated in jails or prisons, according to the DOJ's Office of Justice Statistics. (Office of Justice Programs, 2014) About 10 percent of those (216,900) were federal prisoners; a little over half (1,267,000) were state prisoners; and the rest (744,500) were in local jails. (Holland, 2013)

As of 2014 the high incarceration rates have started to modestly decline, although they still remain the highest in the world. (Cowling, 2014)

COST: The total budgeted costs by federal and state governments' approaches, or exceeds, \$50 billion. When the cost of new prison construction is included, estimated at more than \$5 billion the totals are even higher (multiple, 2013) .

The federal prison system's enacted budget for fiscal year 2014 was \$6.9 billion, which represents one-quarter of the budget of the Department of Justice. (Office of Justice Programs, 2014) The average cost of incarcerating a federal prisoner in 2012 was \$29,027.46, or \$79.31 per day. (States, 2009)

A 2012 study found the true cost of prisons in 40 states, including things like hospital services and retirement benefits for staff ran to \$39 billion a year. (Delaney, 2012) The annual costs per prisoner, excluding lost productivity, taxes and family support comes out to an average cost of \$31,286 per inmate. New York led the states with a cost of \$60,076 per inmate; Kentucky spent only \$14,603. (Delaney, 2012)

In 2009, the Pew Center on the States calculated the average daily cost of prison, probation and parole across 33 states, and found that prison cost an average of \$78.95 per inmate per day, while parole cost \$7.47 and probation cost \$3.42. (States, 2009)

RECIDIVISM: The vast majority of these people will be returning to society with little or no preparation for success in the community. "About 700,000 people come home from jail and prison every year. Those who get no help, that is two-thirds of them, are likely to do what we call reoffend, something to get them back to where they came from. The level and quality of the help that they get will reduce their re-incarceration tremendously. The higher the quality, the greater the reduction." (Danny Davis, 2015)

The most recent federal data on recidivism, published in April 2014, monitored offenders released from prison in 2005 and tracked their activity for the next five years. That study found that 76.6% of ex-offenders were re-arrested at least once during that period. (Alexia D. Cooper, 2014) Additionally, it found that more than two thirds (67.8%) of ex-offenders were arrested for a new crime within three years.

RE-EMPLOYMENT

Of the 262,000 federal prisoners that were released from federal prison between calendar years 2002-2006, 50% of those who could not secure any employment during the time of their supervised release (generally two-to-five years) committed a new crime or violated the terms of their release and were sent back to prison. However, an astonishing 93% of those who were able to secure employment during the entirety of their supervised release were able to successfully reintegrate back into society and not return to prison. (U.S. Attorney's Office)

This is the critical issue [®]R4W addresses. Employment is perhaps the biggest obstacle facing an ex-offender returning to the community and staying out of jail, yet it's the key.

READY4WORK HISTORY

In June 2003, President G.W. Bush and the Department of Labor's Center for Faith-based and Community Initiatives selected ONH as the pilot site for the Ready4Work program. The designation afforded ONH the opportunity to provide additional support services: case management, job placement and career development along with matching mentors.

Twelve years later, [®]Ready4Work is a registered trademark of ONH and is a mature, data-driven, successful and internationally recognized re-entry program. The program processes have been refined, the data capture and analysis capabilities strengthened and the program is being replicated in other markets.

The costs to society for failing to support this population are enormous.

Consider the costs of:

- **Re-incarceration at \$79 per day (Bureau, 2013)**
- **Court time and costs for new proceedings**
- **Income and social security taxes not being generated**
- **Social services costs like SNAP, disability, unemployment compensation**
- **Child support not being generated**
- **Families not having an opportunity to reunite**
- **Additional contribution to GDP from lack spending**

OPERATION NEW HOPE

Founded in 1999 as a faith-based nonprofit community development corporation by Kevin Gay, ONH has maintained a two-pronged business model vital to sustaining broken urban communities – the development of affordable housing and successful workforce and community reintegration of ex-offenders.

While the organization's efforts as a CDC have been focused on the Springfield area of Jacksonville, Florida, its ®R4W program has already been successfully launched in Tampa, Florida, and is poised to begin serving other cities in Florida and elsewhere

®READY4WORK: WHAT WE DO

The goal of the ®R4W program is to prepare non-violent ex-offenders for employment as a key foundation for successful re-entry into the community. The program is dependent upon the support coming from Four Pillars:

BUSINESS: ®R4W could not be successful without the support of the local business community. ®R4W establishes relationships with numerous corporate partners in high-growth/high-demand industries. These companies pay a living wage, understand the challenges faced by this population, and have agreed to hire Clients based on the supportive nature of ®R4W. The businesses that interview and hire ®R4W Clients often comment about their high motivation and excellent training. They comment that the ®R4W vetting process is second to none.

- **COMMUNITY:** From mental health services and drug counseling to teaching interview skills and providing a new suit for a job interview are all essential to the success of the ex-offender. ®R4W community partners show Clients the support needed to successfully return to society and the workforce. Community-based organizations such as food banks, thrift stores, shelters, and medical providers generously offer ®R4W Clients these ancillary services and often times serve as volunteer Life Coaches for the program.
- **FAITH:** Faith partners are committed to serving the needs of offenders while they are incarcerated and after they are released. The faith community is also a tremendous source for volunteer support. ®R4W recruits Life Coaches from a variety of faith-based institutions and encourages them to engage resources from within their communities to further assist ®R4W Clients.
- **CRIMINAL JUSTICE:** ®R4W partners with state prisons and local jails, as well as law enforcement agencies and the judiciary to identify inmates and parolees likely to benefit from the re-entry program. ®R4W Case Managers meet with inmates that express an interest in the program to provide information about ®R4W prior to their release. ®R4W also urges leaders within the judicial system to encourage alternative sentencing for non-violent offenders.

What sets ®R4W apart from other re-entry programs is its unique “underwriting approach”. By underwriting each client to determine their individual challenges, we can develop a tailored Plan of Care to increase their chances of employment and avoiding recidivism. Each Client is assigned to one of four tracks based upon his or her skill sets and life experiences. These include job skills, employment history and behavioral background. The tracks indicate the amount of support, resources, and time a Client may need to achieve success.

This approach, along with an integrated-treatment approach to providing care, creates the perfect environment for successful re-entry. Every effort is made to provide third-party services on site to make access easier for the Client.

®R4W INCLUDES:

- **UNDERWRITING**
 - **RIGOROUS CANDIDATE SCREENING:** Because the program is not intended for ex-offenders with violent or sexual offenses, every Candidate submits information on an Intake Questionnaire. That information is then compared to criminal histories via background checks on each Candidate to insure the candidate is in fact eligible for ®R4W.
 - **IN-DEPTH RISK ASSESSMENT:** Once a Candidate is determined to be eligible for ®R4W, a more detailed personal history is taken addressing employment history, socio-economic issues, dependency issues, health issues, etc. There is also a mandatory drug screen that must be passed before a Candidate can start the program and become a Client. The more the Case Manager knows about a Client, the better the plan for that Client will be.
- **COMPREHENSIVE CASE MANAGEMENT:** A new Client is assigned a Case Manager that works with the Client for one year, even if they become employed before the end of that period. The Case Manager is the Client’s confidant, coach, and friend. It is the Case Manager that addresses the Client’s issues outside of ®R4W and monitors their progress within it, working collaboratively with the other professionals on staff.
- **REFERRALS:** No program can address everything. ®R4W partners with other service providers in the community for substance abuse programs, mental health counseling, housing, clothing and other needs that may be relevant for an individual Client.
- **EXTENSIVE WORK AND LIFE SKILLS:** The Career Development portion of ®R4W is classroom-based and teaches Clients key life and employment skills they may not have yet developed. Those include managing finances, job searched, interviewing skills, people skills and work environment awareness.
- **LIFE COACHES:** Life Coaches are volunteer mentors from the community who commit to working with one Client. While a Life Coach is not mandatory, for some Clients it is an important element in their success.
- **EMPLOYMENT SERVICES:** While some Client’s find employment through their own searches and networks, the ®R4W Employment Services team builds relationships with area employers in targeted industries to identify job openings and match Clients to

those jobs. Part of the process involves a Job Coach making sure the Client is well prepared for that particular opportunity before the interview and continuing to work with the Client once they are on the job to provide support as needed.

- **DATA DRIVEN CULTURE:** ®R4W uses a proprietary customized version of the ETO™ database as its platform for data capture and analysis. ONH partners with the Department of Criminology at the University of North Florida to analyze data and make in-depth assessments of the program's effectiveness.

®R4W monitors each Client's progress, capturing every Client interaction and milestone. The data drives key performance metrics from the program level through the departmental level to the individual staff member level.

- **ELECTRONIC AUDIT CAPABILITY:** ETO™ allows government funding partners to have real-time access to Client's covered by their funding. This eliminates the need for paper copies of documents because all documents are scanned, and it saves the government money by eliminating the need for on-site audits and duplicative data capture.
- **THE "SPECIAL SAUCE":** There is one other important element to ®R4W's success: our team. Our team has personal experience, not only with the socio-economic demographics of our Clients, but most also have personal experience with ex-offenders because they or their family members are ex-offenders. They have credibility with the Clients because they "walked the walk". They are also unlikely to accept bogus excuses for a Client's failures to perform as required.

RESULTS

The most common metric for measuring successful re-entry is the recidivism rate. However, recidivism rates have not garnered the confidence from funders/investors because of the many iterations of defining recidivism and capturing data. Many state and federal agencies define recidivism as a reconviction on a new charge. ®R4W defines recidivism as "any re-arrest"! Therefore, with recidivism rates significantly lower than state and federal agencies, and using a more conservative definition, it's understandable why ®R4W is attracting attention.

Over a three year period, ®R4W Clients had a recidivism rate of only 35% vs. a national average of 67.8%. (Alexia D. Cooper, 2014)

We know that employment is the key to reducing recidivism rates. An ex-offender that is occupied, responsible and earning enough money to survive is less likely to re-offend.

®R4W's first year recidivism rates continue to improve, dropping from 9% in 2011 to 5% in 2013.

Of the 169 Clients placed in jobs in 2013, 95% were placed in jobs within a year of starting the program. In 2014, that rate increased to 100%. We know that incarceration costs more than rehabilitation. ®R4W is a bargain, costing \$15 per day while it costs, on average, \$79 per day for a prisoner in a jail or prison. (States, 2009)

®R4W knows which industries are best suited to work with its Clients and builds relationships with the employers within those industries. Targeted industries include warehousing/logistics, food services, grounds maintenance/landscaping, light manufacturing and call centers.

In 2014, ONH placed Clients with 72 different employers, illustrating the buy-in of the business community.

REPLICATION

Programmatic fidelity and integrity are of utmost importance to ONH. Enormous effort was made to define every aspect of the program and to document the program with process maps, standard terminology, operations manuals, ETO™ manuals, job descriptions and standard performance metrics. ONH understands that the processes and data must be identical to maintain the integrity of the data from all sites. The six phases of the Replication Process are:

1. **ASSESSMENT:** This phase includes an initial application and screening, followed by an in-depth organizational review by ONH addressing programs, finances, governance, community relations, facilities and leadership. ONH had a vested interest in finding replication partners with a high chance of successfully launching ®R4W and running it sustainably. If ONH decides to proceed, a Licensing Agreement is entered into.
2. **STAFFING AND STAFF TRAINING:** ONH provides replication partners with a week of onsite training in Jacksonville for the start-up staff and leadership. Each staff member received a position-specific operations manual and is trained by an ONH peer. The ONH peer also becomes their mentor once they return home. The training covers not only how to do the particular job, but the specific ETO™ interface for that position, real-world issues likely to be confronted, and a chance to see the ONH staff working with Clients. In addition, as was mentioned previously, maintaining the ®R4W “culture” is critical and leads to the development of hiring and testing standards for positions at new ®R4W sites to maintain a high level delivery system crucial for program success. Experienced ONH staff work with replication site staff to teach them about the sensitivities they should be aware of in working with ex-offenders.
3. **RECRUITING:** Once the replication partner returns home, there are three areas of recruiting that takes place before the program can begin.
 - a. **Candidates:** Relationships with the corrections community, the faith community and the general community to make them aware of ®R4W so that an initial pool of Candidates can be identified.
 - b. **Employers:** It may take time to develop positive relationships with area employers, educating them on the program and gaining their support.
 - c. **Life Coaches:** A pool of Life Coaches should be identified and trained so that a new Client requesting a Life Coach can have one assigned immediately.
4. **CLIENT TRAINING SUPPORT:** After returning home, the new Career Development Trainers and the new Case Managers have access to their peer-trainer as needed by phone for support.
5. **CLIENT PLACEMENT:** After returning home, the new Employment Services staff have access to their peer-trainer as needed by phone for support.
6. **PROGRAM IMPLEMENTATION AND MONITORING:** Using ETO™ and site visits, ONH can audit the work being done in Tampa to verify compliance with the processes and procedures required by ®R4W. ONH staff will also do a site visit as operations begin to provide support and guidance as needed.

7. **PUBLIC RELATIONS:** Public Relations, Marketing and Advocacy are all important and ongoing components of ®R4W. It's important to keep the program in front of the community, policy makers and funders to maintain and grow support for the program.

®R4W REPLICATION IN TAMPA, FL

®R4W is a proven program. Not only has it been impactful in Jacksonville, Florida, but it was replicated in 2014 in Tampa, Florida. After a rigorous assessment process, ONH chose Abe Brown Ministries, Inc., ("ABM"), a social services organization with a dynamic leader as its first replication partner.

The Hillsborough County Commission (Tampa) endorsed the program, providing funding for the replication in Tampa and ongoing funding for ®R4W in Tampa, as had the Florida Department of Corrections ("FDOC").

Because Tampa was the first replication site, ONH made a concerted effort to capture lessons learned from the experience to make the process even better for the next replication.

INTEREST IN ®R4W

The Florida Governor's Office embraced ®R4W, including the program in the State budget in 2014. The Florida Department of Corrections has partnered with Operation New Hope to offer ®R4W beginning pre-release.

The U.S. Attorney's Office for the Middle District and Northern District of Florida have also expressed interest in piloting ®R4W in their districts.

