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Office of the Mayor, City of Baltimore
Office of Human Services

Baltimore City Jail Reentry Strategies Project

Final Report

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September 2013

This project reflects a culmination of efforts by many individuals from the Baltimore City Mayor's Office of Human Services, the Department of Public Safety and Correctional Services (DPSCS) and community service providers. These include members of the Mayor's Reentry and Community Action Advisory Council Adult Population Subcommittee, the DPSCS Detention Reentry Model Development Committee, the officers and staff at the Baltimore City Central Booking and Intake (BCBIC) and Baltimore City Detention Center (BCDC and WDC) facilities, the DPSCS Office of Grants, Policy, and Statistics, DPSCS Office of Transition Services, and the men and women who completed the assessment tools so that others may learn from their experiences.

Simply put – there are far too many people to specifically acknowledge their many months and hours of work involved in building this plan. While impossible to thoroughly express my appreciation, please know that this project would not have been completed without the extraordinary efforts of these individuals and the support of both the Mayor's Office and the Department of Public Safety and Correctional Services.

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Executive Summary

Choice Research Associates (CRA) was engaged by the Office of Human Services, Office of the Mayor, Baltimore MD to develop strategies to meet the needs of three primary offender populations at the Baltimore City Detention Center (BCDC) and Baltimore City Central Booking and Intake Center (BCBIC):

1) Individuals detained in Central Booking for short periods (e.g., 24 to 48 hours);
2) Detainees housed for longer periods (e.g., up to 1 month); and
3) Populations who remain in the facility for several months (31 days or more).

The objective of the Baltimore City Jail Reentry Strategies project was to work collaboratively with the Mayor's Office, representatives from the Maryland Department of Public Safety and Correctional Services (DPSCS), and to review the extant literature to incorporate evidence based strategies in the proposed reentry model. Multiple sources of data were utilized to inform this project including Criminal Justice Information System (CJIS) official criminal history data, arrestee self-report of the Proxy Risk Assessment Tool, Offender Case Management System (OCMS) data providing release time and dates and release status, survey data from the Window Replication Project, and LSI-R assessment data of BCDC inmates and detainees.

One of the challenges in jail reentry is to target those most in need of services. The key to overcoming this challenge in formulating this reentry strategy was to gain a better understanding of the population that flows in and out of the BCBIC and BCDC by conducting a pilot of the proxy risk assessment tool. The proxy is a screening tool currently used by a number of jails involved in National Institutes of Corrections/Urban Institute Transitions from Jail to the Community study. The proxy provides a rough proximate of risk level for designation of an arrestee for provision of information, additional assessment, and reentry services. The proxy risk assessment tool consists of 3 questions: 1) what is your current age?; 2) how old were you the first time you were arrested?; and 3) how many prior arrests do you have? (both questions including juvenile arrests). A total score is developed from that information which ranges from 2 to 8, with higher scores indicating an individual is a greater risk for recidivism. Over the week of October 21 to October 28, 2012, 1,028 individuals were arrested and booked in Baltimore City. Of those, 577 completed the proxy, of which 37% scored from 2 to 4 points and were categorized as low risk; 45% scored 5 to 6 points so were medium risk, and 18% scored 7 or 8, and labeled high risk.

The State Identification (SID) numbers of the 1,028 individuals arrested that week were then submitted to be matched to CJIS records and 956 (93%) had records in CJIS. The criminal history data were combined with demographic data to provide a descriptive portrait. Arrestees were on average 33.56 years old, 79% were male, 83% were African American and 16% were Caucasian. The most common type of offender is a person offender (56%), followed by drug (34%), sex offender (5%), and property (4%), based on most serious conviction. On average, arrestees had been criminally involved over 10 years, with an average of 9 arrests (ranging from 1 to 74), 3.7 prior convictions and an average conviction rate of 33% overall.

Data from CJIS were also used to compare the population by risk level. In general, those in the low and medium risk groups were older (which is expected given that older offenders score lower on the proxy than younger offenders). There were also more women in the low risk group compared to the medium or high risk groups. Further, as it takes time to accrue a criminal career, the low and medium risk populations had longer criminal careers than the high risk group. However, the high risk group as a whole consisted of more serious offenders with a higher average incarceration rate and more felony charges and convictions than the low risk group. The low risk group also had fewer weapons charges than the other groups and was more likely to be convicted of crimes classified as "other" – principally nuisance or quality of life type offenses such as rogue and vagabond, pandering, urination in public, trespassing, and consuming alcohol in public. It is also important to note that among the high risk group are low-level habitual misdemeanor offenders (HMOs). HMOs fall into the high risk group due to their repeated cycling in and out of the jail. The inability of the proxy tool to distinguish between the HMO and other high risk individuals supports the contention that those who are classified as high risk should be triggered to complete a more comprehensive assessment tool because HMOs likely need different and/or additional services to address the causes of their repeated offending than others in the high risk group.

The next step was to incorporate CJIS data with release data from the Offender Case Management System (OCMS) to calculate the length of stay in the facility and to further inform the reentry plan based on the flow of individuals out of the facility (e.g., when and what time released; whether released on bond, from court, etc) and further define the population. Not surprisingly, the population and criminal history characteristics of those detained for up to 48 hours were significantly different than those in the facility for longer periods of time on a number of factors. For example, those held more than 31 days in the facility had significantly more serious criminal careers overall. They had longer criminal careers (averaging 12 vs. 10 years); a higher total number of prior arrests (12.06 compared to 8.29 for those released within 48 hours); higher career conviction rates (42% vs. 30%); incarceration rates (72% vs. 49%); and the number of times incarcerated for more than 1 day (5.3 vs. 2.9). In addition, there were significantly fewer women detained in the facility for 3 or more days. Specifically, in the first 48 hours after arrest, the population was 77% male and 23% female; beyond 48 hours, 92% of the population was male and 8% of the population was female. Further, by incorporating both the risk level assignment and release data, the length of stay is consistent with what one would expect -- more low risk individuals are released, and released at an earlier time, than those who are medium and/or high risk.

Another concern with providing reentry services in a jail setting is that individuals may be released at any time of the day or night, particularly within the first 48 hours. This is a barrier for service providers who wish to connect with individuals as they are leaving the facility. Using OCMS data, the day and time of release were examined for those leaving the facility in the first 48 hours. Those results indicate that if service providers wish to staff an information booth at the Eager Street lobby, they should have staff present from 6 PM to Midnight on Sunday, Monday, Thursday, Friday and Saturday, when the highest percentage of those released within 48 hours will leave the facility. Over half (54%) of those released on Sunday leave in this time frame, 38% leave during these hours on Saturday, as do approximately 33% of those on Monday,

Thursday and Friday. Providers might also consider keeping staff available at the jail until 3 AM as the majority of individuals (94%) released after 31 days are released between 9 PM and 3 AM.

OCMS data was then explored by length of stay and by risk level to specifically observe release patterns for medium and high risk individuals. These individuals may be of the most interest to service providers, particularly for those who have begun to establish a relationship through in-reach, and wish to engage the individual immediately into services. The data show that the best times to staff the jail are between 9 PM and 3 AM, when 60% of medium and high risk individuals are released. Further, the best days to staff the Eager Street Lobby would be Tuesday, Wednesday, Thursday, and Saturday evenings.

Self-report data from the Window Replication Study and LSI-R assessments provided specific information on self-defined needs and criminogenic risks of those in BCDC. Data from the Window Replication Study included two populations – 142 individuals surveyed within hours of release from the Eager Street Lobby and Jail Industries Building, and among 200 male detainees housed in the Jail Industries Building in 2009.

The 142 individuals in the release sample were on average 35 years old (ranging in age from 16 to 71), 86% were male, 82% were Black, and 16% White. The average length of stay for the release sample (from date of arrest to date of the survey) was 32 days, ranging from 1 to 325 days, with the majority (71%) released either on bond or own recognizance; 27% left time served; and 2% had charges dropped. The release population self-defined needs were then examined by length of stay. Among the 76 individuals pending release after 48 hours in the facility, transportation was ranked as the most useful service (42%). This was followed by employment (33%), job training (30%) and education/GED (24%). Housing was the next useful service (18%), then food (16%), drug treatment (16%), legal services (12%), mental health care (11%), and basic health care (9%).

The 200 male detainee respondents were on average 39 years old (ranging in age from 18 to 62), 84% were Black, 11% White and 5% identified as other. The majority of detainees (59%) were single, never married; and 75% were fathers. The average length of stay for the detainee sample (from date of arrest to date of the survey) was 67 days, ranging from 1 to 1,024 days. The Window Replication detainee survey also contained the 3 proxy risk assessment questions, allowing categorization of self-defined needs by risk level. While the suggested reentry strategy is to focus resources on medium and high risk individuals, the data helps to inform which services and/or service providers should be targeted for kiosk and/or resource wall materials provided to all those processed and released in Baltimore City. For example, among the 62 individuals classified as low risk, 38 (61%) wanted housing, 34 (55%) employment and 29 (47%) cited dental care. Community organizations providing these and other services such as transportation, food banks, basic health care, and clothing should be the primary target for obtaining and disseminating resource information. For the medium to high risk individuals, community organizations that provide employment and job training services, housing, dental and basic health care, applying for TANF, food stamps, and health care benefits, food, and transportation should be engaged to conduct in-reach sessions.

The DPSCS Office of Transition Services (OTS) volunteered to conduct LSI-R assessments of inmates in BCDC from late 2012 to early 2013. The LSI-R is a risk/needs assessment tool that is used by correctional agencies throughout the United States. The tool is a 54 question interview intended to provide an overall risk score for the individual, as well as a score for ten domains (criminal history; education/employment; financial; family/martial; accommodation (housing); use of leisure time; companions (antisocial peers); alcohol/drugs; emotional; and antisocial attitudes) which are "indicators of the major risk factors identified by theory and research … and many of the subcomponents describe dynamic risk factors … which represent reasonable targets of intervention" (Multi-Health Systems, 2001, p. 1).

A total of 146 LSI-R assessments were completed, 57% were detainees and 43% were sentenced inmates. The 146 SID numbers of those who completed the LSI-R were submitted to obtain CJIS data, and 140 (96%) were matched. The criminal history data were then combined with demographic data. Those who completed the LSI-R were on average 35.79 years old and 50% were male (race data was not available). The most common type of offender is a person offender (58%), followed by drug (31%), sex offender (9%), and property (3%), based on most serious conviction. On average, arrestees had been criminally involved over 11 years, with an average of 10.4 arrests (ranging from 1 to 36), 4.9 prior convictions and an average conviction rate of 45% overall.

Among the 146 individuals assessed with the LSI-R, the average LSI-R score was 22 – ranging from 5 to 44. Among all those assessed, 11% were minimum risk, 49% were medium risk, 35% were high medium risk and 5% were scored as high risk. In addition to the overall score, the subscales provide a snapshot view of the risk/needs of this population. OTS staff designated, among 6 of the subscales, which were the top 3 scales by highest percentage value for each individual assessed. The results indicate that peers is the top ranking issue – with 73% of those assessed scored peers as one of their top 3 needs/risks. Criminal history was the second highest overall with 57% citing it as one of the top 3 needs. This was followed by attitudes (47% listed as one of the top third issues); substance abuse (43%); family/marital (36%) and emotional/personal (35%).

The LSI-R results were also examined by subsample (disposition and gender). However, as the sample is divided, the number of those assessed within each category becomes quite small and caution should be exercised in interpretation of these results. Nonetheless, there are significant gender differences among the detainee population. For both detainees and sentenced inmates, males are more at risk with respect to their criminal history than females. Housing is a greater need/risk factor for women than men. Among detainees only, women have a higher need for assistance with financial and family issues. Among the sentenced, employment and educational needs for men are greater than for women.

The sample was then divided to observe gender by disposition (e.g., women who are sentenced versus women who are detainees); there is only one significant difference. Compared to 16 sentenced women, the 53 women in detention score significantly higher on the emotional/personal domain. Exploring men by disposition, there are 3 differences. The 43 sentenced men have higher financial needs than the 25 men in detention; higher family/marital risk scores and higher accommodation (housing) needs than those in detention.

In summary, sentenced men have greater financial, family, and housing needs than detainee men; and detainee women have greater emotional/personal needs than sentenced women.

The final step in this project was to use the various data sources to estimate the flow of individuals through the facility to inform the overall reentry strategy. Based on these data, we estimate that 53,319 individuals are booked into BCBIC annually, with 39,334 released within 48 hours, 3,223 held for 3 to 30 days, and 10,762 are retained in the facility for 31 days or more. A multiplier was then computed based on those with both a proxy risk assessment and a release status, which provided estimates of the flow of individuals through the facility by length of stay, release status, and by risk level. On an annual basis, 21,477 low risk, 22,957 medium risk, and 8,875 high risk individuals are estimated to be processed through BCDC. Among those individuals detained less than 48 hours – 13,138 low risk individuals will be released on their own recognizance, as will 11,222 medium risk, and 3,011 high risk individuals. There are an estimated 3,618 low risk, 4,205 medium risk and 1,956 high risk individuals who will be bailed out of the facility within 48 hours.

For those in the facility from 3 to 30 days, we estimate that 538 low risk, 1,030 medium risk, and 672 high risk people will be bailed out within 3 to 30 days, as will the bulk of those who are medium and high risk estimated to depart the facility on expiration (72 medium, and 146 high risk) annually. A fair number will be released from court within this time frame – 164 low risk, and 164 medium risk, as well as 54 high risk individuals who will depart the facility from court within the first 30 days.

Among those who remain in the facility 31 days and beyond – a small number will be released from court (235 are low risk, 623 medium risk, and 235 high risk). An estimated 107 low risk, 436 medium risk, and 222 high risk individuals will be bailed out after spending 31 days or more in the facility. The distribution by risk level of the remainder of detainees housed in the facility for 31 days or more are estimated as 2,832 low risk, 3,983 medium risk, and 2,036 high risk. These medium and high risk populations would be the most appropriate target for intensive and comprehensive reentry programming.

The proposed reentry strategy includes six distinct tracks based on level of risk and length of stay. These strategies range from passive provision of resource information (e.g., via a resource wall), to all those who are released within 48 hours, regardless of risk level; to staff guiding BCDC inmates and detainees to develop a reentry plan, to in-reach by community service providers for those designated as medium risk who remain in the facility for more than 31 days; to conducting a comprehensive assessment tool with all those categorized as high risk, and developing a reentry plan to meet those identified risks/needs and targeting reentry programming (see Figure 1 for a summary of the proposed strategies and target populations).

The members of the Mayor's Office Adult Population Subcommittee were tasked to discern barriers to the effective implementation of a reentry strategy, and to brainstorm solutions to these issues in collaboration with the DPSCS Detention Reentry Model Development Committee. One of the critical barriers concerns the correctional staff and the culture of the custodial environment. Key to this discussion is the issue of legitimacy, or procedural fairness. Procedural fairness is related to the treatment of people with dignity and respect, influencing their view of

the legitimacy of group authority, and ultimately affects their obedience to group norms. Studies have found that individuals who feel they have been treated fairly are less likely to engage in criminal behaviors (see for example Paternoster, Brame, Bachman & Sherman, 1997). Franke, Bierie, & McKenzie (2010) conducted a randomized experiment in two DPSCS facilities and found that fair treatment from correctional staff promotes legitimacy, while negative experiences worsen perceptions of fairness. It is also clear that all DPSCS staff that interacts with the population will need to be engaged and believe in the value and viability of a jail reentry effort. One possibility suggested by the Adult Population Subcommittee is to develop and include a reentry training module in the annual in-service training program non-core requirement to address both cultural concerns (including gender-specific and trauma informed) and to encourage staff to engage detainees and inmates into reentry services.

Another barrier identified by community service providers is that it is difficult to provide services when, despite having made arrangements prior to their scheduled time, they were delayed or denied entry into the facility. The suggested solution was to relay program and service provider schedule information to custody staff during roll call to ensure timely access to the facility. Service providers would also benefit from having a regular contact person at the facility and a protocol for resolving same-day facility entry issues. At the same time, service providers need to have a solid understanding of the rules and regulations related to interacting with inmates. It was suggested that the Inmate Handbook needed to be updated.

The number of individuals processed through the jail on an annual basis, and the collateral consequences of continued engagement in the criminal justice system on these individuals, their families, and the community emphasize why implementing a jail reentry strategy is critical. A focused comprehensive reentry strategy, such as the one proposed, which is data informed, evidenced-based, and continually monitored for fidelity to the model and impact on outcomes is a sensible approach. Implementation of such a strategy aligns with the vision of DPSCS as a national leader in addressing difficult issues by building on the strengths of staff, use of technology, and interagency cooperation. Finally, this effort speaks most strongly to the value of human life; to provide a chance for those in the Baltimore City Jail and the community beyond.

Figure 1: Proposed Reentry Strategies by Track and Target Population

Reentry Strategy	Track	Target Population: Low Risk and All Released <48 Hours	Med Risk 3 to 30 Days	Med Risk >31 Days	High Risk 3 to 30 Days	High Risk >31 Days
Monthly Estimated Number by Risk and Length of Stay		**3,608**	**124**	**422**	**79**	**209**
Resource Information	1	X	X	X	X	X
Self-Service or Guided Snapshot Reentry Plan	2		X			
Guided Snapshot Reentry Plan with Identification of Specific Providers	3, 4			X		
Comprehensive Assessment	3, 4				X	X
Reentry Plan based on Comprehensive Assessment With Identification of Specific Providers	3, 4				X	X
Community Service Provider In-Reach Fair	3, 4			X	X	X
Prioritize Community Provider Pre-Release Appointments	3, 4				X	X
Those who need Substance Abuse Treatment or HIV Aftercare:						
Encourage Connection In-Reach Fair and/or Staff Facilitate Appointment for Post-Release Services	4			X		X
Staff Follow-up Service Linkage	4				X	X
Others Identified at Pre-Trial by Medical Staff						
Medical Discharge Planning and Flag Reentry Services Referral and Individualized Case Plan and Care Coordination with Community and Post-Release Follow-up DPSCS Community Supervision (If Applicable)	5		X	X	X	X
Reentry Programming Based on Assessment+	6		X*	X*	X	X

+Target population not exclusive to Track 6 – also in Tracks 2 to 5 *Waitlist if programming space is limited

"We will be known for our belief in the value of the human being, and the way we protect those individuals, whether they are members of the public, our own employees, those we are obligated to keep safe and in custody, or victims of crime."
Vision Statement, Maryland Department of Public Safety and Correctional Services[1]

Section I: Project Description

Choice Research Associates (CRA) was engaged by the Office of Human Services, Office of the Mayor, Baltimore MD to develop strategies to meet the needs of three primary offender populations at the Baltimore City Detention Center (BCDC) and Baltimore City Central Booking and Intake Center (BCBIC):

4) Individuals detained in Central Booking for short periods (e.g., 24 to 48 hours);
5) Detainees housed for longer periods (e.g., up to 1 month); and
6) Populations who remain in the facility for several months (31 days or more).[2]

The objective of the Baltimore City Jail Reentry Strategies project was to work collaboratively with the Mayor's Office, representatives from the Maryland Department of Public Safety and Correctional Services (DPSCS), and to review the extant literature (Section II) to incorporate evidence based strategies in the proposed Reentry model. Multiple sources of official and self-report data were utilized to inform this project.

From February 2012 through November 2012, CRA attended both the Mayor's Office Adult Population Subcommittee and the DPSCS Detention Reentry Model Development Committee (see Appendix A for a copy of the chart outlining the structure, tasks, and information flow between these two groups). Information from both of those activities was considered in the development of the model strategies. Two key documents from those efforts are attached in Appendix B and Appendix C.