Now more than ever, Federal, State and Local officials recognize the need to proactively address the re-entry challenge. With this in mind, ONH is hosting a national re-entry summit in 2015 underwritten by The Ford Foundation. The goal is to highlight successful, proven approaches to reducing recidivism and to share the most effective practices.

There are currently serious expressions of interest to replicate ®R4W from two other major Florida cities, other states and cities, and even from a European NGO.

The time is right to take ®R4W to scale.

RELATED PROGRAMS

PRE-ENTRY: ONH is embarking on a demonstration project sentencing diversion program for 18 to 24 year-olds, intended to keep offenders out of the justice system by leveraging the proven ®R4W approach toward life skills, job skills and employment. This is a unique collaboration with local judiciary, the Public Defender's Office and the State Attorney's Office.

BREAKING THE CYCLE: An award winning full-scale economic development initiative aimed at the reunification of families and improving the outcomes for children of ex-offenders. The goal of this initiative is to make the reunification of family possible and to provide financial and emotional stability for the children.

®SECURE RE-ENTRY: With its experience and capabilities, ONH may be especially well suited to provide re-entry programming for those ex-offenders requiring additional restrictions by the court. With radio tag technology, ex-offenders can be tracked in real-time. This layer of added precaution, coupled with the proven ®R4W program may provide an avenue for successful re-entry and employment for that population. In other words, ®Secure Re-Entry.

ENDORSEMENTS

“Gainful employment is a turning point for all people. But this is particularly true for those who are seeking a fresh start in life. Ready4Work is good for families, communities and employers. And it offers us a real chance to break the cycle of crime and recidivism that plagues so many communities.”

Elaine L. Chao, Former U.S. Secretary of Labor

“I think every family in our state has dealt with issues in alcoholism or people making mistakes, and they’re turning these lives around and turning families around, so it’s nice”

Rick Scott, Florida Governor
February 8, 2013

“During my time in law enforcement I have witnessed firsthand the difference a job can make in breaking the cycle of recidivism. This is why I am reaching out to you and asking for your support. Please join me in partnering with Operation New Hope’s ®Ready4Work program for job placement of non-violent and non-sexual ex-offenders. Why? Because it works!”

Nat Glover, Former Duval County Sheriff
President, Edward Waters College

“Companies and communities gain in very tangible ways when ex-offenders find work after prison. Employment is cheaper than re-incarceration and brings long-term benefits....Ex-offenders often possess strong work ethics that, when paired with adequate training can help many companies... Ex-offenders can contribute greatly to our economy, if given the proper chance.”

Jacksonville Business Journal
Help Brings Hope
May 30, 2008

“Without a job, they are likely to commit other crimes. The Ready4Work program is trying to change that....The results of their efforts have been impressive.”

**- Former President Bill Clinton
“How Each of Us Can Change the World”**

WORKS CITED

Alexia D. Cooper, P. M. (2014). *Recidivism of Prisoners Released in 30 States in 2005: Patterns from 2005 to 2010*. National Institute of Justice.

Badger, E. (2014, April 30). *Wonkblog*. Retrieved from WashingtonPost.com: <http://www.washingtonpost.com/blogs/wonkblog/wp/2014/04/30/the-meteoric-costly-and-unprecedented-rise-of-incarceration-in-america/>

Bureau, P. (2013, August 2013). Annual Determination of Average Cost of Incarceration. *Federal Register* .

Cowling, M. (2014, June 15). High US Incarceration Rate Begins To Decline. *Florence Reminder and Blade Tribune* .

Danny Davis, U. R. (2015, January 28). Symposium on Reforming the Criminal Justice System. Washington, DC: The Constitution Project.

Delaney, C. H. (2012). *The Price of Prisons, What Incarceration Costs Taxpayers*. Vera Institute of Justice.

General, O. o. (2014). *Top Management and Performance Challenges Facing the Department of Justice* . Washington: US Department of Justice.

Holland, J. (2013, December 16). *Land of the Free? U.S. Has 25% of the World's Prisoners*. Retrieved from Billmoyers.com: <http://billmoyers.com/2013/12/16/land-of-the-free-us-has-5-of-the-worlds-population-and-25-of-its-prisoners/>

Keene, D. A. (2015, January 28). Former President, NRA. Washington, DC: The Constitution Project.

multiple. (2013, October). *United States incarceration rate*. Retrieved from Wikipedia: http://en.wikipedia.org/wiki/United_States_incarceration_rate#cite_note-3

Office of Justice Programs, B. o. (2014). *Correctional Populations in the US, 2013*. Washington: US Department of Justice.

States, T. P. (2009). *1 in 31, The Long Reach of American Connections*.

U.S. Attorney's Office, S. D. (n.d.). *Ex-Offender Re-Entry Initiative*. Retrieved from www.Justice.gov: <http://www.justice.gov/usao/als/rei.html>

Walmsley, R. (2013). *World Prison Population: 10th Edition*. International Centre for Prisons.

October 7, 2015

Description of Program:

Ready4Work (R4W) is a nationally-recognized program assisting ex-offenders with re-entry into the community and workforce, effectively leading clients toward a productive life. Operating with a four-pronged approach; case management, life-coaching, job training and job placement assistance, Ready4Work motivates and moves individuals to become productive, responsible citizens within the community. Commitments and strategic partnerships with faith-based organizations, local businesses, community outlets and the judicial system assist to ensure individuals transition successfully back into the community.

In 2003, President George W. Bush selected Operation New Hope (ONH) as the pilot site for the Ready4Work program. Applauded by President Bill Clinton in his book, *Giving* and endorsed by President Barack Obama, Ready4Work is considered by many to be a model program for the nation. Other supporters include current and former City of Jacksonville leaders Mayor John Peyton, Sheriff John Rutherford, Sheriff Nat Glover and former U.S. Secretary of Labor, Elaine Chao.

Clients of the R4W program are identified as ex-offenders who have not committed violent or sexual crimes and have undergone a complete background screening prior to acceptance into the program. Upon acceptance, clients are required to attend a comprehensive 4 to 6-week career development training course, focusing on employment and life skills. Additionally, clients are partnered with a case manager to provide guidance and support, as well as referrals for community assistance, life-coaching and follow-up drug screening.

Ready4Work-Hillsborough (R4W-H) is a replication of Operation New Hope's (Jacksonville, FL) nationally-acclaimed Ready4Work program that is operated in Hillsborough County by Abe Brown Ministries, Inc. [Launched September 8, 2015]

Funding History:

R4W-Hillsborough was funded in FY2014-2015 with \$750,000 in specific appropriation 781 from recurring general revenue funds, \$750,000 in nonrecurring general revenue funds and \$250,000 in reverted and re-appropriated funds.

R4W-Hillsborough was funded in FY2015-2016 with \$1,000,000 in recurring general revenue funds.

Accomplishments:

Ready4Work – Hillsborough Program Enrollments	
Total September 2014 – June 2015	178
Department of Corrections	148
Private Sector	30
Total Year-To-Date July 2015 – September 2015	
Department of Corrections	48
Private Sector	3

Ready4Work – Hillsborough Placements	
Total September 2014 – June 2015	43
Department of Corrections	38
Private Sector	5
Total Year-To-Date July 2015 – September 2015	
Department of Corrections	20
Private Sector	3



Opportunities:

Client Criteria – The National Institute of Justice has identified three years as the critical time after release from incarceration to meet people where they are, identify their needs, connect clients to needed services, and to consistently follow up with interventions to change behaviors that often have developed over a person’s lifetime. Clients who seek the services of Ready4Work anytime along that continuum during this critical period could be the difference between hope and despair; freedom and incarceration.

Child Support Moratorium – Many Ready4Work-Hillsborough clients are required to pay child support and back child support that has continued to accrue during incarceration. In some instances, as much as 65% of one’s wages can be garnished. For example, a \$10/hour job becomes a \$3.50/hour job to maintain a standard of living. It would help to create a partnership with Florida Department of Revenue to tier such payments over time, especially in situations where such payments are not being made at all.

Discounted Insurance Policies – Let’s explore how we can work together to remove the insurance barrier for hiring ex-offenders. We’ve encountered a few situations where companies have rejected hiring Ready4Work-Hillsborough graduates due to insurance regulations. It is common practice for companies to purchase a discounted policy that sometimes requires that they refrain from hiring previously convicted persons, etc. If we had the opportunity to present Ready4Work to underwriters, perhaps they might see the value of hiring graduates of the program – a vetted, drug-free, qualified candidate mitigating the employer’s risk overall. Consider for example the driver’s education classes offered after you are issued a traffic citation; many insurance companies will not increase your premium if you take the classes and avoid the points.

Contact Information:



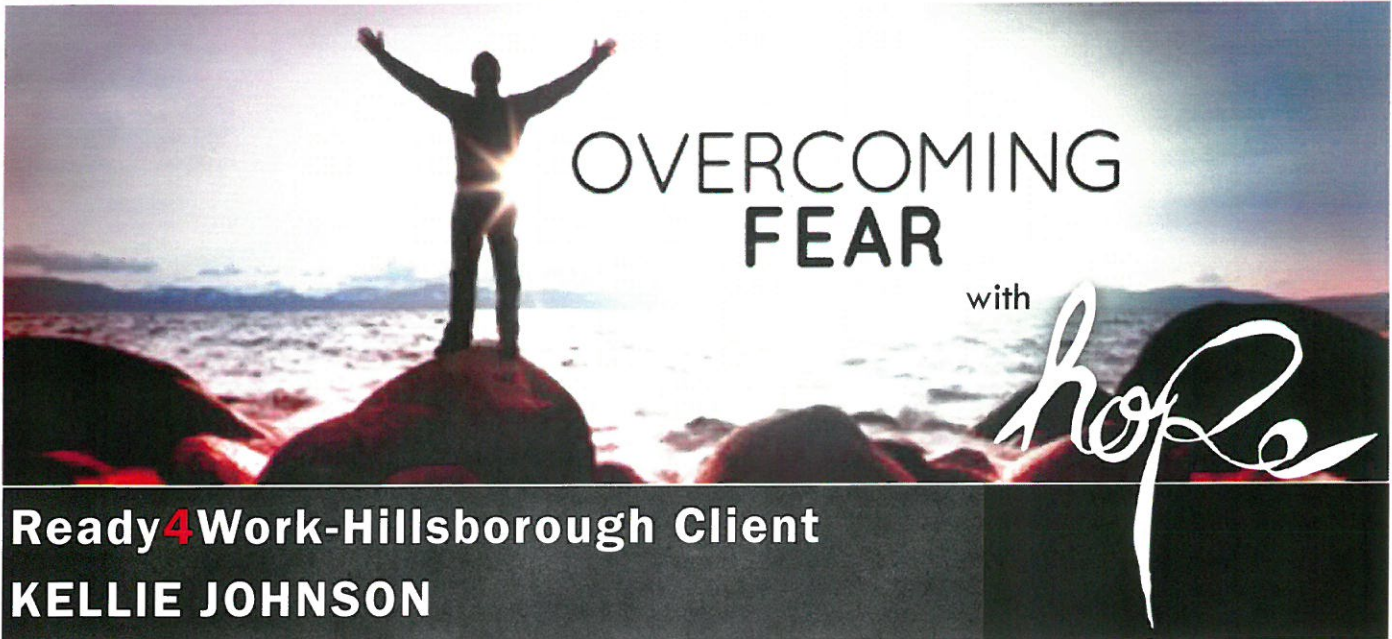
Abe Brown
Ministries, Inc.



Robert P. Blount, III

Abe Brown Ministries, President
Ready4Work-Hillsborough, Director

2921 N. 29th Street
Tampa, FL 33605
o 813-247-3285 x203 | f 813-248-3224
robert.blount@abebrown.org
www.livethebrownlegacy.com



**Ready4Work-Hillsborough Client
KELLIE JOHNSON**

- Kellie Johnson began Ready4Work-Hillsborough on March 16, 2015.
- She completed Career Development on April 14, 2015.
- Kellie was hired as a general laborer at Pronto Wash through Spartan Staffing on July 13, 2015. She was later promoted to supervisor and officially hired by Pronto Wash.
- Kellie was recently promoted to manager.



ProntoWash
ECO AUTOSPA

Kellie Johnson
MANAGER

ProntoWash Westshore Plaza
250 Westshore Plaza
Tampa, Florida 33609
(813) 802-8131

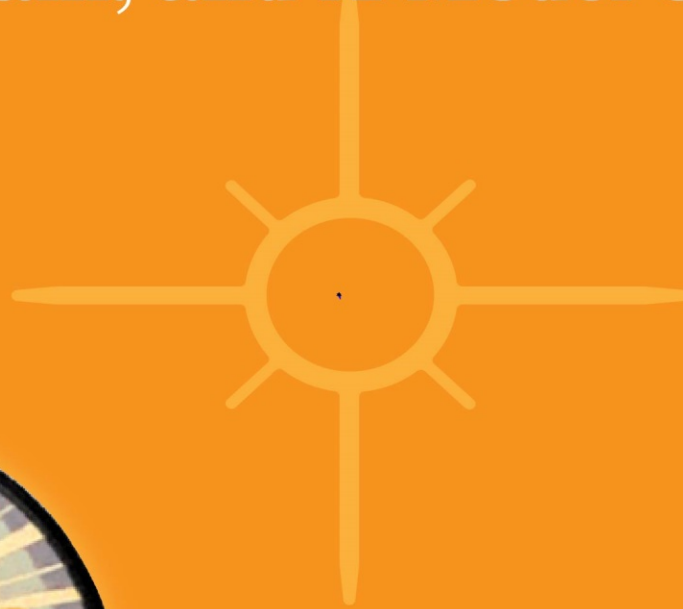
kjohnson@prontowash.com
www.prontowash.com

This is how
HOPE
overcomes
FEAR

[READY4WORK®]
HILLSBOROUGH
REENTRY. RETRAIN. REINTEGRATE.