As noted, both official data and self-report data were utilized in this project. Official data, provided from DPSCS Central Region Statistics Department, were analyzed to determine the number of individuals and the process flow through the jail. Self-report data was generated through an agreement with Baltimore City Central Booking and Intake Center (BCBIC) to conduct a pilot of the proxy risk assessment tool during the week of October 21 through October 28, 2012. This self-report data was analyzed and a summary is provided below (Section III). Data was also obtained from the DPSCS Offender Case Management System (OCMS) to provide additional information as of March 2013 of those arrested during the proxy pilot time period including demographic data (date of birth, race, gender) release status (released on bail, released on own recognizance, released from court, released without charge, and committed) date and time the individual was released, and primary charge (Section IV).

[1] http://www.dpscs.state.md.us/aboutdpscs/

[2] The initial goal was to include sentenced inmates who remained in the facility for longer than 31 days, however, the focus of this project evolved to include principally those who completed a proxy risk instrument, and we unable to identify which of those individuals remaining the facility were sentenced versus those who were detainees.

This project was also informed by two additional self-report data sources (Section V). First, survey data from the Window Replication Project, a public-private partnership between Catholic Charities of Baltimore, Baltimore City Mayor's Office on Criminal Justice, Power Inside, and Choice Research Associates were included to specifically explore the needs of respondents based on length of stay in the facility. Secondly, the DPSCS Office of Transition Services conducted assessments of 73 men and 73 women who were detained or sentenced to BCDC using the Level of Service Inventory Revised (LSI-R). The LSI-R allows for a greater understanding of the needs and issues for this sector of the jail population as the Window Replication study surveyed only a few women (release sample only) and there were no sentenced individuals in the study.

Finally, DPSCS provided Criminal Justice Information System (CJIS) official criminal history data for individuals arrested during the week the proxy risk assessment was completed, and for those who completed the LSI-R. In turn, this data was used to estimate the number of individuals flowing through the facility annually (Section VI) and formed the basis of the proposed reentry strategies (Section VII). Barriers to implementation are explored in Section VIII.

Report Overview

This report will detail the methodology and process to obtain information related to the project objectives and to support the final recommendations, including findings from the literature review, a discussion of a few innovative programs, analysis of Window Replication, LSI-R, DPSCS and proxy pilot data, as well as key points from the Mayor's Office Adult Population Subcommittee and the DPSCS Detention Reentry Model Development Committee meetings. Additional resources will also be highlighted to assist in the implementation of jail reentry strategies.

Methodology and Process

This report is based on the following activities:

- A review of the literature found through a search of on-line databases (including University of Maryland library, National Institute of Corrections (NIC) and Google Scholar) with the following phrases: jail reentry, jail reentry model, reentry model program, and specifying jail (in the NIC overall "offender reintegration" topic). The need to specify "jail" in these searches is evident given the vast number of articles and information available on this topic. Many articles were only tangentially related to the task, while others were too specific in that they focused on a narrow population or singular topic (e.g., HIV/AIDS), and thus were quickly reviewed but may not have been included in the final write-up. The work of the NIC and Urban Institute Transitions from Jail to Community initiative heavily influenced the final proposed strategies.

- Highlighting innovative strategies used by other states including use of the proxy risk instrument to triage short time detainees into services and/or additional assessment and Kentucky's Reentry Support Hotline.

- An examination of data provided by Cortez Rainey, Director of Research and Statistics, Department of Public Safety and Correctional Services, Division of Pretrial Detention and Services, Office of the Commissioner in August 2012 to determine population flow through the facility both overall and by unique individuals (e.g., the first time the person is booked, they are counted as unique, additional bookings are not counted as they are considered a duplicate record) as well as an extrapolation from other analyses conducted by Mr. Rainey to refine the number of individuals by length of stay.

- Review of meeting minutes of the Mayor's Reentry and Community Action Advisory Council Adult Population Subcommittee meeting and the DPSCS Detention Reentry Model Development Committee meeting. These committees began in February 2012 and April 2012, respectively, and continue to meet to date.[3]

- Review of the Mayor's Adult Population Subcommittee Partnership Development to Overcome Service Gaps and Barriers at BCDC document (Appendix B). This draft document summarizes and highlights a number of brainstorming and problem solving discussions held by members of the Mayor's Adult Population Subcommittee with regard to the barriers – often for community service partners – in providing services at BCDC.

- Review of the DPSCS "Reentry Process from Intake Through Sentence Expiration" (Appendix C) and the DPSCS "Reentry Concept A Release Data Driven Process" flow charts as well as the current screening instruments used by BCDC to inform the population flow discussion.

- Analysis of the proxy risk assessment pilot instrument (Appendix D) for the 626 individuals who were arrested and who completed the proxy assessment during one week in Central Booking (October 21 to 28, 2012). This pilot provided information for those arrested in that time period to test the possibility of using the proxy as a way to identify higher risk individuals for in-reach by community service providers and to triage those for additional assessment.

- Analysis of OCMS data of 1,028 individuals arrested during the proxy risk assessment tool pilot period to further inform the discussion of arrestee flow through the facility.

- Analysis of CJIJS criminal history data provided by DPSCS for the 956 men and women arrested during the proxy pilot period.

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[3] Not all of the activities and efforts of these respective committees are discussed in this strategy report. For instance, the DPSCS Detention Reentry Model Development Committee meeting notes indicate a number of new initiatives that are in the process of implementation and/or are under consideration. One project is the Baltimore City Department of Social Services has trained DPSCS staff on the Service Access Information Link (SAIL). This is a web-based screening and application tool for completion of food stamps, medical assistance, and temporary cash assistance where applications can be completed and processed and expedited, so that benefits will be available within 24 to 48 hours of release (January 22, 2013). Another important project is the Mayor's Office of Human Services Housing Voucher Program for 200 former offenders. Ex-offenders released from prison are eligible for up to 90 days from release (April 16, 2013). Finally, another initiative under consideration is the "Welcome Home" shuttle to provide transportation after-hours (5 PM to 7 AM) for those released from Baltimore City correctional institutions (May 21, 2013).

- Analysis of data from the Window Replication Project Release and Detainee population surveys. Information from the 142 releases and 200 detainees surveyed are analyzed to explore the needs of respondents based on length of stay in the facility. Proxy scores based on survey data from the detainee sample were calculated and useful services were categorized by these computed risk level.

- Analysis of data from the Level of Service Inventory-Revised (LSI-R) conducted by DPSCS Office of Transition staff from November 2012 to March 2013 of 146 men and women detained and sentenced to BCDC.

- Analysis of CJIJS criminal history data provided by DPSCS for the 140 men and women arrested during the proxy pilot period and/or who completed the LSI-R.

A brief overview of the literature as it concerns jail reentry evidence-based practices and strategies follows in Section II below.

Section II: Literature Review

The following is a brief overview of the literature as it concerns jail reentry evidence-based practices and strategies. Two key documents provide the foundation for this effort -- Life After Lockup: Improving Reentry From Jail to the Community and The Jail Administrator's Toolkit for Reentry. These reports are based on the Jail Reentry Roundtable Initiative, funded by the U.S. Department of Justice, Bureau of Justice Assistance. A third document, Transition from Jail to Community (TJC) Initiative Toolkit, also provides a specific plan for jurisdictions involved in the TJC project. In addition to these reports, I reviewed other documents including a number of articles and reports related to reentry overall and jail reentry specifically, as well as materials on evidence-based practices, statistical extracts, and notes from my involvement with the DPSCS Reentry Task Force and Reentry Advisory Council.

Overall, while there are a number of areas in the literature related to jail reentry, there are few stated jail reentry *models***,** and even fewer *evaluations* of those models. Thus this memo focuses on extrapolating *elements* of programs which could be applied to further the Baltimore City jail reentry initiative. Several areas of the literature include programming and treatment; mental health, somatic health and health care, partnering with community, linking to community, and reaching in to link the individual to community resources.

This review begins with a discussion of key reentry strategies based largely upon the Jail Reentry Roundtable in June 2006 hosted by the Urban Institute and subsequent collaborations including the Transition from Jail to Community (TJC) efforts.

Key Reentry Strategies for Jail-to-Community

Five key reentry strategies are highlighted in the report Life After Lockup: Improving Reentry from Jail to the Community which should contextualize all plans for detainees in their transition back to the community (Solomon, Osborne, LoBuglio, Mellow, & Mukamal, 2008). These strategies are:

- **Classification, screening, and assessment** so as to determine a detainee's risk for recidivism and criminogenic needs that if addressed, should reduce their likelihood of continued engagement in crime.

- Utilization of **Reentry plans** in order to determine which specific interventions would make the most difference.

- **Jail-based intervention and community in-reach**[4] so that the detainee has "some level of prerelease activity … ranging from formal treatment to … access to community-based providers, volunteers, or family members" (p. 29).

[4] Relationships established between provider and inmate pre-release is crucial for continued engagement post-release. This is particularly salient given the majority of jail inmates/detainees "once released … are not under the authority" of a criminal justice agent (White, Saunders, Fisher & Mellow, 2012, p. 141). See also Warwick, Dodd & Neusteter, 2012 a discussion of the TJC model, including "a strong community handoff component … that ensures continuity of care between in-jail and community-based programs and services" (p. 1). Miller & Miller, (2010)

- **Moment of release** – the first 24 hours and days are critical – often making the difference between success and failure.

- **Continuity of Care** – continued engagement of detainees/aftercare in the community post-release.

The Jail Administrator's Toolkit for Reentry (Mellow, Mukamal, LoBuglio, Solomon, & Osborne 2008), explicates these critical strategies by creating six "Tracks" by length of stay and level of need (p. 83-84) and recommended actions along a continuum based on the needs, risk factors, and history of the detainees.

The authors note that it is not feasible to assess and create an individualized reentry plan for all detainees, although almost all could receive some service even if limited to the provision of resource information. However, given limited resources, it is best to "carefully choose those inmates who really stand to benefit from your services .... and [exclude] those who are not likely to be released to the street (i.e., deportation, transfer to state and federal prison)" (p. 83). Mellow et al. (2008) conclude that "***Targeting your services to the right inmates is as important as developing the services"*** (emphasis added, p. 83).

The Tracks for provision of reentry services are listed below, along with various suggestions and examples provided by Mellow et al. (2008) are as follows:

Track One: Those who have low needs and/or very short stay
Usually completed with minimal contact with Correctional Staff

- Action: **Resource Information** related to key risk/need factors such as housing, substance abuse treatment, employment, and emergency services.
    - *New York DOC provides a reentry kit that includes information on health insurance, a brochure on community health clinics, a personal health record the inmate can fit into their wallet to use to write down their medical care and addresses of health providers, medical information and emergency contact person; a female condom, lubricant and easy-to-read instructions and three latex male condoms.*

Track Two: Those who have medium needs and/or longer stay
Usually completed with 1 interaction with Reentry Staff

- Action: **Resource Information + Develop a Reentry Plan**, few or no referrals; it is the detainee's responsibility for connecting to services once in the community. The reentry plan should be written and developed in collaboration with the detainee, who should receive a copy upon release.
    - *Include a medical summary in the reentry plan – list prescribed medications (and how to use them) laboratory and diagnostic test results and other information important to the inmate or community health provider.*

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conducted a study of in-reach services in a rural jail and with a 12 month follow-up period, recidivism was significantly lower (12% rearrested vs. 82%) for program participants compared to a matched comparison group.

Track Three: Those with high needs and/or longer stay
Usually completed with 1 interaction with Reentry Staff

- Action: **Resource Information + Develop a Reentry Plan + Setting Appointments for Services Prior to Release**. Referrals should be to providers who have capacity to serve the individual and have agreed with the jail to accept these clients. Appointments should be in writing, including contact information of service provider and date of appointment.
    - *Include public transportation directions to the service provider. Collaborate with the provider to help them understand the challenges in serving this population, including tendency to miss appointments and/or show up late.*
        - Target: Those requiring outpatient or residential drug treatment or HIV aftercare generally need a Track 3 reentry plan.

Track Four: Those who have high risk and needs and/or longer stay
Usually requires multiple interactions with Reentry Staff and contact with community service providers.

- Action: **Resource Information + Develop a Reentry Plan + Setting Appointments for Services Prior to Release + Coordination and Collaboration of Services Back to Community**. The key to this reentry track is coordination of efforts between jail reentry staff and community providers. Requires development of formal contracts with providers. Once released, reentry staff would contact providers within 3 days to ensure that the appointment was kept. Face-to-face contact with a provider prior to release renders inmates more likely to seek assistance upon release.
    - *New York City DOC has a Discharge Planning Collaboration Center where public service agency representatives (e.g., Homeless services, Health and Mental Hygiene) are available to talk with all inmates and provide a menu of reentry services including interviews for public benefits and issue Medicaid prior to discharge.*
        - Target: Inmates who are a significant safety and health risk to themselves or others. Inmates who are seriously mentally ill and require outpatient mental health appointments, as well as inmates with active tuberculosis. May also include inmates sentenced with a known release date (and/or inmates who are to be released in 30 days or more and volunteer for assistance). Track 4 individuals should also participate in Track 6 programming (see below).

Track Five: Those who have high needs
Requires level of care assessment and determination of housing placement

- Action: **Extended Care Placement or Supportive Housing**. If an inmate is unable to successfully maneuver typical activities (e.g., eating; bathing; dressing; toileting; getting in/out of bed without assistance and other mobility issues), then they may require this level of assistance.

Track Six: Inmates from Tracks 2 through 5

- Action: **Resource Information + Develop a Reentry Plan + Setting Appointments for Services Prior to Release + Coordination and Collaboration of Services Back to Community** + **Reentry Programs**. Enroll inmates found in tracks 2 through 5 in multisession, formal prelease reentry programming in addition to the services provided in their track level. Programs can address various needs and risks including literacy, good hygiene, group-oriented work behaviors; cognitive behavioral skills-based programs such as stress and anger management and life skills, substance abuse and relapse education, housing and family reunification.
    - *Duchess County New York has a 50-bed unit which is a closed community which provides an intensive 5 week program focusing on transition to the community. Key to the program is the development of a positive professional relationship with the inmates and building a collaborative plan for reengagement into the community. Post-release, all participants agree to be tracked by correctional program officers for one-year post release – and have contact with all program graduates and/or families at least once a month for one-year. These activities "enhance prosocial family and personal networks that are likely to employ informal social controls" (Christensen & Crime and Justice Institute, 2008, p. 24). This program has been evaluated and finds an average of a 25% reduction in recidivism. Documents provided in the publication include the 5 week progress plan evaluation, checklists, and transition plans.*

Innovative Strategies In Other Jurisdictions

Los Angeles Jail to Community Reentry Program

One alternative to the Transition from Jail to Community (TJC) model is the Los Angeles Jail to Community Reentry Project (LAJCRP). The Vera Institute of Justice, working collaboratively with the Los Angeles County Sheriff's Department (LASD) and key members of the community have offered "a series of recommendations for maximizing the effectiveness of reentry services for the 160,000 people who pass through the L.A. County Jail annually" (Sandwick, Tamis, Parsons & Arauz-Cuadra, 2013, p. 2). This program, which began in November 2010, explores reentry services for men returning to two neighborhoods in Los Angeles. While these neighborhoods are economically disadvantaged (e.g., with high unemployment, low educational attainment, and high rates of poverty), the strength of the community is that it encompasses "well-developed, active networks of grassroots organizers, faith-based community and local service providers" (Sandwick, et al., 2013 p. 10).

The contextualization of reentry needs by neighborhood may be the one of the key differences of the LAJCRP model. In 2011, Sandwick et al. (2013) conducted interviews with 80 men housed in the jail and 26 community stakeholders from the targeted neighborhoods. Interview respondents "self-defined" their service needs with employment, housing and substance use as the most frequently cited needs (p. 12). Vera then presented these needs within the context of the neighborhoods – with inmates from one neighborhood citing a greater need for housing and

financial issues, while the other noted substance use issues as more important to address. This discussion, beyond simply acknowledging the geographic distribution of where folks are returning home, invites further discussion of the role of neighborhood (e.g., differences in available resources, population characteristics, and degree of social cohesion) and the possible impact on individual reentry outcomes.[5]

In other respects, the LAJCRP model is similar to TJC in many ways, including recommendations of developing reentry service plans focused on addressing recidivism risk factors, collaboration and coordination with the community (specifying the Department of Mental Health and Probation Departments); and emphasis on the use of data to inform all aspects of the project. For instance, Vera recommends that the jail data system should "automatically flag" individuals who return the to jail (Sandwick, et al., 2013, p. 26); and develop a strategy to conduct program evaluations.

Finally, LAJCRP also advocates incorporating risk assessments tools in order to target services to those assessed as both high need and with "high opportunity" (e.g., the sentenced population) to participate in programming. To this end, they recommend outreach to individuals in existing jail programs and using "engagement techniques" such as motivational interviewing to identify those "who are motivated to engage with service" (Sandwick, et al., 2013, p. 19). This provides the jail with a way to address resources limitations (there is 1 program staff for every 1,000 inmates) while maximizing their efforts. The use of an assessment tool, a core practice of TJC, is discussed in more detail in the next section.

Proxy Risk Assessment Tool

One of the primary challenges in jail reentry is how to address the needs and concerns of those with very short lengths of stay, but at high risk to re-offend or at high risk of being re-booked into jail (Christensen, Jannetta, & Willison, 2012).[6] One of the key challenges is: how do you identify the people with short lengths of stay to prioritize for intervention? The answer to the first question is the Proxy Risk Assessment tool which is being used by several jurisdictions involved in the Transition from Jail to Community (TJC) project currently under evaluation at the Urban Institute.[7]

The Proxy Risk assessment is a short self-report tool consisting of 3 questions:

1) What is your current age?;
2) How old were you the first time you were arrested? (Including juvenile arrests); and
3) How many prior arrests do you have? (Including juvenile arrests).

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[5] Baltimore City is made up of hundreds of distinct neighborhoods "each with its own style." Future evaluations of jail reentry programs may wish to systematically explore these differences. http://www.livebaltimore.com/

[6] Christensen, Janetta & Willison (2012) note that the proxy is not intended to replace jail classification screening. "Risk screening for the purpose of triage and targeted treatment does not replace jail classification. Objective jail classification procedures are essential to establish a safe and secure jail environment in which jail transition services and practices can be realized" (p. 3).

[7] Personal Communication, Jesse Jannetta via e-mail from Nancy La Vigne, March 21, 2012.

Scoring of the Proxy:

Current Age: A value of 0, 1, or 2 is assigned based on the offender's age, relative to that of the remainder of the sample. Where a score of 2 = within the first third of the sample (youngest), 1 = within the middle third of the population, and 0 = within the last third of the sample (oldest).

Age of First Arrest (AFA): A value of 3, 2, or 1 is assigned based on the offender's age at first arrest (including juvenile arrests). Where a score of 3 = within the first third of the sample (youngest), 2 = within the middle third of the population, and 1 = within the last third of the sample (oldest).

Prior Arrests: A value of 3, 2, or 1 is assigned based on the number of times an offender has been arrested (including juvenile arrests). Where a score of 3 = within the last third of the sample (highest number of priors), 2 = within the middle third of the population, and 1 = within the first third of the sample (least number of priors).

The key is that the scores are based on the population upon which the risk assessment is conducted and the higher the score, the higher the risk, within a range of 2 to 8 points. The answers of these 3 questions can be quickly scored, and those that are medium or high risk could be flagged for in-reach by community providers. In addition, other jurisdictions use the proxy as a pre-screen, with those scoring as medium and high risk are administered a more comprehensive tool such as the LSI-R, which provides more information related not only to risk of recidivism, but provides feedback on criminogenic needs.

Ideally, this information would be entered and stored in the new Offender Case Management System (OCMS), so that for those individuals who cycle in and out of the jail repeatedly, their information is readily available and can be utilized to triage and cumulatively treat the offender.