Horizon Communities in Prisons

A Reentry Program, and A Model of “Smart Justice”



A Non-profit Contractor in Support of FLDC

November 7, 2015

Since 1999

Horizon Communities

Pre-Release Residential Re-entry



Therapeutic Community without Using Therapy



Citizenship: & Contributing to Community



Emphasis on Education



Stress Accountability / Responsibility



Saves Taxpayers Money

Dedicated Through Funding Cycles

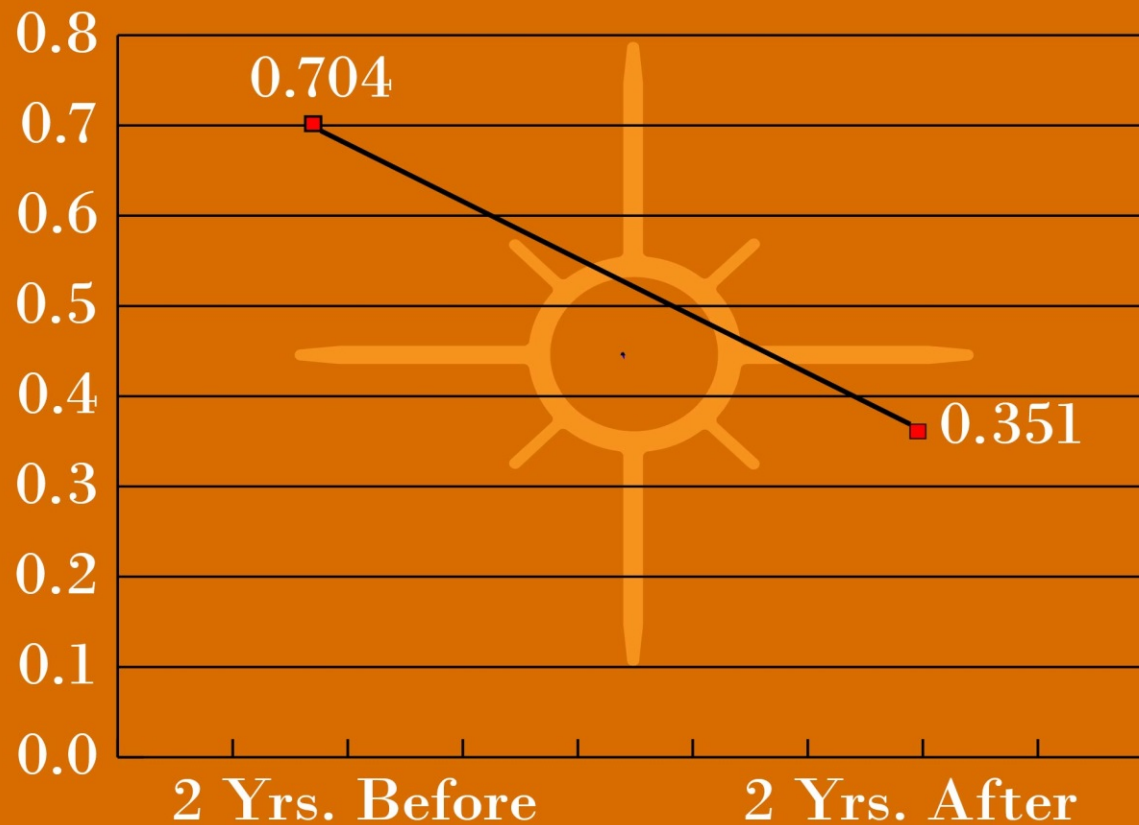


1999-	}	Funded by CORF/USHHS
2000-		
2001-	}	Funded by FLDC
2002-		
2003-		
2004-	}	Unfunded due to Concerns Over Faith Based Programs
2005-		
2006-	}	Funded by FLDC
2007-		
2008-	}	Unfunded due to Budget Cuts
2009-		
2010-		
2011-	}	Presently Funded by FLDC
2012-		
2013-		
2014-		
2015-		



Horizon Communities in Prison saves Florida taxpayers money by reducing the number of disciplinary reports in prison and by reducing recidivism post release. These effects are a direct result of change in inmate behavior and improved education.

Disciplinary Reports Decline on Average by **Half** per Graduate



Horizon Data includes Recidivism and DR Data Provided by the FL DOC
N=410

Savings to Florida Taxpayers from Decrease in DRs at Tomoka CI

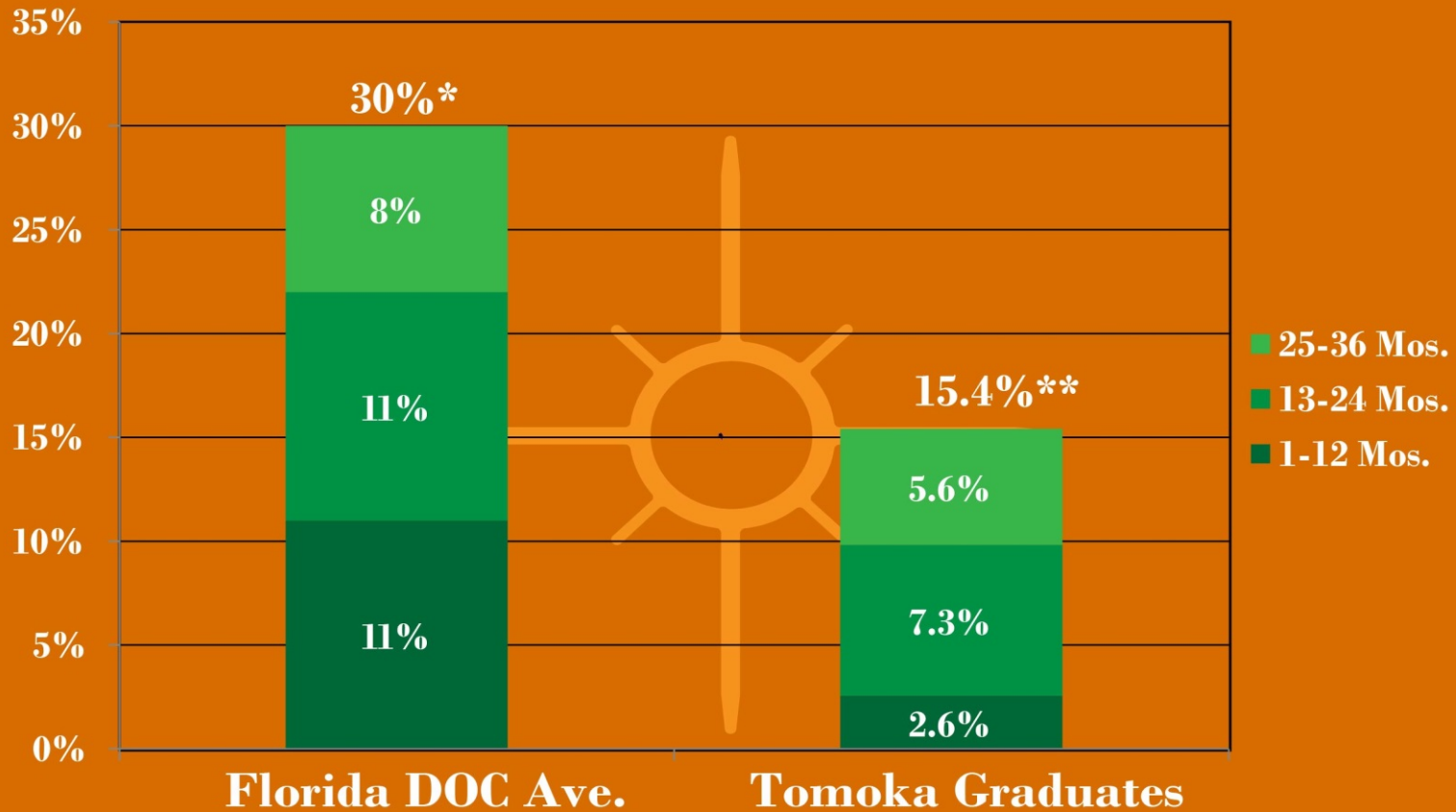
Estimated Cost per DR*	\$912
Annual Graduates	X 120
.35 DR Ave. Reduction/Graduate	X .35
Est. Annual Benefit/Class	<hr/>

\$38,304

Est. Annual Benefit After Only 2 Yrs

\$76,608

Horizon Graduates Exhibit Half the Recidivism Rates of Florida General Population



*Florida Dept. of Corrections (2014) Florida Prison Recidivism Report, Releases from 2005 to 2012, pg. 11.

**Horizon Tomoka Data Reflects Graduates Released from 2005 through 2012

***Horizon Tomoka 5 year Rate is 24.2%

Savings to Florida Taxpayers from Decrease in Recidivism at Tomoka

Estimated Cost per Inmate/Yr*		\$18,064
Annual Graduates	X	120
80% Released	X	.80
15% Change in Recidivism	X	.15

Benefit/Yr/Class Not Returning **\$260,121**

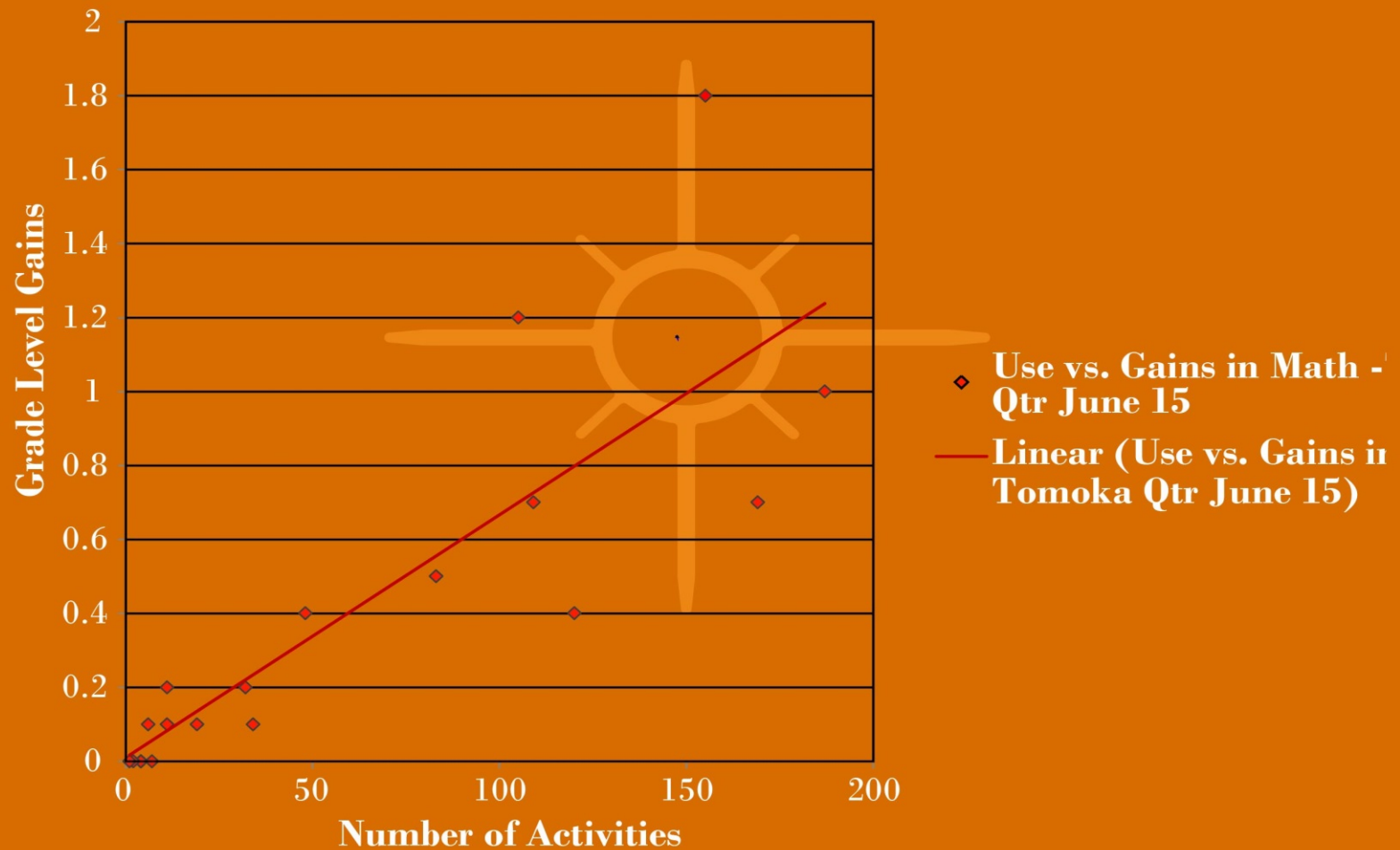
Benefit of 3yrs of Classes **\$780,365**

Based on data at Tomoka CI only, one of 5 Horizon Programs

*Estimate taken from DOC Website

Education Gains in the Latest Quarter Tomoka CI

Use vs. Gains, Math - Tomoka Qtr June 15



Contracting with Horizon Makes **Financial Sense**



-Demonstrated, Measurable Results for Taxpayers

-Low Costs of a 501 c-3

Salaries Modest and Many are Donated

No Benefits – Often Retirees With Existing Benefits

Augment Staff with Volunteers via Community Networks

Donated Funds Supplement Contract

Donated Hardware and Low Cost Software

Discounted Costs to Materials

Created Content Now Distributed Broadly by DOC

-Caliber of Staff and Volunteers

Often Retired Administrators and Professionals

Contracting with Horizon Provides Unique Services To the DOC

Tomoka – Beyond Contract Specifications



-101 Programs to Prepare for Re-entry

Most Important: Create A Therapeutic Community

Living in Community

Pod Families

Outside Brothers

Journey

Re-connecting with Families

-52 Trained Peer Facilitators

-96 Volunteers

-Support Talk Therapy vs Medication

-Contract for Service Provides a Neutral Party

The Ask

-Adequate Funding per Site

Requires \$120,000 1st Yr.

\$70 - 75,000 Each Subsequent Yr.