Resource: Please see Appendix E for a brief write up of the Reentry Policy Council's web-based interactive Assessment Tool. This tool allows you to review issues related to assessment by length of stay (e.g., 24 to 72 hours) and provides program examples.

Reentry Support Hotline

Kentucky has implemented a strategy that was one of 8 winners of a National Innovations Award in 2009 from The Council of State Governments – a Reentry Support Hotline. The idea of the hotline is simple – provide a way for released offenders to locate needed services in the community on an ongoing basis, 24 hours a day, and 7 days a week. Through the hotline "People fresh out of prison or jail can call the hotline to get in touch with needed social services, financial services, emotional support, substance abuse treatment, community resources and much more. Because when someone leaves prison, they often find themselves in an overwhelming world." "Usually the men and women who call are typically at the end of their hope," Rucker said. "And so they're very thankful to have a live person on the other end."[8]

[8] http://knowledgecenter.csg.org/drupal/content/kentucky-reentry-hotline

What makes this idea unique is that the hotline is staffed by inmates who are nearing graduation from a residential substance abuse treatment program in a correctional facility. Prisoners apply to be a Resource Specialist and those hired for the position are required to answer the telephone, work shifts, and complete paperwork without any incentives or benefit other than "the opportunity to give back."[9] Resource Specialists typically hold the job for months, and assist in peer to peer training with the Program Administrator.

How it works: cards listing the toll free number (1-877-466-2834) (see Figure 2) are given to all of those being released from prison and jail (and also by Probation and Probation agents). The Resource Specialist who answers the call records the time of the call, the zip code from where they are calling from, and the purpose of the call (looking for a job, questions about Parole & Probation, or other reason). The hotline gets 3,800 calls per year and most calls are related to employment needs. The hotline is open to anyone who calls – former inmates, family, and/or friends of inmates.

Kentucky was able to set up this project at a very low cost because the computer used for the program was DOC property that wasn't being used for another purpose, the toll-free hotline phone number and service is donated by the inmate telephone provider, and training for the program is provided by staff – Ms. Shelia Rucker, the Corrections Program Administrator of the Roederer Correctional Complex Therapeutic Community, where the hotline is housed. The resource guide is updated by DOC information technology staff.

The primary cost of this program is printing the hotline cards – around $50 per month. While there were initial concerns about security, there have been no problems to date. Internet access is limited to the resource guide website. The hotline telephone is limited to incoming calls and as the hotline is on the inmate phone network, all calls are recorded and are regularly and randomly monitored.

Figure 2: Reentry Support Hotline Card

[9] Kevin Pangburn, ICCA Presentation, November 2, 2010

One of the key challenges to a hotline service would be updating the resource guide. Fortunately, Maryland has a resource already available – the Maryland Community Service Locator that is routinely updated by the Center for Substance Abuse Research.

Both Shelia Rucker and Kevin Pangburn, Mental Health Director, Kentucky Department of Corrections welcome the opportunity to assist other states with this type of effort. Their information is below:

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The next section of the report - Section III - explores not only the overall population flow in the Baltimore City Detention Center (BCDC), but also provides a portrait of the arrestee population by length of stay and release status based on those arrested during the week the proxy risk assessment tool pilot was conducted. This section details the cut scores developed specifically for BCDC (including how those scores might be utilized based on available resources), and compares the self-report data to CJIS criminal history data. Section III also discusses issues related to the validity and limitations of the proxy risk assessment tool.

Section III: Using Data to Define and Refine Strategies and Targets in Baltimore City

Overall Population Flow

DPSCS describes the jail as follows:

> *"Everyone arrested in the City of Baltimore, or arrested on a warrant from the City, comes through the DPSCS' detention facilities. The institutions include the Baltimore Central Booking and Intake Center, the Baltimore City Detention Center and the Pretrial Release Services Program. Central Booking opened in 1995 as the single location where all arrestees in Baltimore are processed.*
>
> *The Baltimore City Detention Center annually holds more detainees, including teenagers facing adult charges, than any local jurisdiction in Maryland. The center houses a unique high school behind bars: the Eager Street Academy. A wide array of mental health, social, educational, recreational, spiritual, and rehabilitative programs is available for the entire population of the Baltimore City Detention Center."* [10]

Based on data provided by Cortez Rainey for Fiscal year 2012 (July 2011 to June 2012) a total of 55,717 individuals were booked, and of those, 23,553 individuals (1,963 per month, on average) were Released on their own Recognizance (ROR) and 2,334 (195 per month, on average) were Released without Charge.

On average, 3,320 people per month are held pending trial (3,013 men and 307 women). Of these 3,320, the population of detainees housed for up to 1 month is estimated at 1,850 people. This estimate is based on the number of those confined to the detention center (2,402 per month on average). Furthermore, 56% of detainees are held without bail, and the average length of stay is 45.6 days. For the final group, among the sentenced population, the average daily population is 457 people, of which the majority would likely remain in the facility for 45 days or longer.

It is important to note that these estimates do not account for either those who cycle in and out of the jail (thus could be counted two or more times), nor does it account for those who make the transition from booking to pre-trial to sentenced population. The next section of this report refines these overall numbers with an analysis of unique persons from booking data provided by Cortez Rainey for calendar year of 2011.

Unique (Unduplicated) Persons

An excel spreadsheet was provided to CRA containing the State ID (SID) number of each person booked in 2011, along with the booking number, arresting agency, and gender of the individual. The total number of individual persons processed into BCDC in 2011 was calculated by comparing the SID numbers and designating the first appearance of SID as a unique (unduplicated) person, and subsequent entries of the SID as a duplicate. Each unique person was

[10] http://www.dpscs.state.md.us/agencies/dpds.shtml

included in the overall count, but if an individual returned to the facility in that year, they were not included in the total count again.

This analysis revealed that during the calendar year 2011, there were 56,383 bookings and of these, there were a total of 39,170 unique individuals arrested in that period; 79% were male, 21% female. Given the heavy resource burden dedicated to "frequent flyers" [11] (generally less serious offenders such as those charged principally with misdemeanor and/or quality of life offenses) who cycle in and out of the jail), the number of arrests was calculated based on unique persons.

The 39,170 unique individuals were arrested in calendar year 2011 between 1 and 16 times, averaging 1.44 arrests per person with the majority (73%) arrested once. Of the remaining 10,615 unique persons, 27% were arrested 2 or more times; 10% had 3 or more arrests; 4% had 4 or more arrests and 2% had 5 or more arrests. Observing only the 10,615 who had 2 or more arrests, the number of arrests ranged from 2 to 16, with an average of 2.62 arrests (with a standard deviation of 1.07).

Mr. Rainy had provided additional information based on the committed population's length of stay in the facility at the time of release (based on fiscal, not calendar year 2011). This information, coupled with data provided in the Central Region Statistics Report estimates the population flow illustrated in Figure 3:

Figure 3: Estimated Release of Committed Persons by Length of Stay N=39,170

Number of Unique Persons Released	Released Within Time Frame of Arrest	% of Total Population	Per Month
22,366	0 to 10 days	57.1%	942
1,880	11 to 20 days	4.8%	79
1,959	21 to 30 days	5.0%	83
6.424	31 to 60 days	16.4%	271
1,723	61 to 90 days	4.4%	73
4,818	91 days or more	12.3%	203

Again, the figures above represent the committed population – a subset (albeit a substantial subset of approximately 50%[12]) of all detainees processed in BCDC. The remaining 50% of detainees were released on their own recognizance, released on bond, or the charges were dropped.

[11] See for example Gilchrist-Scott & Fontaine (2012) Frequent Users of Jail and Shelter Systems in the District of Columbia: An Overview of the Potential for Supportive Housing. http://www.urban.org/publications/412504.html

[12] This figure of 50% is based on the Criminal Justice Coordinating Council (CJCC) report generated by Mr. Rainy which includes statistics on number released to the community and those released to confinement (committed) in the detention center.

This project sought to further clarify the number of individuals who flow through BCDC using three data sources – results from the proxy risk assessment tool conducted on October 21 through October 28, 2012; Offender Case Management System (OCMS) data on those arrestees which included release date, time, and release status of those arrestees; and the CJIS criminal history data of those arrestees. Demographic and criminal history portraits based on the CJIS data are provided below, followed by the proxy pilot results, which also incorporate analysis of the OCMS and relevant CJIS information.

BCDC Arrestees Sample – Demographics and CJIS Criminal Histories

A list of 1,028 names of those arrested during the proxy risk assessment tool pilot period was submitted to the Department of Public Safety and Correctional Services (DPSCS) for a Criminal Justice Information System (CJIS) criminal history data extract. Of those, 975 were matched to a criminal record in CJIS. Individuals whose CJIS history included only events following the period of interest were omitted, leaving 956 arrestees in the CJIS data for analysis.

Table 1 provides descriptive information of those in the CJIS data. Among the 956 arrested during the week of the proxy risk tool pilot period 577 (61%) completed the proxy and 379 (39%) did not. Those in the sample were on average 33 years old, (ranging in age from 16 to 80), the majority were male (79%), African American (83%), and Caucasian (16%).

Table 1: BCDC Arrestee Sample Demographic Descriptives N=956

	N	Freq.	Percent	Range	Mean (SD)
Arrestees with CJIS Data	956				
Arrested in Proxy Risk Period	956				
Completed the Proxy		577	61%		
Did Not Complete Proxy		379	39%		
Age when in BCDC				16 to 80	33.56 (11.8)
Gender	956				
Male		755	79%		
Female		201	21%		
Race	932				
African American		779	83%		
White		149	16%		
Asian		4	<1%		

N=Number of those with data available to assess

Table 2 provides several measures of criminal history, calculated or summarized from the CJIS criminal history data.

The most common type of offender is a person offender (56%), followed by drug (34%), sex offender (5%), property (4%) and traffic and other crimes (both less than 1%). Note that this offender class is based on the most serious conviction over their criminal career and not on the most frequent type of crime or most recent offense committed.[13] The length of these arrestee's criminal career[14] spanned a range from as little as less than 1 day to over 52 years. On average, arrestees had been criminally involved over 10 years.

The prior arrest history reflects this longevity. Arrestees had an average of 9 arrests (ranging from 1 to 74), 3.7 prior convictions and an average conviction rate of 33% overall. Among those convictions, approximately 24% were for felony level offenses and the maximum seriousness category averaged 3.3, hovering around a level V offense (ranging from the most serious category of level I to least serious, level VII).[15] Level V offenses include second degree assault; false statement to law enforcement officer; uttering false document; theft over $500; motor vehicle theft; possession of controlled dangerous substances (not marijuana); third degree sexual offense; weapons – illegal possession by convicted felon; and obstructing & hindering.

Table 2 also provides arrest information broken down to provide charge data. Arrestees had an average of 21 prior charges (ranging from 1 to 143 charges) in their criminal career, with 4.9 charges resulting in a conviction (ranging from 0 to 51 charges convicted), thus 20% of all charges resulted in a conviction. Among these charges, 19% were for felony level offenses, and the most serious charge category averaged 4.0 – a Level IV offense. Level IV offenses include arson, manufacture and/or distribution of controlled dangerous substances, second and third degree burglary, escape from confinement, and robbery.

A breakdown by different types of offenses includes both the number of charges overall, within a range, and the number of those charges that lead to a conviction. Note that the offenses listed include person crimes (including weapons charges) and sex crimes (including prostitution). Given that weapons (due to their potential lethality) add a level of seriousness to the offense, and that those who engage in prostitution have a fair number of charges, both weapons and prostitution charges and convictions are also provided separately so to present a balanced view.

For instance, for the 956 arrestees, 725 were charged in their career with at least 1 person offense (including weapons), ranging up to 99 person offenses, and averaging 8 person charges over their career. Among the 725 charged with a person offense, 590 were, on average, convicted of 1.5 person offenses over their lifetime (ranging from 0 to 21 person offense convictions.) Likewise,

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[13] In deciding which was the most serious conviction, person offenses were privileged over drug and property types of offenses. For the purpose of offense seriousness, DUI/DWI offenses, eluding police, etc., although designated as traffic offense type, were still considered as person offenses and thus were privileged over property, drug and other types of offenses. Thereafter, seriousness was determined based on the specific charges in accordance with the State of Maryland criminal law statutes.

[14] Length of criminal career was calculated based on the first date of arrest in the CJIS data to the proxy arrest date.

[15] Each charge was coded by offense seriousness category from I (most serious) to VII (least serious) (which was reverse coded so that a higher value indicated a more serious crime) in accordance with Maryland State statutes. The source for statute classification information was from the Maryland State Commission on Criminal Sentencing Guidelines Manual Guidelines Offense Table Appendix A, updated February 2006, and the 2012 manual.

the 83 individuals charged with prostitution had from 1 to 28 charges over their career, with an average of 2.9 charges. Of the 73 people charged with prostitution, they were convicted twice, on average, ranging from 0 to 20 convictions.

The final section of Table 2 is incarceration history. In the arrestee sample, 55% had been incarcerated for one or more days during their career.[16] These 527 arrestees experienced from 1 to 36 periods of incarceration, on average serving 6.2 times. The total time imposed over the course of the arrestee's career ranges from 0 days to 92 years, with an average time imposed of 6.8 years. The average sentence per incarceration period is 68 days, but ranges up to 3.7 years.

Table 2: BCDC Arrestee Sample Criminal History Descriptives N=956

	N	Freq.	Percent	Range	Mean (SD)
CJIS Data					
Offender Class (Serious Conviction)	702				
Person		394	56%		
Sex		33	5%		
Drug		244	34%		
Property		27	4%		
Traffic		3	<1%		
Other		1	<1%		
Criminal Career					
Length of Career (in months)	956			<1 to 628.2	127.5 (120.5)
Length of Career (in days)	956			0 to 19108	3879 (3667)
Arrest, Charge, and Conviction History					
Total Number of Prior Arrests	956			1 to 74	9.1 (9.3)
Total Number Prior Convictions - Arrest	956			0 to 36	3.7 (4.7)
Prior Arrest Conviction Rate	956			0 to 1	.33 (.26)
Proportion of Prior Felony Convictions	702			0 to 1	.24 (.29)
Most Serious Category - Convictions	702			1 to 7	3.38 (1.31)
Total Number of Prior Charges	956			1 to 143	21.5 (22.1)
Total Number Prior Convictions - Charges	956			0 to 51	4.9 (6.3)
Average Charges Per Prior Arrest	956			1 to 34	2.4 (1.7)
Prior Charges Conviction Rate	956			0 to 1	.20 (.18)
Proportion of Prior Felony Charges	950			0 to 1	.19 (.17)
Most Serious Category - Charges	950			1 to 7	4.0 (1.48)

[16] Calculated from sentencing data by subtracting the sentence suspended from sentence imposed. However, there is no ability to discern in the CJIS data those sentences that were served consecutively from those served concurrently, thus these figures likely overestimate the amount of time actually served.

	N	Freq.	Percent	Range	Mean (SD)
Charge & Conviction History By Type of Offense					
Person Offenses (Including Weapons)					
Total Number of Charges	725			1 to 99	8.0 (9.5)
Total Number of Convictions	590			0 to 21	1.5 (1.9)
Weapons Only Offenses					
Total Number of Charges	407			1 to 32	3.3 (3.4)
Total Number of Convictions	360			0 to 3	.43 (.62)
Sexual Offenses (Including Prostitution)					
Total Number of Charges	128			1 to 31	3.7 (4.5)
Total Number of Convictions	114			0 to 21	1.5 (2.9)
Prostitution Only Offenses					
Total Number of Charges	83			1 to 28	2.9 (4.4)
Total Number of Convictions	73			0 to 20	2.0 (3.4)
Drug Offenses					
Total Number of Charges	757			1 to 82	10.2 (10.6)
Total Number of Convictions	635			0 to 23	3.1 (3.1)
Property Offenses					
Total Number of Charges	681			1 to 90	7.3 (9.7)
Total Number of Convictions	585			0 to 32	1.8 (3.3)
Traffic Offenses					
Total Number of Charges	158			1 to 17	2.1 (2.1)
Total Number of Convictions	143			0 to 3	.39 (.66)
Total "Other" Charges					
Total Number of Charges	142			1 to 7	1.6 (1.2)
Total Number of Convictions	131			0 to 4	.46 (.75)
Total Violation Probation/Parole					
Total Number of Charges	310			1 to 14	2.4 (1.9)
Total Number of Convictions	310			0 to 8	1.7 (1.5)
Incarceration History					
Sentenced to Incarceration Rate	956			0 to 1	.55 (.49)
Prior Times Incarcerated	527			1 to 36	6.2 (4.9)
Total Time Imposed (in days)	527			0 to 33645	2508 (3841)
Average Incarceration Sentence (in days)	527			0 to 1363	68.8 (115.0)

Portrait of Arrestee Population by Length of Stay

Given the organizational structure of this project is focused on individuals arrested in Baltimore City by length of stay, the CJIS data was analyzed within three groups – those in the facility for 48 hours or less, individuals housed in the facility from 3 to 30 days, and those who were in the facility for 31 days and over. Descriptions of these groups follow.

Group 1: Individuals Detained Less than 48 Hours

There were 720 individuals released within 48 hours of arrest. These individuals were on average 33 years old (ranging from 18 to 80), were 77% male, 80% black, 16% white, less than 1% Asian and 3% race unknown. CJIS data was available for 666 arrestees, and these data indicate those who were in the facility for less than 2 days had a 10 year criminal career averaging 8.29 arrests, a 30% conviction rate, 49% have spent one or more days incarcerated, averaging 2.9 times incarcerated over their career.

Offender class for these short time arrestees was categorized by the most serious prior conviction.[13] Among the 453 individuals with a conviction, 54% were convicted of a person offense, 38% drug crime, 4% sex offense, 3% property crime, and the remaining for traffic (<1%) and other[17] type of offense (<1%).

Group 2: BCDC Population in Facility 3 to 30 Days

The second group of those retained in the facility from 3 to 30 days is small – only 59 arrestees. These individuals were on average 31 years old (ranging from 18 to 63), were 92% male, 88% black, 5% white and 7% race unknown. CJIS data was available for 56 arrestees, and these data indicate those who were in the facility from 3 to 30 days had a 9 year criminal career averaging 8.93 arrests, a 35% conviction rate, and 63% have spent one or more days incarcerated, averaging 3.39 times incarcerated over their career.

Offender class for these arrestees was categorized by the most serious prior conviction. Among the 45 individuals with a conviction, 40% were convicted of a person offense, 51% for a drug crime, 2% sex offense, and 7% for property crime.

Group 3: BCDC Population in Facility 31 Days or More

The third group – those who were in the facility for 31 days or more[18] was comprised of 197 individuals with an average age of 33 years old (ranging from 16 to 66), were 79% male,

[17] Other offenses generally consist of nuisance or quality of life crimes including rogue and vagabond, pandering, urination in public, trespassing, consuming alcohol in public and underage drinking.

[18] Initially there were two groups – 32 individuals who were in the facility from 31 to 90 days, and 165 arrestees who were housed 91 days or more. Before combining the two groups, analysis was conducted to ensure that these groups were generally equivalent along demographic and criminal history factors. There were two significant differences. Gender - those in for 31 to 90 days were 97% male vs. 75% of those in for 91 days or more (significant at p<.000) and prior charges – the average seriousness category was lower for those in 31 to 90 days (2.04 vs. 2.33) versus those in the facility for 91 days and more (significant at .05). Given these were the only two factors that

79% black, 17% white and 4% race unknown. CJIS data was available for 193 arrestees, and these data indicates those in the facility 31 days or more had a 12 year criminal career averaging 12.06 arrests, a 42% conviction rate, and 72% have spent one or more days incarcerated, averaging 5.32 times incarcerated over the course of their career.

Offender class for these arrestees was categorized by the most serious prior conviction. Among the 167 individuals with a conviction, 64% were convicted of a person offense, 24% for a drug crime, 8% sex offense, and 4% for property crime.