-Scale to Save DOC/Taxpayers more \$

Recommend 15 Sites

HORIZON COMMUNITIES

Thank You

Contact:



Ike Griffin

Horizon Communities in Prison
800 Ocala Road, Suite 300-117
Tallahassee, FL 32304

407-252-6123

Ike@horizoncommunities.org

Savings to DOC per Year From Education at One Horizon Lab

Estimated \$18,064/inmate/yr		\$18,064
30 Students	x	30
1 Grade Level Gains	x	1
% Change in Recidivism	x	.03
		<hr/>
Benefit per Year		\$16,258
X 3 Years Recidivism Effect		\$48,773
Benefit per Inmate		\$1,625

Cost/Benefit of Education at One Horizon Lab

License Maintenance Fee (10)	\$1,990
On Site Support Visits	\$1,150
Phone, Internet, Text Support	\$480
Total Annual Cost	<hr/>
	\$3,620
Annual Cost per Inmate	\$121


Total Net Annual Savings to DOC **\$45,153**

Net Annual Savings per Inmate **\$1,505**

Cost of Computer Lab, with Training **\$1,825***

* Does not include Air Conditioning, if needed.

Potential Cost/Benefit to Expanding Education



Annual Cost for 20 Station Lab at 111 Sites	\$673,770
Estimated Inmates Served	6,660*
Annual Cost per Inmate	\$101
Total Benefit to DOC in Reduced Recidivism	\$10,800,000
Net Annual Savings per Inmate	\$1,625
	\$400,000**
	\$146,520

* Assumes 3 classes of students per day.

** Assumes 111 labs. Does not include installation of additional electrical power if needed, table, chairs, or cabling through walls/conduits. Does not include Air Conditioning, if needed.

***Cost to add licenses - \$45 per license, plus computer @ \$100.

FUNDING OF HORIZON FROM DOC

1999	Tomoka	\$120,000
2000	Tomoka	\$120,000
2001	Tomoka	\$8,888
2002	Tomoka, Wakulla	\$55,111
2003	Tomoka, Wakulla	\$43,500
2004	Tomoka, Wakulla	\$14,000
2005	Tomoka, Wakulla	\$12,000
2006	Tomoka, Wakulla, Wakulla Annex	\$198,000
2007	Tomoka, Wakulla, Wakulla Annex	\$139,000

FUNDING OF HORIZON FROM DOC

2008	Tomoka, Wakulla, Wakulla Annex	\$63,000
2009	Tomoka, Wakulla, Wakulla Annex	-0-
2010	Tomoka, Wakulla, Wakulla Annex	-0-
2011	Tomoka, Wakulla, Wakulla Annex	-0-
2012	Tomoka, Wakulla, Wakulla Annex, Lowell RC	\$60,500
2013	Tomoka, Wakulla, Wakulla Annex	\$144,000
2014	Tomoka, Wakulla, Wakulla Annex, Hernando, Lowell Annex	\$120,000



SSI/SSDI Outreach, Access and Recovery

for people who are homeless

January 2013

Best Practices for Increasing Access to SSI/SSDI upon Exiting Criminal Justice Settings

Dazara Ware, M.P.C. and Deborah Dennis, M.A.

Introduction

Seventeen percent of people currently incarcerated in local jails and in state and federal prisons are estimated to have a serious mental illness.¹ The twin stigmas of justice involvement and mental illness present significant challenges for social service staff charged with helping people who are incarcerated plan for reentry to community life. Upon release, the lack of treatment and resources, inability to work, and few options for housing mean that many quickly become homeless and recidivism is likely.

The Social Security Administration (SSA), through its Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) programs, can provide income and other benefits to persons with mental illness who are reentering the community from jails and prisons. The SSI/SSDI Outreach, Access and Recovery program (SOAR), a project funded by the Substance Abuse and Mental Health Services Administration, is a national technical assistance program that helps people who are homeless or at risk for homelessness to access SSA disability benefits.²

SOAR training can help local corrections and community transition staff negotiate and integrate benefit options with community reentry strategies

for people with mental illness and co-occurring disorders to assure successful outcomes. This best practices summary describes:

- The connections between mental illness, homelessness, and incarceration;
- The ramifications of incarceration on receipt of SSI and SSDI benefits
- The role of SOAR in transition planning
- Examples of jail or prison SOAR initiatives to increase access to SSI/SSDI
- Best practices for increasing access to SSI/SSDI benefits for people with mental illness who are reentering the community from jails and prisons.

Mental Illness, Homelessness, and Incarceration

In 2010, there were more than 7 million persons under correctional supervision in the United States at any given time.³ Each year an estimated 725,000 persons are released from federal and state prisons, 125,000 with serious mental illness.⁴ More than 20 percent of people with mental illness were homeless in the months before their incarceration compared

¹ Bureau of Justice Statistics. (2006). *Mental health problems of prison and jail inmates*. Washington, DC: U.S. Department of Justice, Office of Justice Programs

² Dennis, D., Lassiter, M., Connelly, W., & Lupfer, K. (2011) Helping adults who are homeless gain disability benefits: The SSI/SSDI Outreach, Access and Recovery (SOAR) program. *Psychiatric Services*, 62(11)1373-1376

³ Guerino, P.M. Harrison & W. Sabel. *Prisoners in 2010*. NCJ 236096. Washington DC: U.S. Department of Justice, Bureau of Justice Statistics, 2011.

⁴ Glaze, L. *Correctional populations in the U.S. 2010*, NCJ 236319. Washington D.C.: U.S. Department of Justice, Bureau of Justice Statistics 2011

with 10 percent of the general prison population.⁵ For those exiting the criminal justice system, homelessness may be even more prevalent. A California study, for example, found that 30 to 50 percent of people on parole in San Francisco and Los Angeles were homeless.⁶

Mental Health America reports that half of people with mental illness are incarcerated for committing nonviolent crimes, such as trespassing, disorderly conduct, and other minor offences resulting from symptoms of untreated mental illness. In general, people with mental illnesses remain in jail eight times longer than other offenders at a cost that is seven times higher.⁷ At least three-quarters of incarcerated individuals with mental illness have a co-occurring substance use disorder.⁸

Homelessness, mental illness, and criminal justice involvement create a perfect storm, requiring concerted effort across multiple systems to prevent people with mental illness from cycling between homelessness and incarceration by providing them the opportunity to reintegrate successfully into their communities and pursue recovery.

To understand the interplay among mental illness, homelessness, and incarceration, consider these examples:

- In 2011 Sandra received SSI based on her mental illness. She was on probation, with three years remaining, when she violated the terms of probation by failing to report to her probation officer. As a result, Sandra was incarcerated in a state prison. Because she was incarcerated for more than 12 months, her benefits were terminated. Sandra received a tentative parole month of

September 2012 contingent on her ability to establish a verifiable residential address. The parole board did not approve the family address she submitted because the location is considered a high crime area. Unfortunately, Sandra was unable to establish residency on her own as she had no income. Thus, she missed her opportunity for parole and must complete her maximum sentence. Sandra is scheduled for release in 2013.

- Sam was released from prison after serving four years. While incarcerated, he was diagnosed with a traumatic brain injury and depression. Sam had served his full sentence and was not required to report to probation or parole upon release. He was released with \$25 and the phone number for a community mental health provider. Sam is 27 years old with a ninth grade education and no prior work history. He has no family support. Within two weeks of release, Sam was arrested for sleeping in an abandoned building. He was intoxicated and told the arresting officer that drinking helped the headaches he has suffered from since he was 14 years old. Sam was sent to jail.
- Manuel was arrested for stealing from a local grocery store. He was homeless at the time of arrest and had a diagnosis of schizophrenia. He was not receiving any community mental health services at the time. Manuel has no family. He was sent to a large county jail where he spent two years before being arraigned before a judge. His periodic acute symptoms resulted in his being taken to the state hospital until he was deemed stable enough to stand trial. However, the medications that helped Manuel's symptoms in the hospital weren't approved for use in the jail, and more acute episodes followed. Manuel cycled between the county jail and the state hospital four times over a two-year period before being able to stand before a judge.

Based on real life situations, these examples illustrate the complex needs of people with serious mental illnesses who become involved with the justice system. In Sandra's and Sam's cases, the opportunity to apply for SSI/SSDI benefits on a pre-release basis would have substantially reduced the period of incarceration, and in Manuel's case, access to SSI immediately upon release would have decreased the likelihood he would return to jail. But how do we ensure that this happens?

⁵ *Reentry Facts*. The National Reentry Resource Center. Council of State Governments Justice Center. Retrieved December 6, 2012, from <http://www.nationalreentryresourcecenter.org/facts>

⁶ California Department of Corrections. (1997). *Preventing Parolee Failure Program: An evaluation*. Sacramento: Author.

⁷ Mental Health America. (2008). *Position Statement 52: In support of maximum diversion of persons with serious mental illness from the criminal justice system*. Retrieved from <http://www.mentalhealthamerica.net>.

⁸ Council of State Governments. (2002). *Criminal Justice/ Mental Health Consensus Project*. Lexington, Kentucky: author.

Incarceration and SSA Disability Benefits

Correctional facilities, whether jails or prisons, are required to report to SSA newly incarcerated people who prior to incarceration received benefits. For each person reported, SSA sends a letter to the facility verifying the person's benefits have been suspended and specifying the payment to which the facility is entitled for providing this information. SSA pays \$400 for each person reported by the correctional facility within 60 days. If a report is made between 60 and 90 days of incarceration, SSA pays \$200. After 90 days, no payment is made.

The rules for SSI and SSDI beneficiaries who are incarcerated differ. Benefits for SSI recipients incarcerated for a full calendar month are suspended, but if the person is released within 12 months, SSI is reinstated upon release if proof of incarceration and a release are submitted to the local SSA office. SSA reviews the individual's new living arrangements, and if deemed appropriate, SSI is reinstated. However, if an SSI recipient is incarcerated for 12 or more months, SSI benefits are terminated and the individual must reapply. Reapplication can be made 30 days prior to the expected release date, but benefits cannot begin until release.

Unfortunately, people who are newly released often wait months before their benefits are reinstated or initiated. Few states or communities have developed legislation or policy to insure prompt availability of benefits upon release. Consequently, the approximately 125,000 people with mental illness who are released each year are at increased risk for experiencing symptoms of mental illness, substance abuse, homelessness, and recidivism.

SSDI recipients are eligible to continue receiving benefits until convicted of a criminal offense and confined to a penal institution for more than 30 continuous days. At that time, SSDI benefits are suspended but will be reinstated the month following release.

Role of Transition Services in Reentry for People with Mental Illness

Since the 1990s, the courts have increasingly acknowledged that helping people improve their mental health and their ability to demonstrate safe and orderly behaviors while they are incarcerated enhances their reintegration and the well-being of the communities that receive them. Courts specializing in the needs of people with mental illness and or substance use disorders, people experiencing homelessness, and veterans are designed to target the most appropriate procedures and service referrals to these individuals, who may belong to more than one subgroup. The specialized courts and other jail diversion programs prompt staff of various systems to consider reintegration strategies for people with mental illness from the outset of their criminal justice system involvement. Transition and reintegration services for people with mental illness reflect the shared responsibilities of multiple systems to insure continuity of care.

Providing transition services to people with mental illness within a jail or prison setting is difficult for several reasons: the quick population turnover in jails, the distance between facilities and home communities for people in prisons, the comprehensive array of services needed to address multiple needs, and the perception that people with mental illness are not responsive to services. Nevertheless, without seriously addressing transition and reintegration issues while offenders remain incarcerated, positive outcomes are far less likely upon release and recidivism is more likely.

Access to Benefits as an Essential Strategy for Reentry

The criminal justice and behavioral health communities consistently identify lack of timely access to income and other benefits, including health insurance, as among the most significant and persistent barriers to successful community reintegration and recovery for people with serious mental illnesses and co-occurring substance use disorders.

Many states and communities that have worked to ensure immediate access to benefits upon release have focused almost exclusively on Medicaid. Although access to Medicaid is critically important, focusing on this alone often means that needs for basic sustenance and housing are ignored. Only a few states (Oregon, Illinois, New York, Florida) provide for Medicaid to be suspended upon incarceration rather than terminated, and few states or communities have developed procedures to process new Medicaid applications prior to release.

The SOAR approach to improving access to SSI/SSDI. The SSI/SSDI application process is complicated and difficult to navigate, sometimes even for professional social service staff. The SOAR approach in correctional settings is a collaborative effort by corrections, behavioral health, and SSA to address the need for assistance to apply for these benefits. On average, providers who receive SOAR training achieve a first-time approval rate of 71 percent, while providers who are not SOAR trained or individuals who apply unassisted achieve a rate of 10 to 15 percent.⁹ SOAR-trained staff learn how to prepare comprehensive, accurate SSI/SSDI applications that are more likely to be approved, and approved quickly.

SOAR training is available in every state. The SOAR Technical Assistance Center, funded by SAMHSA, facilitates partnerships with community service providers to share information, acquire pre-incarceration medical records, and translate prison functioning into post-release work potential. With SOAR training, social service staff learn new observation techniques to uncover information critical to developing appropriate reentry strategies. The more accurate the assessment of factors indicating an individual's ability to function upon release, the easier it is to help that person transition successfully from incarceration to community living.

The positive outcomes produced by SOAR pilot projects within jail and prison settings around the country that link people with mental illness to benefits upon their release should provide impetus for more correctional facilities to consider using this approach as a foundation for building successful transition or

reentry programs.¹⁰ Below are examples of SOAR collaborations in jails (Florida, Georgia, and New Jersey) and prison systems (New York, Oklahoma, and Michigan). In addition to those described below, new SOAR initiatives are underway in the jail system of Reno, Nevada and in the prison systems of Tennessee, Colorado, Connecticut, and the Federal Bureau of Prisons.

SOAR Collaborations with Jails

Eleventh Judicial Circuit Criminal Mental Health Project (CMHP). Miami-Dade County, Florida, is home to the highest percentage of people with serious mental illnesses of any urban area in the United States – approximately nine percent of the population, or 210,000 people. CMHP was established in 2000 to divert individuals with serious mental illnesses or co-occurring substance use disorders from the criminal justice system into comprehensive community-based treatment and support services. CMHP staff, trained in the SOAR approach to assist with SSI/SSDI applications, developed a strong collaborative relationship with SSA to expedite and ensure approvals for entitlement benefits in the shortest time possible. All CMHP participants are screened for eligibility for SSI/SSDI.