Comparisons Between Groups Based on Length of Stay

The populations were further examined by testing for statically significant ($p<.05$) differences between the groups based on length of stay. Not surprisingly, the population and criminal history characteristics of those detained for up to 48 hours were significantly different than those who were in the facility for 31 days or more on a number of factors. These include:

- Those held more than 31 days had significantly more serious criminal careers overall. Differences included length of criminal career (12 vs. 10 years); the total number of prior arrests (12.06 compared to 8.29 for the released within 48 hour group); career conviction rates (42% vs. 30%); average number of charges per arrest (2.9 vs. 2.2); total number of charges overall (21.7 vs. 19.1); incarceration rate (72% vs. 49%); and number of times incarcerated (5.3 vs. 2.9).

- Group 1 (less than 48 hours) and group 2 (3 to 30 days) differed primarily in gender composition – there were significantly fewer women detained in the facility from 3 to 30 days compared to those arrested and released within 48 hours (92% of the population held 3 to 30 days was male vs. 77% of the population released within 48 hours).

- Finally, there were criminal history differences between group 2 (staying 3 to 30 days) and group 3 (31 days or more). Those in group 2 had significantly fewer prior charges and convictions compared to group 3 (22.3 vs. 30.6 charges; 4.8 vs. 7.47 convictions); and had fewer incarceration periods (3.3 vs. 5.3).

Overall, and as expected given this is a jail population, this is a diverse group of offenders. It is this diversity, and the sheer volume of arrestees processed through the facility, which makes it difficult to identify those at highest risk and have the most needs for services to forestall future offending. This is why determining how to triage this population in order to provide those at greatest risk for recidivism and/or to meet the most critical needs is a key component of this project. The tool used to inform this project was the proxy risk assessment; the procedures and results of a pilot test of the tool follow.

differed, combining the samples were both consistent with the overall objective of the project and simplified reporting of the overall results. However, some of the information provided in the report, particularly with respect to the Window Replication Study results, continues to separate those in for 30 to 90 days from more than 91 days.

Proxy Risk Assessment Pilot Test Results

Proxy Risk Assessment Process

The DPSCS Division of Pretrial Detention and Services division agreed to pilot the proxy risk assessment tool the week of October 21 through October 28, 2012. The three question assessment tool was to be asked of all arrestees on all shifts and recorded on the form created by CRA for this purpose (Appendix D). The process at booking is that individuals are initially asked for their information and then it is later confirmed (within 30 minutes) through fingerprinting, and the associated State ID (SID) number is recorded. Given this time gap, a process was worked out for the booking officer to fill out the proxy assessment form, note the arrestee's Booking Information Number (BIN) on the form, and then place the form in a designated "In" box on the Sergeant's desk, pending confirmation of the SID. The Sergeant would then look up the individual by the BIN number, add the SID number to the form, and place the form in an "Out" box. If the SID number did not come back before end of shift, the Sergeant will leave the proxy form in the "In" box, to be completed by the Sergeant on the next shift. Every morning, Sergeant Weinberg picked up the forms and held them for CRA, who picked up the forms on November 2, 2012.

The forms were then reviewed and keyed into electronic format to provide the data for this report. Data was also obtained from OCMS to provide additional information of those arrested in this time period including demographic data (date of birth, race, gender) release status (released on bail, released on own recognizance, released from court, released without charge, and committed) date and time the individual was released, and the primary charge.

The proxy was completed during the week of October 21, 2012 to October 28, 2012. A total of 626 proxy forms were provided to CRA. This was a substantially smaller number than anticipated, based on information provided by Central Region Statistics Department. In the calendar year from January 1, 2011 to December 31, 2011, there were 56,383 arrests – averaging a little over 1,000 people arrested per week.

This raised questions regarding whether the 626 people arrested during the pilot week represented a *sample* of those arrested, or were, as intended, the *entire population* of those arrested during that week. Based on DPSCS records, 1,040 individuals were processed through Central Booking during this one week period.[19] Consequently, additional analysis was required to determine if the sample was *representative* of all those arrested in Baltimore City, or if not, if additional proxy pilot testing was required. These issues are detailed more below.[20]

Comparison of Proxy vs. Non-Proxy Groups

The next step was to determine if among those arrested in the week from October 21 to 28, if those who completed the proxy were similar to those who did not complete the proxy. Utilizing

[19] Personal Communication, R. Gowen, DPSCS, February 13, 2013.

[20] See Flower, S. (2013) Final Proxy Risk Assessment Results Report, for additional information. Report available upon request and with permission of the Office of the Mayor, City of Baltimore, Office of Human Services.

data from OCMS, those who completed the proxy were compared to those who did not on measures of age, race, gender, primary charge, and release status.

As evidenced from Table 3 below, there were only 3 measures that differed significantly between those who completed the proxy (Proxy Group) and those who did not (Non-Proxy Group). Among those who completed the proxy, 83% were male, compared to 72% of the Non-Proxy group (significantly different at p<.00). In addition, those in the proxy group spent 7 days fewer in the facility and were less likely to be committed (13% vs. 18%) (significant at p<.05).

In all other areas, however, the Proxy and Non-Proxy groups were the same – both groups were around 33 years old, over 80% were African American, and equivalent proportions were released through similar mechanisms (ROR, bail, expiration of sentence etc).

In terms of offense characteristics, the primary charge was categorized by offense types – person offenses, property, sex, drug, weapons, prostitution and the like. The Proxy and Non-Proxy groups were charged with similar offenses – 21% were charged with person crimes, 1% charged with a sex crime, approximately a third were charged with a drug offense and 10% of the Proxy group were charged with a property crime compared to 13% of the Non-Proxy group, but these differences were not statistically significant. Even when the drug offenses were catalogued by possession or distribution, or by drug type, these two groups were not statistically different.

Table 3: Differences between Proxy and Non-Proxy Groups N=1035

	Proxy Group			**Non-Proxy Group**			**Difference**
	N	**Mean**	**SD**	**N**	**Mean**	**SD**	
Demographics							
Age	615	33.4	11.9	420	33.4	11.5	.00
Gender - Proportion Male	615	.83	.37	420	.72	.45	.11***
Race – Proportion African American	599	.84	.36	403	.83	.37	.01
Detain and Release Information							
Time Spent in Facility	586	20.9	44.4	396	27.8	50.3	-6.9**
Committed - Proportion	615	.13	.34	420	.18	.38	-.05**
Of Those Released, Proportion							
Released Own Recognizance (ROR)	522	.57	.49	338	.63	.48	-.06
Bail	522	.33	.47	338	.30	.45	.03
Expiration of Sentence	522	.01	.11	338	.01	.10	.00
Released from Court	522	.06	.23	338	.03	.17	.03
Without Charge, Juvenile or Exceptional[21]	522	.03	.16	338	.03	.17	.00

[21] Exceptional release is a release without charge, release to citation, and for releases that do not fit a category identified by the system. These exceptions include mitigating circumstances, mistaken identity, case previously closed, and when the jurisdiction does not wish to extradite.

	Proxy Group			Non-Proxy Group			Difference
	N	**Mean**	**SD**	**N**	**Mean**	**SD**	
Primary Charge – Proportion Charged with:							
Person Crime	612	.21	.41	417	.21	.41	.00
Sex Offense	612	.01	.10	417	.01	.11	.00
Drug Offense	612	.38	.49	417	.34	.47	.04
Property Crime	612	.10	.31	417	.13	.33	-.03
Weapons	612	.02	.15	417	.03	.17	.00
Prostitution	612	.03	.16	417	.03	.16	.00
VOP	612	.05	.21	417	.04	.20	.01
Traffic (dirt bike, failure obey, license)	612	.05	.21	417	.06	.23	-.02
Quality of Life (e.g., Smoking on Transit, Open Container, Panhandling, Loitering)	612	.01	.12	417	.02	.15	-.01
Other (Trespassing, Fugitive, Failure to Appear, Contempt, Paternity)	612	.14	.34	417	.13	.34	.01
Those Charged with Drug Offense							
Charged with Distribution	105	.26	.43	47	.17	.38	.05
Charged with Possession	105	.74	.43	47	.83	.38	-.09
	N	**Percent**		**N**	**Percent**		**Difference**
Type of Drug – Percent Charged	72			35			
Cocaine or Heroin		40%			31%		9%
Not Marijuana		6%			3%		3%
Marijuana		54%			66%		-12%

***Difference is significant p<.00 ** significant p<.01 *significant p<.05

In addition, in order to ensure that the proxy group was equivalent to the non-proxy group, a number of measures based on CJIS criminal history records were reviewed and none were found to be statistically different. These criminal history measures included the career total number of arrests, conviction rate, length of criminal career (from first date of arrest to most recent event) and each charge which was cataloged by type of offense (e.g., person, property, drug) of the most serious offense and class (felony (coded as 1), or misdemeanor (coded as 0) and the offense seriousness category from I (most serious) to VII (least serious) and seriousness (e.g., average minimum and maximum seriousness of charges and convictions based on the Maryland State Commission on Sentencing Guidelines), as well as additional sentencing measures such as incarceration rate and number of prior incarceration periods. In summary, while there were 3 measures in the OCMS data that differed by the groups, the CJIS criminal history data confirmed that the proxy risk assessment data gathered on the sample of those booked in Baltimore City were sufficiently representative to move forward and recommend that the cut-scores established with this sample can be used to determine the level of risk of those arrested in Baltimore City.

Proxy Risk Scores

The sample of 626 arrestees who completed the proxy was representative of the entire population. The information provided in this pilot allows DPSCS to set the risk scores based specifically on those arrested in Baltimore (as opposed to accepting the risk scores based on arrestees from a different city or area), as well as provide estimates of the distribution of risk (e.g., number of high risk individuals v. medium risk vs. low risk) within the facility. This, in turn, informs the estimated number of individuals who may be eligible for, or require, the various levels of reentry services proposed in the overall project.