From July 2008 through November 2012, 91 percent of 181 individuals were approved for SSI/SSDI benefits on initial application in an average of 45 days. All participants of CMHP are linked to psychiatric treatment and medication with community providers upon release from jail. Community providers are made aware that participants who are approved for SSI benefits will have access to Medicaid and retroactive reimbursement for expenses incurred for up to 90 days prior to approval. This serves to reduce the stigma of mental illness and involvement with the criminal justice system, making participants more attractive “paying customers.”

In addition, based on an agreement established between Miami-Dade County and SSA, interim housing assistance is provided for individuals applying for SSI/SSDI during the period between application and

⁹ Dennis et al., (2011). *op cit.*

¹⁰ Dennis, D. & Abreu, D. (2010) SOAR: Access to benefits enables successful reentry, *Corrections Today*, 72(2), 82–85.

approval. This assistance is reimbursed to the County once participants are approved for Social Security benefits and receive retroactive payment. The number of arrests two years after receipt of benefits and housing compared to two years earlier was reduced by 70 percent (57 versus 17 arrests).

Mercer and Bergen County Correctional Centers, New Jersey. In 2011, with SOAR training and technical assistance funded by The Nicholson Foundation, two counties in New Jersey piloted the use of SOAR to increase access to SSI/SSDI for persons with disabilities soon to be released from jail. In each county, a collaborative working group comprising representatives from the correctional center, community behavioral health, SSA, the state Disability Determination Service (DDS), and (in Mercer County only) the United Way met monthly to develop, implement, and monitor a process for screening individuals in jail or recently released and assisting those found potentially eligible in applying for SSI/SSDI. The community behavioral health agency staff, who were provided access to inmates while incarcerated and to jail medical records, assisted with applications.

During the one year evaluation period for Mercer County, 89 individuals from Mercer County Correction Center were screened and 35 (39 percent) of these were deemed potentially eligible for SSI/SSDI. For Bergen County, 69 individuals were screened, and 39 (57 percent) were deemed potentially eligible. The reasons given for not helping some potentially eligible individuals file applications included not enough staff available to assist with application, potential applicant discharged from jail and disappeared/couldn't locate, potential applicant returned to prison/jail, and potential applicant moved out of the county or state. In Mercer County, 12 out of 16 (75 percent) SSI/SSDI applications were approved on initial application; two of those initially denied were reversed at the reconsideration level without appeal before a judge. In Bergen County which had a late start, two out of three former inmates assisted were approved for SSI/SSDI.

Prior to this pilot project, neither behavioral health care provider involved had assisted with SSI/SSDI applications for persons re-entering the community from the county jail. After participating in the pilot project, both agencies remain committed to continuing

such assistance despite the difficulty of budgeting staff time for these activities.

Fulton County Jail, Georgia. In June 2009, the Georgia Department of Behavioral Health and Developmental Disabilities initiated a SOAR pilot project at the Fulton County Jail. With the support of the facility's chief jailer, SOAR staff were issued official jail identification cards that allowed full and unaccompanied access to potential applicants. SOAR staff worked with the Office of the Public Defender and received referrals from social workers in this office. They interviewed eligible applicants at the jail, completed SSI/SSDI applications, and hand-delivered them to the local SSA field office. Of 23 applications submitted, 16 (70 percent) were approved within an average of 114 days.

SOAR benefits specialists approached the Georgia Department of Corrections with outcome data produced in the Fulton County Jail pilot project to encourage them to use SOAR in the state prison system for persons with mental illness who were coming up for release. Thirty-three correctional officers around the state received SOAR training and were subsequently assigned by the Department to work on SSI/SSDI applications.

SOAR Collaborations with State and Federal Prisons

New York's Sing Sing Correctional Facility. The Center for Urban and Community Services was funded by the New York State Office of Mental Health, using a Projects for Assistance in Transition from Homelessness (PATH) grant, to assist with applications for SSI/SSDI and other benefits for participants in a 90-day reentry program for persons with mental illness released from New York State prisons. After receiving SOAR training and within five years of operation, the Center's Community Orientation and Reentry Program at the state's Sing Sing Correctional Facility achieved an approval rate of 87 percent on 183 initial applications, two thirds of which were approved prior to or within one month of release.

Oklahoma Department of Corrections. The Oklahoma Department of Corrections and the Oklahoma Department of Mental Health collaborated

to initiate submission of SSI/SSDI applications using SOAR-trained staff. Approval rates for initial submission applications are about 90 percent. The Oklahoma SOAR program also uses peer specialists to assist with SSI/SSDI applications for persons exiting the prison system. Returns to prison within 3 years were 41 percent lower for those approved for SSI/SSDI than a comparison group.

Michigan Department of Corrections. In 2007 the Michigan Department of Corrections (DOC) began to discuss implementing SOAR as a pilot in a region where the majority of prisoners with mental illnesses are housed. A subcommittee of the SOAR State Planning Group was formed and continues to meet monthly to address challenges specific to this population. In January 2009, 25 DOC staff from eight facilities, facility administration, and prisoner reentry staff attended a two-day SOAR training. The subcommittee has worked diligently to develop a process to address issues such as release into the community before a decision is made by SSA, the optimal time to initiate the application process, and collaboration with local SSA and DDS offices.

Since 2007, DOC has received 72 decisions on SSI/SSDI applications with a 60 percent approval rate in an average of 105 days. Thirty-nine percent of applications were submitted after the prisoner was released, and 76 percent of the decisions were received after the applicant's release. Seventeen percent of those who were denied were re-incarcerated within the year following release while only two percent of those who were approved were re-incarcerated.

Park Center's Facility In-Reach Program. Park Center is a community mental health center in Nashville, Tennessee. In July 2010, staff began assisting with SSI/SSDI applications for people with mental illness in the Jefferson County Jail and several facilities administered by the Tennessee Department of Corrections, including the Lois M. DeBerry Special Needs Prison and the Tennessee Prison for Woman. From July 2010 through November 2012, 100 percent of 44 applications have been approved in an average of 41 days. In most cases, Park Center's staff assisted with SSI/SSDI applications on location in these facilities prior to release. Upon release, the individual is accompanied by Park Center staff to the local SSA

office where their release status is verified and their SSI/SSDI benefits are initiated.

Best Practices for Accessing SSI/SSDI as an Essential Reentry Strategy

The terms jail and prison are sometimes used interchangeably, but it is important to understand the distinctions between the two. Generally, a jail is a local facility in a county or city that confines adults for a year or less. Prisons are administered by the state or federal government and house persons convicted and sentenced to serve time for a year or longer.

Discharge from both jails and prisons can be unpredictable, depending on a myriad of factors that may be difficult to know in advance. Working with jails is further complicated by that fact that they generally house four populations: (1) people on a 24-48 hour hold, (2) those awaiting trial, (3) those sentenced and serving time in jail, and (4) those sentenced and awaiting transfer to another facility, such as a state prison.

Over the past several years, the following best practices have emerged with respect to implementing SOAR in correctional settings. These best practices are in addition to the critical components required by the SOAR model for assisting with SSI/SSDI applications.¹¹ These best practices fall under five general themes:

- Collaboration
- Leadership
- Resources
- Commitment
- Training

Collaboration. The SOAR approach emphasizes collaborative efforts to help staff and their clients navigate SSA and other supports available to people with mental illness upon their release. Multiple collaborations are necessary to make the SSI/SSDI application process work. Fortunately, these are the same collaborations necessary to make the overall transition work. Thus, access to SSI/SSDI can become

¹¹ See <http://www.prainc.com/soar/criticalcomponents>.

a concrete foundation upon which to build the facility's overall discharge planning or reentry process.

- **Identify stakeholders.** Potential stakeholders associated with jail/prisons include
 - ✓ Judges assigned to specialized courts and diversion programs
 - ✓ Social workers assigned to the public defenders' office
 - ✓ Chief jailers or chiefs of security
 - ✓ Jail mental health officer, psychologist, or psychiatrist
 - ✓ County or city commissioners
 - ✓ Local reentry advocacy project leaders
 - ✓ Commissioner of state department of corrections
 - ✓ State director of reintegration/reentry services
 - ✓ Director of medical or mental health services for state department of corrections
 - ✓ State mental health agency administrator
 - ✓ Community reentry project directors
 - ✓ Parole/probation managers
- **Collaborate with SSA to establish prerelease agreements.** SSA can establish prerelease agreements with correctional facilities to permit special procedures when people apply for benefits prior to their release and will often assign a contact person. For example, prerelease agreements can be negotiated to allow for applications to be submitted from 60 to 120 days before the applicant's expected release date. In addition, SSA can make arrangements to accept paper applications and schedule phone interviews when necessary.
- **Collaborate with local SOAR providers to establish continuity of care.** Given the unpredictability of release dates from jails and prisons, it is important to engage a community-based behavioral health provider to either begin the SSI/SSDI application process while the person is incarcerated or to assist with the individual's reentry and assume responsibility for completing his or her SSI/SSDI application following release. SOAR training can help local corrections and community transition staff assure continuity of care by determining and coordinating benefit options and reintegration strategies for people with mental illness. Collaboration among service

providers, including supported housing programs that offer a variety of services, is key to assuring both continuity of care and best overall outcomes post-release.

- **Collaborate with jail or prison system for referrals, access to inmates, and medical records.** Referrals for a jail or prison SOAR project can issue from many sources – intake staff, discharge planners, medical or psychiatric unit staff, judges, public defenders, parole or probation, and community providers. Identifying persons within the jail or prison who may be eligible for SSI/SSDI requires time, effort, and collaboration on the part of the jail or prison corrections and medical staff.

Once individuals are identified as needing assistance with an SSI/SSDI application, they can be assisted by staff in the jail or prison, with a handoff occurring upon release, or they can be assisted by community providers who come into the facility for this purpose. Often, correctional staff, medical or psychiatric staff, and medical records are administered separately and collaborations must be established within the facility as well as with systems outside it.

Leadership. Starting an SSI/SSDI initiative as part of transition planning requires leadership in the form of a steering committee, with a strong and effective coordinator, that meets regularly. The Mercer County, New Jersey SOAR Coordinator, for example, resolves issues around SSI/SSDI applications that are brought up at case manager meetings, oversees the quality of applications submitted, organizes trainings, and responds to concerns raised by SSA and DDS.

The case manager meetings are attended by the steering committee coordinator who serves as a liaison between the case managers and steering committee. Issues identified by case managers typically require additional collaborations that must be approved at the steering committee level. Leadership involves frequent, regular, and ad hoc communication among all parties to identify and resolve challenges that arise.

It is essential that the steering committee include someone who has authority within the jail or prison system as well as someone with a clinical background who can assure that the clinical aspects of implementation are accomplished (e.g., mental status

exams with 90 days of application, access to records, physician or psychologist sign off on medical summary reports).

Resources. Successful initiatives have committed resources for staffing at two levels. First, staff time is needed to coordinate the overall effort. In the Mercer County example above, the steering committee coordinator is a paid, part-time position. If there is someone charged with overall transition planning for the facility, the activities associated with implementing assistance with SSI/SSDI may be assumed by this individual.

Second, the staff who are assisting with SSI/SSDI applications need to be trained (typically 1-2 days) and have time to interview and assess the applicant, gather and organize the applicant's medical records, complete the SSA forms, and write a supporting letter that documents how the individual's disability or disabilities affect his or her ability to work. Full-time staff working only on SSI/SSDI applications can be expected to complete about 50-60 applications per year using the SOAR approach. Assisting with SSI/SSDI applications cannot be done efficiently without dedicated staffing.

Finally, our experience has shown that it is difficult for jail staff to assist with applications in the jail due to competing demands, staffing levels, skill levels of the staff involved, and staff turnover. Without community providers, there would be few or no applications completed for persons coming out of jails in the programs with which we have worked. Jail staff time may be best reserved for: (1) identifying and referring individuals who may need assistance to community providers; (2) facilitating community provider access to inmates prior to release from jail; and (3) assistance with access to jail medical records.

Commitment. Developing and implementing an initiative to access SSI/SSDI as part of transition planning requires a commitment by the jail or prison's administration for a period of at least a year to see results and at least two years to see a fully functioning program. During the start up and early implementation period, competing priorities can often derail the best intentions. We have seen commitment wane as new administrations took office and the department of corrections commissioner changed. We have seen

staff struggle without success to find time to assist with applications as part of the job they are already doing. We have seen many facilities, particularly state departments of corrections, willing to conduct training for staff, but unwilling or unable to follow through on the rest of what it takes to assist with SSI/SSDI applications.

Training. Training for staff in jails and prisons should include staff who identify and refer people for assistance with SSI/SSDI applications, staff who assist with completing the applications, medical records staff, and physicians/psychologists. The depth and length of training for each of these groups will vary. However, without the other elements discussed above in place, training is of very limited value.

Training in the SOAR approach for jail and prison staff has been modified to address the assessment and documentation of functioning in correctional settings. Training must cover the specific referral and application submission process established by the steering group in collaboration with SSA and DDS to ensure that applications submitted are consistent with expectations, procedures are subject to quality review, and outcomes of applications are tracked and reported. It is important that training take place after plans to incorporate each of these elements have been determined by the steering committee.

Conclusion

People with mental illness face extraordinary barriers to successful reentry. Without access to benefits, they lack the funds to pay for essential mental health and related services as well as housing. The SOAR approach has been implemented in 50 states, and programmatic evidence demonstrates the approach is transferable to correctional settings. Acquiring SSA disability benefits and the accompanying Medicaid/Medicare benefit provides the foundation for reentry plans to succeed.

For More Information

To find out more about SOAR in your state or to start SOAR in your community, contact the national SOAR technical assistance team at soar@prainc.com or check out the SOAR website at <http://www.prainc.com/soar>.

2014 SOAR Outcomes Summary

SSI/SSDI Outreach, Access and Recovery (SOAR) helps states and communities increase access to Social Security disability benefits for people who are experiencing or at risk of homelessness. Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the SOAR Technical Assistance (TA) Center develops and provides training and technical assistance to support the implementation of the SOAR approach.

Since 2006, the SOAR approach has been used to assist more than 42,000 people experiencing or at risk of homelessness with applications for Social Security disability benefit programs—Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).

Of the SOAR-assisted applicants, 65 percent, representing 22,863 persons, were approved for SSI/SSDI upon initial application (Table 1).¹ An additional 3,406 persons, whose applications were denied initially, were approved on reconsideration or appeal (Table 4). Taken together, since 2006, the SOAR approach is responsible for assisting 26,269 persons with accessing Social Security disability benefits.

Decisions on SOAR initial applications were received in an average of 94 days in 2014, a decrease of 6 days from 2013. The SOAR allowance rate has remained constant at 65 percent. This compares to the initial allowance rate of 26.7 percent for all persons aged 18–64 who applied for SSI in 2012.²

We estimate that in 2014 alone, SSI/SSDI for the individuals served by SOAR brought over \$227 million into the economies of participating states and localities. In addition, states report that through SOAR they are

- **Serving individuals who are chronically homeless.** Based on data from 29 states, the individuals served had been homeless for an average of three years.
- **Increasing access to housing.** Twenty-four states report collaborations with supportive housing providers, six of which are new in 2014. Eighteen states report that 50 percent of SSI/SSDI applicants were housed within an average of 23 days.

SOAR Super Stars for 2014

- **Top approval rates.** A “Top Ten” ranking requires that states reported outcomes in 2014 and had at least 100 cumulative decisions since 2006. In order of average approval rate, the Top Ten states are Pennsylvania, Tennessee, Maryland, Washington, North Carolina, Kansas, Oregon, Arkansas, Virginia, and Oklahoma.

- **Consistent capacity.** Eleven states have consistently reported over 100 decisions each year for the past three years. They are Arkansas, Maryland, Michigan, Nebraska, North Carolina, Ohio, Oregon, Pennsylvania, Tennessee, Utah, and Virginia.
- **Most improved.** Florida, Louisiana, and Mississippi show the most improvement in total decisions and approvals in 2014 from what they reported in 2013.

Sustainability

Eighteen states report success in sustaining current or securing new funding for their SOAR programs, including

- The creation of 10 full-time SOAR positions and 5 half-time SOAR positions.
- Legal Action of Wisconsin contributed \$25,000 to implementing SOAR in Wisconsin using Cy Pres funding.
- North Carolina secured funding for 5 new dedicated SOAR caseworker positions throughout the state, bringing the total to 25 full-time dedicated SOAR workers.
- Maryland secured continuing funding for 5 SOAR dedicated case managers and used funding from its Alcohol Tax Appropriation for its Homeless Identification Project to assist people in obtaining identification documents and access to services.

Implementation of Critical Components

States with higher approval rates credit their success to implementing SOAR’s critical components³ and their attention to submission of high quality applications. The five SOAR critical components of application assistance are (1) use of the SSA-1696 Appointment of Representative form, (2) collection and submission of medical records, (3) submission of a Medical Summary Report, (4) physician co-signatures on Medical Summary Reports, and (5) quality review of applications prior to submission. Use of these components statistically increases the likelihood of an approval on initial application for those who are eligible.⁴

¹ The SOAR TA Center requests voluntary submission of SOAR outcomes from states annually from July 1 through June 30 of each year. Unless otherwise noted, these are the data reported in this issue brief.

² SSI Annual Statistical Report, 2013. SSA Pub. No. 13-11827. Washington, DC: SSA, September 2014

³ <http://soarworks.prainc.com/article/soar-model-key-components>

⁴ Based on data from January 15, 2005, to February 14, 2014, extracted from the SOAR Online Application Tracking (OAT) system. Data includes 4,200 application outcomes from 35 states.

Paying attention to SOAR critical components has other benefits as well:

- **Better communication with SSA and DDS.** Based on data from 44 states (representing 5,793 applications), 66 percent of applications were submitted using the

Table 1. 2014 SOAR Assisted Initial Application Outcomes

State	Locality	2014 Decisions	2014 Approvals	2014 Allowance Rate	2014 Average Days	Years of Data	New Cumulative Decisions	New Cumulative Approvals	Cumulative Allowance Rate
Alabama	Birmingham	8	7	88%	88	6	111	83	66%
Alaska	Multiple sites	19	6	32%	176	6	93	61	66%
Arizona	Maricopa County	15	9	60%	108	4	127	69	54%
Arkansas	State	124	85	69%	42	6	590	457	77%
California	Multiple sites	7	4	57%	103	various	15	9	60%
	Sacramento (SMART)*	382	287	75%	70	4	1706	994	58%
	HOPE San Diego	48	36	75%	84	3	127	87	69%
	Santa Clara*	66	57	86%	N/A	4	141	124	88%
	Ventura County	105	51	49%	132	4	202	111	55%
Colorado	State	80	58	73%	97	various	491	324	66%
Connecticut	State	55	30	55%	127	5	184	119	65%
Delaware	State	0	0	N/A	N/A	6	293	212	72%
District of Columbia	District	31	25	81%	119	4	66	56	85%
Florida	State	492	369	75%	58	various	3155	2124	67%
Georgia	State	89	80	90%	78	6	2032	1144	56%
Hawaii	State	5	5	100%	135	3	29	25	86%
Idaho	State	20	13	65%	88	3	98	52	53%
Illinois	State	23	19	83%	75	4	118	85	72%
Indiana	State	0	0	N/A	N/A	6	20	18	90%
Iowa	State	17	11	65%	126	4	56	41	73%
Kansas	Multiple sites	41	36	88%	130	5	549	443	81%
Kentucky	Multiple sites	98	39	40%	139	7	750	480	64%
Louisiana	Multiple sites	93	80	86%	140	5	247	156	63%
Maine	State	0	0	N/A	N/A	3	5	5	100%
Maryland	Multiple sites	155	135	87%	73	5	515	443	86%
Massachusetts	Boston	2	0	0%	85	5	464	267	58%
Michigan	State	255	153	60%	99	6	2204	1317	60%
Minnesota	State	86	32	37%	167	7	1875	1266	68%
Mississippi	Multiple sites	50	30	60%	30	4	70	38	54%
Missouri	Multiple sites	42	16	38%	107	4	79	40	51%
Montana	Multiple sites	10	5	50%	90	3	98	38	39%
Nebraska	Multiple sites	166	101	61%	64	6	706	407	58%
Nevada	State	13	11	85%	185	6	270	191	71%
New Hampshire	Nashua	0	0	N/A	N/A	3	7	6	86%
New Jersey	Multiple sites	66	38	58%	137	6	350	199	57%
New Mexico	State	81	55	68%	105	6	372	238	64%
New York	Multiple sites	81	69	85%	68	various	908	634	70%
North Carolina	State	317	264	83%	106	8	1130	917	81%
Ohio	State	863	412	48%	54	7	3709	1900	51%
Oklahoma	State	79	70	89%	N/A	7	661	477	72%
Oregon	BEST Portland	209	146	70%	74	7	1054	820	78%
	Multiple sites	0	0	N/A	N/A	5	182	92	51%
Pennsylvania	Multiple sites	47	34	72%	51	5	132	86	65%
	Philadelphia (HAP)	158	150	95%	43	7	1343	1330	99%
Rhode Island	State	00	0	N/A	N/A	7	200	154	77%
South Carolina	State	38	21	55%	81	4	92	55	60%
South Dakota	Rapid City	0	0	N/A	N/A	2	71	63	89%
Tennessee	Multiple sites	100	90	90%	80	7	444	353	80%
	Nashville	170	170	100%	37	8	692	678	98%
Texas	State	20	13	65%	128	6	325	219	67%
Utah	State	675	228	34%	184	7	3835	1828	48%
Vermont	State	4	1	25%	45	<1	4	1	25%
Virginia	State	206	149	72%	141	7	873	625	72%
Washington	Vancouver provider	29	17	59%	150	3	60	29	48%
	Veterans	27	22	81%	97	3	227	212	93%
West Virginia	Multiple sites	18	9	50%	61	6	52	31	60%
Wisconsin	Multiple sites	83	45	54%	113	5	777	530	68%
Wyoming	State	37	25	68%	114	4	138	100	72%
TOTALS		5,905	3,818	65%	94		35,124	22,863	65%

*includes reconsiderations and appeals

SSA-1696 Appointment of Representative Form as recommended by SOAR.

- Fewer consultative exams. Of those applications, only 14 percent required a consultative examination.

Working with Veterans

SOAR worked closely with the Veterans Administration and state and local Veteran initiatives to ensure those eligible for SSA benefits were able to apply:

- Twenty-nine states report assisting Veterans with their disability applications.
- Approximately 320 Veterans were helped with their applications using SOAR.
- 2014 saw an increased collaboration with the Supportive Services for Veteran Families (SSVF) program. In July 2014, we found that almost half of the 319 SSVF provider organizations used SOAR as part of their outreach to Veterans.

Collaborations

All 50 states report collaboration with the SAMHSA Projects for Assistance in Transition from Homelessness (PATH) program:

- Dedicated benefits specialists on PATH teams
- SOAR training for PATH outreach and case management staff
- State PATH contacts serve as SOAR coordinators and trainers

SOAR continues to be an essential part of the plans and activities of HUD’s Continuum of Care (CoC) Program. CoCs have begun including SOAR factors in centralized intake and coordinated assessment systems in addition to ensuring that SOAR services are available in the continuum. Since 2012, 26 CoCs have received targeted SOAR technical assistance and five additional CoCs are expected to be added in 2015.

Eighteen states report collaborations with employment and/or work incentive programs. Seven of these were new in 2014: Alaska, Arkansas, Louisiana, Ohio, Pennsylvania, Tennessee, and West Virginia.

Twenty-three states report collaborations with TANF providers and/or General Assistance programs.

Twenty-three states report collaborations with hospitals, including some or all of the following:

- Agreements with medical records departments for expedited records at no cost
- Easy access to needed assessments
- Dedicated benefits specialist positions within the hospital

- Grant funding to support local SOAR programs
- Discharge planning in state hospitals

Twelve states report collaborations with corrections, including

- Jail in-reach and collaboration with parole and probation to coordinate services
- Jail diversion programs
- Pre-release projects in conjunction with county jails
- Training in state departments of corrections
- Two programs, one in Miami, Florida, and one in Ossining, New York, report a combined total of 147 decisions in an average of 25 days with an allowance rate of 90 percent.

Cost Savings

Once an individual is approved for SSI and Medicaid, treatment providers can retroactively bill Medicaid for services provided up to 90 days prior to the SSI protective filing date. This results in reimbursement for previously uncompensated care as well as payment for ongoing treatment. Ten states report \$1.65 million in Medicaid reimbursement, or an average of \$10,465 per person, as a result of SOAR (Table 2). Some states participate in Medicaid’s Administrative Claiming (MAC) program, which helps to defray the cost of certain administrative activities related to providing Medicaid services.

Table 2. 2014 Medicaid Reimbursement

State	Locality	Medicaid Reimbursement	Number of People Reimbursement Based On
Alaska	Anchorage, et al.	\$9,261	1
Arkansas	Clinton, et al	\$900	1
	LRCMHC	\$41,483	11
Florida	Circuits 15 and 19	\$1,040	1
	Park Place	\$3,009	1
	Fort Pierce (OAT)	\$1,040	1
Georgia	Region 5	\$721	10
Kansas	Leavenworth	\$7,790	1
	OAT	\$99,435	18
Missouri	PATH	\$274,587	17
Nebraska	Southeast Nebraska	\$4,085	1
	Center Pointe	\$5,327	1
	Northeast NE	\$3,700	1
North Carolina	Regional Med Center	\$197,000	52
	Duke Hospital	\$551,482	14
	Center Pointe	\$201,244	9
	WakeMed Hospital	\$250,000	15
Tennessee	OAT	\$1,140	1
Washington	OAT	\$197	2
Totals		\$1,653,440*	158

* Per person average reimbursement: \$10,465

Some communities offer people who are disabled and have low incomes a monthly cash stipend to help cover essential living expenses while they apply for SSI. This general or interim assistance is provided while the SSI application is pending. Once approved, the state or county is reimbursed

out of the individual's SSI retroactive payments for the income provided (Table 3). Communities can use these funds to support others who need assistance or to fund SOAR efforts to transition people from public assistance to SSI. Communities were reimbursed, on average, \$1,217 per person approved for SSI.

Table 3. 2014 General/Public Assistance Reimbursement

State	Locality	GA	Number of People
California	San Luis Obispo	\$1,966	3
Colorado	OAT	\$1000	2
Florida	OAT	\$200	5
Kansas	OAT	\$1,979	4
Minnesota	State	\$18,981	8
Nebraska	Center Pointe	\$7,650	1
	NE	\$92	1
New Jersey	Bergen	\$4,410	2
New Mexico	OAT	\$245	4
Totals		\$36,523*	30

*Per person average reimbursement: \$1,217

Table 4: 2014 SOAR-Assisted Appeals Outcomes

State	Locality	2014 Total Appeals	2014 Appeals Approvals	2014 Allowance Rate	2014 Appeals Average Days	Years of Data	2014 Cumulative Appeals Decisions	2014 Cumulative Appeals Approvals	2014 Cumulative Allowance Rate
Alabama	Birmingham	1	1	100%	388	4	4	4	100%
Alaska	State	9	4	44%	160	3	19	8	42%
Arizona	Maricopa Co.	1	1	100%	76	4	49	29	59%
Arkansas	State	10	5	50%	39	4	83	34	41%
California	Multiple sites	19	12	50%	93	3	119	91	76%
Colorado	State	5	3	60%	N/A	5	69	60	87%
Connecticut	State	3	3	100%	187	3	53	17	32%
District of Columbia	State	4	2	50%	78	4	29	17	59%
Florida	State	78	41	53%	53	5	298	160	54%
Georgia	State	11	7	64%	102	4	443	153	35%
Hawaii	State	4	4	100%	226	2	5	5	100%
Idaho	State	13	7	54%	399	3	37	16	43%
Illinois	Cook Co.	1	1	100%	122	3	13	11	85%
Iowa	State	10	7	58%	93	4	32	18	56%
Kansas	State	6	3	50%	132	5	91	61	67%
Kentucky	State	30	12	40%	118	5	214	125	58%
Louisiana	State	15	11	73%	254	4	94	56	60%
Maryland	State	36	30	83%	92	5	153	117	76%
Massachusetts	State	1	0	0%	88	1	1	0	0%
Michigan	State	21	18	86%	307	5	650	444	68%
Minnesota	State	20	3	15%	217	4	54	313	580%
Mississippi	State	2	2	100%	N/A	3	7	3	43%
Missouri	State	4	2	50%	60	4	14	11	79%
Montana	State	1	1	100%	60	3	38	17	45%
Nebraska	State	50	20	40%	48	5	284	126	44%
Nevada	State	4	4	100%	N/A	4	119	95	80%
New Jersey	State	15	13	86%	54	5	115	73	63%
New Mexico	State	18	8	44%	140	4	55	22	40%
New York	State	9	8	89%	630	4	18	11	61%
North Carolina	State	83	59	71%	N/A	5	337	257	76%
Oregon	Portland	90	40	80%	N/A	5	356	185	52%
Pennsylvania	State	121	60	50%	27	1	121	60	50%
Rhode Island	State	0	0	N/A	N/A	3	167	103	62%
South Carolina	State	21	7	33%	72	3	43	19	44%
Tennessee	State	5	3	60%	76	4	16	9	56%
Texas	State	5	3	60%	72	2	18	9	50%
Utah	State	0	0	N/A	N/A	3	1585	497	31%
Virginia	State	35	17	49%	221	5	143	80	56%
West Virginia	State	8	5	63%	49	3	77	20	26%
Wisconsin	State	20	9	45%	293	4	138	69	50%
Wyoming	State	0	0	N/A	N/A	3	5	3	60%
Totals		789	436	55%	119		6,164	3,406	55%

⁵ http://www.ssa.gov/appeals/DataSets/01_NetStat_Report.html

Hearings and Appeals

States are increasingly using the SOAR approach to assist with applications in the appeals process, both for reconsiderations and hearings by an Administrative Law Judge (ALJ). The number of states using SOAR at the appeals level and tracking their outcomes has nearly tripled since 2010. In 2014, 789 SOAR-assisted decisions were rendered at the appeals level, with 55 percent of all reconsiderations or ALJ hearings resulting in an allowance (Table 4). SOAR assisted appeals take an average of 119 days compared to the national average of over one year.⁵

For More Information

For more information about SOAR or the SOAR Technical Assistance Center, go to <http://soarworks.prainc.com> or email soar@prainc.com. Follow us on Facebook at <http://www.facebook.com/soarworks> or on Twitter @soarworks.

JREC CLIENT SERVICES

MONTH : SEPTEMBER 2015	CURRENT MONTH	YTD
CASE MANAGEMENT:		
CLOTHING	75	661
FOOD ASSISTANCE	63	627
JREC CLIENT TRANSPORT	15	302
EMPLOYABILITY		
CAREER DEVELOPMENT ORIENTATION	6	70
EMPLOYER CONTACT BY JOB DEVELOPER	12	120
JOB SKILLS ASSESSMENT	4	55
MOCK INTERVIEW	4	102
RESUME DEVELOPED	3	76
CLIENTS EMPLOYED -JOB DEVELOPER (VIOLENT & SEX OFFENDERS)	3	71
CLIENTS EMPLOYED -CORRECTIONAL SERVICES COUNSELOR	23	243
REFERRALS:		
CLARA WHITE - JANITORIAL & CULINARY TRAINING	4	14
DISMAS - ATTENDED	14	60
GED/FSCJ/EDUCATION	33	115
HEALTH CARE REFERRAL	13	124
READY FOR WORK	6	61
VETERANS ASSISTANCE	1	15
VISION IS PRICELESS	12	97
VOCATIONAL REHABILITATION	0	22
WOMENS CENTER	6	21
CLIENT EXPENDITURES		
BIRTH CERTIFICATE	2	63
BUS TRANSPORTATION : BUS PASSES	221	2445
DIVORCE/MARRIAGE RECORD	0	2
FLORIDA DRIVER'S LICENSE	6	74
FLORIDA ID CARD	7	150
HYGIENE KIT	32	284
HOUSING - # OF PEOPLE HOUSED IN CURRENT MONTH	55	429
HOUSING - TOTAL # OF DAYS HOUSED THIS MONTH	943	6387
# OF CLIENTS SERVED IN MH/SA TREATMENT	41	346
# OF HOURS SPENT IN MH/SA TREATMENT	158.5	1168.5
FELONY REGISTRATION		
FELONY REGISTRATION TOTAL REGISTERED	852	9531
SEX OFFENDERS REGISTERED	98	5064
1ST TIME PREDATOR REGISTRATION	5	41
REPEAT PREDATOR REGISTRATION	93	1157
HOMELESS TRACKING	64	608
MONTHLY CLIENT RECAP:		
NEW CLIENTS TOTAL	61	644
JSO	0	10
FDOC	61	634
RC (RETURNING CURRENT YR)	142	1606
RP (RETURNING PRIOR FY)	8	103
INFO ONLY	518	4875
INACTIVES	23	245
EXITING CLIENT STATUS		
SUCCESSFUL COMPLETERS	37	360
NON-COMPLETERS	9	339
NON-COMPLIANT	7	78
EXITING CLIENT TOTAL	53	777



Providing tools for rebuilding lives

SCORE offers an array of evidenced-based programs giving ex-offenders a "second chance" to achieve success in their lives.



"The measure of a man isn't the sum of how much he owns or knows; it's to be found in who he's becoming. It's less about his past progress, and more about the direction he's heading."

The Mission of SCORE Promotes:

- Public Safety
- Reduces Recidivism
- Prepares Ex-offenders for Success
- Helps Ex-offenders Transition From Prison/Jail to Their Community

Programs

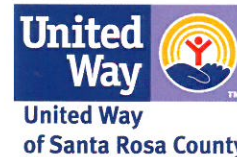
Thinking for Change • Anger Management
 Personal Finance • TABE/GED
 The Creating Lasting Family Connections
 Fatherhood Program • Computer Skills 101-102
 Nutrition, Exercise, Wellness
 Vocational and Jobs Skills Training



To learn more about SCORE contact:
Alton Johnson, Executive Director
850.623.4507 or 850.686.4409
ajohnson@scoredsr.org

Visit our website at www.scoredsr.org.

SCORE Development, Inc. is a program of



Second Chance Outreach Re-entry
 and Education Development, Inc.
 6479-A Caroline Street • Milton, FL 32570

No
document
available.

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10/9/2015
Meeting Date

Bill Number (if applicable)

Topic STAKE HOLDER

Amendment Barcode (if applicable)

Name Agnes Furey

Job Title RETIRED

Address 3053 RAN VALLEY CIRCLE

Phone 850 321-7756

Street TALLAHASSEE

Email agnesfurey@gmail.com

City FL State 32308 Zip

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing ACHIEVE HIGHGROUND

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date

Bill Number (if applicable)

Topic RE-ENTRY

Amendment Barcode (if applicable)

Name JIM DEBEAUGNICE

Job Title CONSULTANT

Address 1778 VINEYARD WAY

Phone 850-508-8908

Street TALLAHASSEE

Email jim-debeaugnice@comcast.net

City FL State 32317 Zip

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing CHRISTIAN PRISON MINISTRIES / BRIDGES OF AMERICA

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

7 Oct 15
Meeting Date

Bill Number (if applicable)

Topic Re-entry Programs

Amendment Barcode (if applicable)

Name Barney Bishop III

Job Title President & CEO

Address 204 S. Monroe St., Ste. 201

Phone 850/577-3032

Tallahassee FL 32301
City State Zip

Email barney@smartjusticealliance.org

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Fla. Smart Justice Alliance

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10.07.15
Meeting Date

Bill Number (if applicable)

Topic Re Entry

Amendment Barcode (if applicable)

Name Brunie Emmanuel

Job Title Director: Therapeutic Community

Address 1211 W. Fairfield Dr.

Phone 850.261.1251

Pensacola FL 32501
City State Zip

Email BEmmanuel@pathwaysforchange.org

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Pathways for Change

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10.7.15

Meeting Date

Bill Number (if applicable)

Topic Reentry

Amendment Barcode (if applicable)

Name Sheila K. Reed

Job Title Chief Operating Officer

Address 6479-A Caroline Street

Phone 850.736.0944

Street Milton, FL

Email Sreed@scoredsr.com

City Milton State FL Zip 32571

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Second Chance Outreach Re-entry Education and Development, Inc.

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

THE FLORIDA SENATE
APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date

Bill Number (if applicable)

Topic Re-entry

Amendment Barcode (if applicable)

Name KEVIN EASON

Job Title General Contractor Project Superintendent

Address 2001 W. Jordan Street

Phone 850-483-7822

Street Pensacola

Email Kevin.Eason@gmail.com

City Pensacola State FL Zip 32501

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Re-entry Alliance of Pensacola (REAP)

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

BRIDGES OF AMERICA FACILITIES (FLORIDA)

Residential Substance Abuse Treatment Programs (RSATP)

The Auburndale Bridge RSATP

(Female – 71 beds)
602 Melton Avenue
Auburndale, FL 33823
863.967.8190

The Jacksonville Bridge RSATP

(Male – 39 beds)
601 Agmac Avenue
Jacksonville, FL 32254
904.345.5959

The Orlando Bridge RSATP

(Male – 91 beds)
2025 Mercy Drive
Orlando, FL 32808
407.926.8134

Transition Centers (TC) & Community Re-Entry Services Transitional Housing (CRS)

The Bradenton Bridge TC

(Female – 84 beds)
2104 63rd Avenue
Bradenton, FL 34203
941.932.9030

The Broward County Bridge TC

(Male – 112 beds)
5600 NW 9th Avenue
Ft. Lauderdale, FL 33309
954.358.2650

The Jacksonville Bridge TC

(Male – 165 beds)
601 Agmac Avenue
Jacksonville, FL 32254
904.345.5971

The Orlando Bridge TC (Male – 82 TC/54 CRC beds)

2041 Mercy Drive
Orlando, FL 32808
407.218.4575

Polk County CRS 206 Pilaklakaha Avenue Auburndale, FL 33823 863.967.3295

Broward County CRS 302 SW 2nd Street Pompano Beach, FL 33060 954.586.8534

Community Release Centers (CRC)

The Bradenton Bridge CRC

(Female – 36 beds)
2104 63rd Avenue
Bradenton, FL 34203
941.932.9030

The Broward County Bridge CRC

(Male – 50 CRC/10 PP beds)
5600 NW 9th Avenue
Ft. Lauderdale, FL 33309
954.358.2650

The Cocoa Bridge CRC

(Male – 84 beds)
585 Camp Road
Cocoa, FL 32927
321.338.4550

The Jacksonville Bridge CRC

(Male – 140 beds)
601 Agmac Avenue
Jacksonville, FL 32254
904.345.5971

The Lake City Bridge CRC

(Male – 151 CRC/5 PP beds)
1099 NW Dot Gln
Lake City, FL 32055
386.628.5130

The Orlando Bridge CRC

(Male – 152 beds)
2011 Mercy Drive
Orlando, FL 32808
407.770.0980

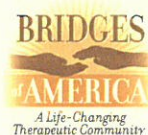
The Santa Fe Bridge CRC

(Male – 156 beds)
2901 NE 39th Avenue
Gainesville, FL 32609
352.240.0850

*Bridges Correctional Treatment
provides Substance Abuse Programming
in the following Department Community
Release Centers: Atlantic, Daytona,
Fort Pierce, Opa Locka, Orlando
Women's, and West Palm Beach.*

The Turning Point Bridge CRC

(Male – 99 WR/1 PP bed)
400 SW 2nd Street
Pompano Beach, FL 33060
954.580.0949



RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAMS

Bridges of America has three Residential Substance Abuse Treatment Programs built on the Therapeutic Community Concepts. The peer-led, peer-driven environment encourages clients to become active participants in their recovery. These are adult male and female felony drug offenders who have been sentenced by the local courts to participate in drug treatment as a deterrent from incarceration as a condition of probation. The program offerings in each program vary to best meet the needs of the persons served.

The program includes three phases:

Phase I – Intensive Substance Abuse Treatment
(2 to 3 months)

- Accountability and therapeutic groups
- Addiction education
- Individual counseling sessions
- Organized recreation
- Substance abuse treatment

Phase II – Employment
(3 to 4 months)

- Employment education
- Therapeutic groups
- Employment in community

Phase III – Community Re-Entry
(1 to 2 months)

- Recovery Maintenance
- Re-Entry into the community

Programs and Value-Added Services may include:

- 12 and 12 Workshops
- AA Big Book Meeting
- Addiction Education
- Adult Basic Education
- Alcoholics Anonymous
- Anger Management
- Bible Studies
- Bridge Builders
- Changing Criminal Thinking
- Chaplaincy Services
- Community Re-Entry Services
- Conflict Resolution
- Creative Arts
- Domestic Violence Education
- Employment Skills & Services
- Family Development & Reunification
- Florida Ready to Work
- Grief Counseling
- Health & Fitness
- HIV/AIDS Education
- High School Diploma
- Job Placement Assistance
- Life Transitions
- Mapping Your Steps
- Meditation Training
- Mentoring
- Money Sense
- Narcotics Anonymous
- National Career Readiness
- Occupational Safety & Health Administration Certification
- Organized Recreation
- Parenting Education/Group
- Purpose-Driven Life
- Recovery Maintenance Skills
- Save Our Selves
- Self-Esteem
- Sexual Abuse Survivor Support Groups
- Smoking Cessation
- Therapeutic Community Concepts
- Thinking for a Change
- Transition/Re-Entry Services
- Victim Awareness
- Work Source



THERAPEUTIC COMMUNITY TRANSITION/RE-ENTRY PROGRAMS

Bridges of America's Substance Abuse Transition Re-Entry Program is a Therapeutic Community (TC) providing intensive substance abuse treatment services for minimum custody inmates. The program assists inmates in making a successful transition from the correctional institution to their community. Designed to reduce recidivism rates in the Florida prison system, the goal of the re-entry program is to transform inmates into productive citizens.

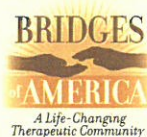
The foundation of the program is the Therapeutic Community Concepts, which are essential to maintaining a drug-free lifestyle in social contexts. With clinical supervision, this peer-led, peer-driven environment encourages the men to become active participants in their recovery. Each program participant follows a multidisciplinary treatment plan customized to meet his or her individual needs.

Eligible inmates usually have 24 to 36 months remaining on their sentence when entering this program. Upon completion of the Transition Re-Entry Program, inmates become eligible for the Community Release program*, where they are gainfully employed during the day and continue their treatment at night.

Programs and Value-Added Services may include:

12 and 12 Workshops	Employment Skills & Services	Occupational Safety & Health Administration Certification
A+ Computer Certification	Expressive Arts	Organized Recreation
AA Big Book Meeting	Family Development & Reunification	Parenting Education/Group
ABCs of Finance	Financial Freedom	Peer-to-Peer Academic Tutoring
Addiction Education	Florida Ready to Work	Prison Fellowship
Adult Basic Education	Forklift Certification	Purpose-Driven Life
Alcoholics Anonymous	Gardening in Central Florida	Recovery Maintenance Skills
American Culinary Federation®	Grief Counseling	Save Our Selves
Culinary Fundamentals	Health & Fitness	Self-Esteem
Anger Management	High School Diploma	Serv-Safe® Food Handler
Authentic Manhood	HIV/AIDS Education	Sexual Abuse Survivor Support Groups
Bible Studies	Home Builders Institute®	Smoking Cessation
Bridge Builders	Pre-Apprenticeship Program	Substance Abuse Treatment
Budgeting	Job Placement Assistance	Therapeutic Community Concepts
Changing Criminal Thinking	Life Transitions	Thinking for a Change
Chaplaincy Services	Malachi Dads Program	Toastmasters Chartered Gavel Club
Community Re-Entry Services	Mapping Your Steps	Transition & Re-Entry Services
Computer Basics	Mentoring	Victim Awareness
Conflict Resolution	Money Sense	Work Source Program
Credit & Debt	Narcotics Anonymous	
Domestic Violence Education	Nurturing Parents Group	

*Excluding the Jacksonville Bridge where inmates complete their sentences and are released from the TC.



COMMUNITY RELEASE PROGRAMS

Bridges of America Community Release programs are designed to allow incarcerated inmates nearing the completion of their sentence to acquire gainful employment within the community while safely housed at a community release facility. Community Release gives inmates an opportunity to get their lives back on track through working and participating in substance abuse treatment, education, and vocation coursework at night and on their days off of work.

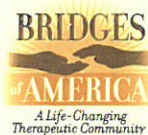
With their earnings, community release inmates are required to pay subsistence for room and board, which saves taxpayers money. Inmates also make court-ordered payments, send money home for family support, and are required to set money aside for savings upon their release.

Bridges of America offers substance abuse treatment, diverse courses, and value-added services that teach problem solving, critical thinking, conflict resolution, and recovery maintenance skills. The program offerings at each facility vary to best meet the needs of the persons served.

Inmates who return to society from community release programs are less likely to commit another crime, reducing the state cost for incarceration. The benefits of community release programs include structure, employment, savings and the increased likelihood that the offender's re-entry to society will have long-term success.

Programs and Value-Added Services may include:

AA Big Book Meeting	High School Diploma
Addiction Education	Job Placement Assistance
Adult Basic Education	Life Transitions
Alcoholics Anonymous	Mapping Your Steps
Anger Management	Mentoring
Bible Study	Money Sense
Bridge Builders	Narcotics Anonymous
Celebrate Recovery	Occupational Safety & Health Administration Certification
Changing Criminal Thinking	Parenting Group
Chaplaincy Services	Prison Fellowship
Commercial Driver's License Education	Purpose-Driven Life
Community Re-Entry Services	Recovery Maintenance
Computer Basics Course	Save Our Selves
Conflict Resolution	Smoking Cessation
Domestic Violence Education	Substance Abuse Treatment
Employment Skills & Services	Therapeutic Community Concepts
Family Development & Reunification	Transition/Re-Entry Services
Florida Ready to Work	Victim Awareness
Forklift Certification	Work Source
Grief Counseling	
HIV/AIDS Education	



COMMUNITY RE-ENTRY SERVICES TRANSITIONAL HOUSING PROGRAM

The Bridges of America Community Re-Entry Services Transitional Housing Program provides individuals with a positive, safe, and drug-free residence where they can make a successful transition to independent living. Predicated on an environment that builds the necessary skills for a solid recovery, transitional housing maintains a positive recovery community to assist residents in becoming productive citizens. Admission to the transitional housing program is voluntary. Anyone may refer an individual to the program.

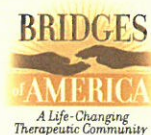
Individuals may be eligible for our transitional housing program if they meet these requirements:

- Have been released from prison (typically 120 days or less)
- Abstinent from drug and alcohol and desire to live in a recovery community
- Encouraged to have successfully completed a treatment program

Residents are required to:

- Remain drug and alcohol-free
- Abstain from sex on property
- Refrain from violence and criminal activity
- Maintain their apartments and complete assigned chores

Further, individuals who have successfully completed the Transitional Housing Program may be permitted to extend their residence (on a self-pay basis) toward making a successful transition to independence, based on space available and staff approval.



BRIDGES OF AMERICA HISTORY

Founded in 1980, Bridges of America is the largest, oldest and most successful private provider of re-entry programming in the state of Florida, providing a continuum of care in Residential Substance Abuse Treatment Programs, Transition Centers, Community Release Centers, and Community Re-Entry Services Transitional Housing for offenders, ex-felons and probation populations.

Frank Costantino, an ex-felon who was released in 1972 from the Florida Department of Corrections after serving time for burglary, opened up the first after-care resident program in Orlando, Florida, upon determining something was needed between prison and society to bridge the gap. What started as local ministry has now parlayed into a worldwide vision that serves more than 10,000 inmates and offenders annually.

Lori Costantino-Brown, Frank's daughter, took on the leadership role as president and CEO of Bridges of America in 2006 when Frank passed away. Her leadership has enhanced the program to meet the needs of evidence-based treatment in the 21st century. She stands behind Bridges of America's unwavering commitment to provide thousands of felony criminals the opportunity for rehabilitation and reintegration into their communities as law-abiding and tax-paying citizens.

Bridges of America has the proven expertise in successfully addressing the requirements of the criminal justice system as well as in meeting the specialized substance abuse treatment and reintegration needs of criminal justice populations. BOA has contracted with the Florida Department of Corrections since 1980, and has managed more than 125 contracts with the DOC and the Federal Bureau of Prisons, Florida Probation and Parole Services, the county court systems and jails to service criminal justice populations.

BOA, in partnership with the Department of Corrections, developed the Therapeutic Community Drug Treatment Program model that allows offenders to become active participants in their personal recovery from addiction. BOA has proven expertise in successfully addressing the requirements of the criminal justice system as well as in meeting the specialized substance abuse treatment and reintegration needs of the criminal justice population.

The Bridges of America corporate office, operating with a highly experienced team of more than 40 employees, effectively monitors contract compliance through quality assurance indicators, documentation and data collection, staff training, financial controls, and adherence to the Department of Corrections' rules and regulations. They currently manage 13 facilities throughout Florida with an average total daily population of approximately 1,600 inmates and clients. In addition, Bridges Correctional Treatment provides Outpatient, Intervention, and Aftercare Treatment in six Department Community Release Centers (Atlantic, Daytona, Fort Pierce, Opa Locka, Orlando, and West Palm Beach) for a total of 295 program slots.



CHAPLAINCY SERVICES PROGRAM

The Bridges of America Chaplaincy Services Program embraces the belief that every person served should have the proper skills and resources for a successful re-entry into their community. The Chaplaincy Services Program serves as a liaison between Bridges of America and the community by working with family members, volunteers, and other stakeholders to assist clients with maintaining a productive lifestyle. Each Bridges of America facility across the state has a full-time Chaplain on staff and on site.

The Chaplaincy Program embraces a holistic approach to recovery and accommodates the mental (emotional, cognitive), physical, social and spiritual needs of the persons served. Chaplains facilitate a broad range of religious services that allow clients and inmates to pursue individual religious beliefs and practices in a manner that is consistent with the security and good order of the facility. The Chaplain offers spiritual support during times of crisis, grief, and in traumatic situations. While all spiritual programs are voluntary, individuals are encouraged to participate as a part of holistic treatment.

As professionally trained and formally designated faith leaders, Chaplains are responsible for the following:

- Developing religious programs for inmates and clients
- Coordinating all religious activities that take place within the facility
- Providing pastoral counseling and spiritual guidance upon request to those clients and inmates of the chaplain's faith group
- Assisting any clients and inmates with special requests for religious literature, sacred items, holy day observances, dietary needs, or access to an officially credentialed spiritual advisor
- Providing guidance to Facility Directors on any matters of faith expression
- Collaborating with the clinical team by responding to direct referrals for counseling and/or treatment options
- Assuming the lead role in delivering emergency notifications and assisting with any related crisis counseling

Critical Dimensions of Chaplaincy

Religion can be a significant agent of change for many individuals. Thus, Chaplains serve as critical staff members that assist clients and inmates who choose this path to the beliefs and practices of their faith. Chaplains work in collaboration with other clinical staff in support of formal treatment programs within the four-dimensional model used in Bridges facilities:

1. Personal Development

- Maintaining a healthy spiritual relationship
- Maintaining effective personal relationships
- Sustaining an active agenda for professional development

2. Pastoral Ministry

- Sharing the good news of God's love
- Offering supportive counseling
- Leading worship
- Providing religious instruction
- Promoting spiritual growth
- Maintaining a ministry of presence within the family
- Building relationships with staff

3. Administrative

- Developing and maintaining an institutional plan
- Developing volunteers: recruiting, training, supervising, and mentoring
- Interfacing with organizational and institutional leadership
- Facilitating all recognized faith groups

4. Community

- Fostering community awareness and partnerships
- Educating the church and community about justice ministry
- Assisting with inmate family concerns
- Assisting with reentry of clients and inmates into the community

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10/7/15
Meeting Date

Bill Number (if applicable)

Topic DOC Staffing + Pay

Amendment Barcode (if applicable)

Name Marny Lewis

Job Title _____

Address _____
Street

Phone _____

City _____ State _____ Zip _____

Email _____

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Self / FDOC Teamsters United

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

10/07/15
Meeting Date

Bill Number (if applicable)

Topic DOC Staffing + pay

Amendment Barcode (if applicable)

Name Christina Bullins

Job Title -

Address -
Street

Phone _____

City _____ State _____ Zip _____

Email _____

Speaking: For Against Information

Waive Speaking: In Support Against
(The Chair will read this information into the record.)

Representing Self / FDOC Teamsters United

Appearing at request of Chair: Yes No

Lobbyist registered with Legislature: Yes No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

S-001 (10/14/14)

CourtSmart Tag Report

Room: LL 37
Caption: Criminal & Civil Justice Appropriations Subcommittee

Case:

Type:
Judge:

Started: 10/7/2015 10:02:17 AM

Ends: 10/7/2015 12:00:18 PM

Length: 01:58:02

10:07:25 AM Scott discusses re-entry program
10:10:41 AM Senator Negron invites panel speakers to take their seats
10:11:24 AM What works what doesn't work? What are we doing with inmates that contain
10:11:47 AM obstacles for them going back into society. These questions are from Sen. Negron
10:13:04 AM Kevin Gay CEO/Founder of Operation New Hope-Jacksonville, FL
10:18:45 AM Kevin Gay CEO/Founder of Operation New Hope-Jacksonville, FL will continue
10:18:53 AM speaking for 10 minutes
10:22:16 AM Senator Negron-What kind of jobs are available-using Worksource-Healthcare,
10:22:58 AM Warehouse, Service. Any obstacles that they face? Challenge-Must have from DOC
10:23:58 AM a dossier of everyone coming out of prison.
10:24:26 AM Any worry about Civil Liability? Absolutely, describes ways to overcome
10:25:14 AM Senator Negron continues with questions
10:26:30 AM Senator Soto with questions. How much does it cost to put a former inmate
10:26:49 AM through the program. Approx. \$5000 for the year. Total amount of time spent in
10:27:11 AM program? 4-10 weeks depending on the track they are on.
10:28:57 AM Senator Negron with questions. How many people are you serving this year?
10:30:28 AM Robert Blount-President of Abe Brown Ministries, Inc. Tampa
10:36:42 AM Senator Negron with a series of questions
10:38:56 AM Senator Evers with a series of questions
10:39:15 AM At what stage are you getting the inmates?
10:45:22 AM Senator Evers continues with questions
10:46:37 AM Senator Negron with a series of questions
10:48:28 AM Senator Soto with questions
10:49:21 AM Senator Bradley with questions
10:53:58 AM Senator Evers with questions
10:55:45 AM Katherine Burns, Jacksonville Re-entry Program, Jacksonville Sheriff's office
11:03:26 AM Senator Soto with a series of questions
11:04:13 AM Mike Griffin
11:06:02 AM Mike Griffin President of Horizon
11:08:18 AM Mike Griffin's son gives statistical information
11:10:48 AM Student of the program gives testimony
11:13:19 AM Senator Soto with a question
11:14:52 AM Senator Hutson with a question
11:16:59 AM Alton Johnson, CEO, Second Chance Outreach Re-entry and Education Development
11:20:47 AM Senator Negron with questions regarding location
11:21:45 AM What are the obstacles you face?
11:22:42 AM Senator Evers with questions
11:22:51 AM Dr. Bill Baler, Professor, FSU College of Criminology and Criminal Justice
11:23:35 AM Senator Bradley with a comment
11:28:20 AM Dr. Bill Bales, Professor Criminology and Public Policy Research, FSU
11:30:00 AM Senator Negron with a series of questions for Dr. Bales to answer
11:33:46 AM Senator Bradley with questions
11:37:56 AM Senator Negron with questions
11:43:46 AM What factors about our country leads us to so many prisoners compared to other
11:44:07 AM countries?
11:46:03 AM Senator Bradley with a comment
11:48:58 AM Senator Soto with a series of questions
11:52:05 AM Senator Negron asks Kim Reilly if she would like to make comments.
11:54:26 AM Senator Evers with questions
11:55:44 AM Final comments by panelists
11:59:02 AM Meeting adjourned