Arrestee Descriptives and Comparison to Official Records

Among the 626[22] arrestees who completed the proxy risk assessment:

- Of 623 individuals reporting, the average age was 32.86 (ranging 17 to 77 years old);
- 590 arrestees reported their age of first arrest as 19.4 years old, on average, (ranging from 1 to 65 years old); and
- 599 arrestees reported a range of between 0 and 74 prior arrests (including juvenile arrests) with an average of 7.13 prior arrests.

The proxy tool used for this project also asked the booking officer to indicate if the arrestee appeared to be inebriated and/or high, and/or mentally challenged. Among the 626 arrestees, 49 arrestees were deemed inebriated and/or high, 5 arrestees appeared to be mentally challenged, and 1 arrestee was identified as both inebriated/high and mentally challenged.

Compared to those who were not deemed impaired, these 55 arrestees were somewhat older (34.8 vs. 32.6 years old) and reported a younger age at first arrest (18.3 vs. 19.5 years old), yet these differences were not statistically significant. However, in terms of number of prior arrests, the 52 arrestees with data on this question reported a significantly higher number of prior arrests – 10.8 compared to 6.7 arrests.

There are several possibilities that may explain this difference. First, those who were viewed as impaired during this arrest may 1) have a more extensive arrest record than those who were not impaired; 2), those who were impaired overestimated the number of prior arrests due to their impairment and/or general memory issues; and/or 3) those who were not impaired underreported the number of prior arrests. Using CJIS criminal history data to compare those who appeared impaired to those who did not, we found that those who appeared impaired had significantly higher number of arrests compared to the non-impaired group (on average, 15.7 career arrests vs. 8.97 arrests, significant at $p<.00$).[23] In essence, this alleviates concerns that those who were

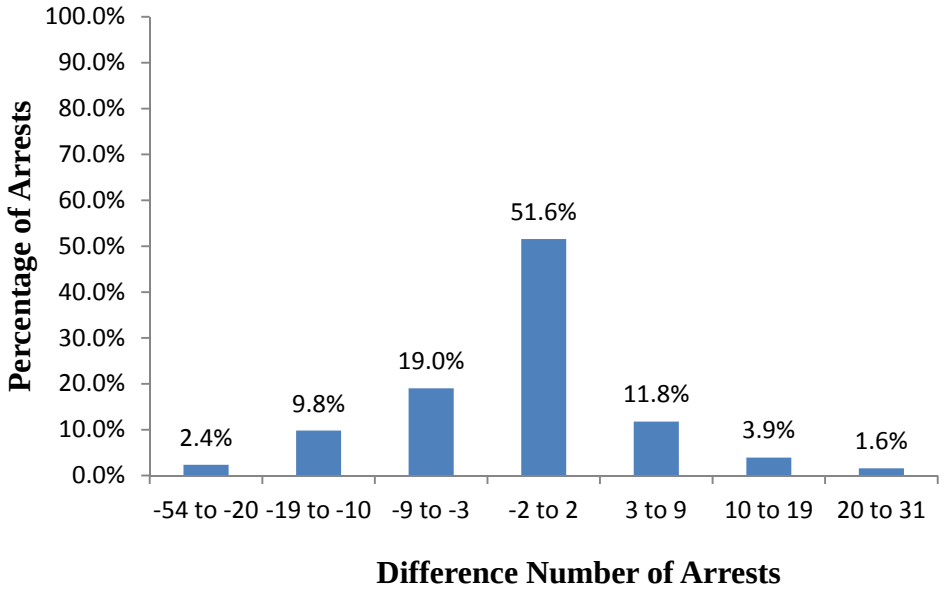
[22] Three of the 626 were arrested more than once and completed more than one proxy during that week. Data from the first proxy instrument was used in the analysis for a final count of 623 unique arrestees.

[23] This should be viewed with caution as there were only 53 arrestees who completed the proxy who appeared impaired at booking and had records in the CJIS data. The impaired group also had significantly longer criminal careers (185 months or 15.4 years compared to 124 months or 10.3 years, significant at $p<.01$), and had been incarcerated (defined as serving 1 day or more) more frequently with an average of 6.6 incarceration periods

impaired significantly biased the proxy data because those who were impaired had in fact more prior arrests.

The next step was to observe the difference between the self-reported number of prior arrests and the official record of the total number of arrests over their career. Given that the proxy asks arrestees to include *juvenile* arrests, and CJIS criminal history records contain only *adult* records, we expected to find a difference in the two sources of data. Upon conducting the analysis, we found that among the 510 individuals who both completed all three questions on the proxy and had CJIS criminal history data, more than half (52%) self-reported the same number of prior arrests as in official records or were within 2 arrests (either under or over reported), while 31% over or under reported from 3 to 9 arrests and the remaining ranged in reporting their arrest history from under-reporting by 54 arrests, to over-reporting by 31 arrests (see Figure 4).[24]

Figure 4: Difference in Prior Arrests - Self-Reported vs. Official Data N=510



The other two questions in the proxy risk assessment – current age and age at first arrest were also compared using proxy self-report vs. official CJIS data. For current age, 94% of 510 arrestees reported their age as within 1 year (over or under) of the age calculated from official records. Age at first arrest was more variable, among these 510 arrestees, 370 (or 73%) reported they were *younger* at first arrest than CJIS records indicates. As noted above, this was expected as the question posed to the arrestees was "how old were you when you were first arrested, *including juvenile arrests*?" and CJIS data consists of *adult* criminal history records. Looking at

compared to 3.3 periods in the non-inebriated group (significant at p<.01). However, the impaired group were generally less serious offenders. Over the course of their career, they were less likely to be charged with a felony (13% of all charges were a felony compared to all charges levied on the non-inebriated group with 19% felony charges, significant at p<.01) and less likely to be convicted of a felony (12% of all convictions were a felony compared to 24%, significant at p<.000). The impaired group also had a lower seriousness category of offenses for both charges and convictions (significant at p<.01).

[24] Analysis was conducted excluding those who appeared impaired and the results were substantively the same.

the data again, we note that the majority of those arrestees (271 of the 370 who report they were younger) said they were 17 years old or younger when first arrested. Among the remaining arrestees on this question, 79 (15%) reported the same age at first arrest as indicated in CJIS records, and 61 (12%) reported a first arrest at an older age than CJIS records indicate.

Overall, while the proxy risk self-report tool does not map perfectly to official records, it appears that the majority of arrestees are reasonably accurate with respect to self reporting this information. What remains, however, is to see if in combining these three questions to create the cut scores determines whether or not the majority of individuals would be assigned to the same risk group (low, middle or high) based on the proxy self-report data vs. the official data. This is necessary given the risk level assignment triggers the level of resources and services provided to the arrestee. The discussion concerning establishment of cut scores and this comparison follows.

Defining Cut-Scores

The proxy cut-scores were calculated by dividing the 623 arrestees, for each proxy question, into approximately three equal groups. For example, among all arrestees, 34.2% were 24 years old and younger; 32.6% were from the age of 25 to 38 and 34.2% were 39 years old and older. Each question was reviewed this way for all arrestees.

The final distribution of the proxy items for those arrested in Baltimore MD during this proxy pilot is detailed in Table 4. Arrestees who are 24 or younger receive the highest risk score of a 2, those who are from the age of 25 to 37 score a 1, and those who are 38 or older receive a 0.

In terms of age at first arrest, those who report having been arrested for the first time when they were 15 or younger received the highest risk score of 3 points; those arrested between the ages of 16 to 18 score 2 points, and those whose first reported arrest was 19 or older received 1 point.

Finally, the arrestees who report having been arrested 2 or fewer times in the past were categorized as lowest risk with a score of 1, those arrested between 3 and 6 times were medium risk with a score of 2, and anyone with 7 or more arrests would be highest risk and receive a 3 on that question.

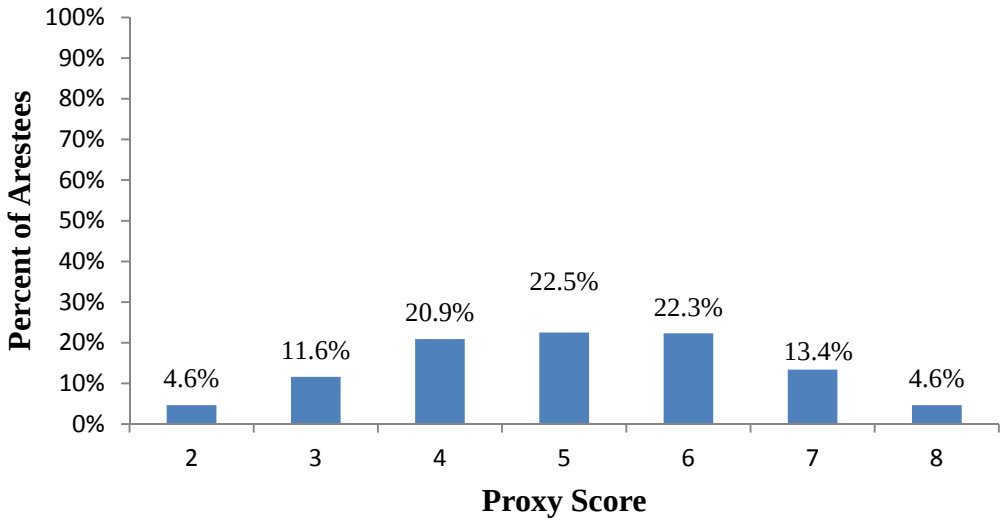
Table 4: Proxy Score Criteria for Baltimore City Detention Center

Point Value	0	1	2	3
Current Age	>=38	25 to 37	0 to 24	
Age at First Arrest		>=19	16 to 18	0 to 15
Priors		0 to 2	3 to 6	>=7

Overall Proxy Score

The 3 scores for each question for each arrestee were added to calculate an overall proxy risk score. Arrestees can score between 2 (lowest risk) and 8 points (highest risk). Among the 560 arrestees with data for all 3 questions where a total score can be determined, the averaged proxy risk score was 5.05 (see also Figure 5, which illustrates the distribution of the proxy scores).

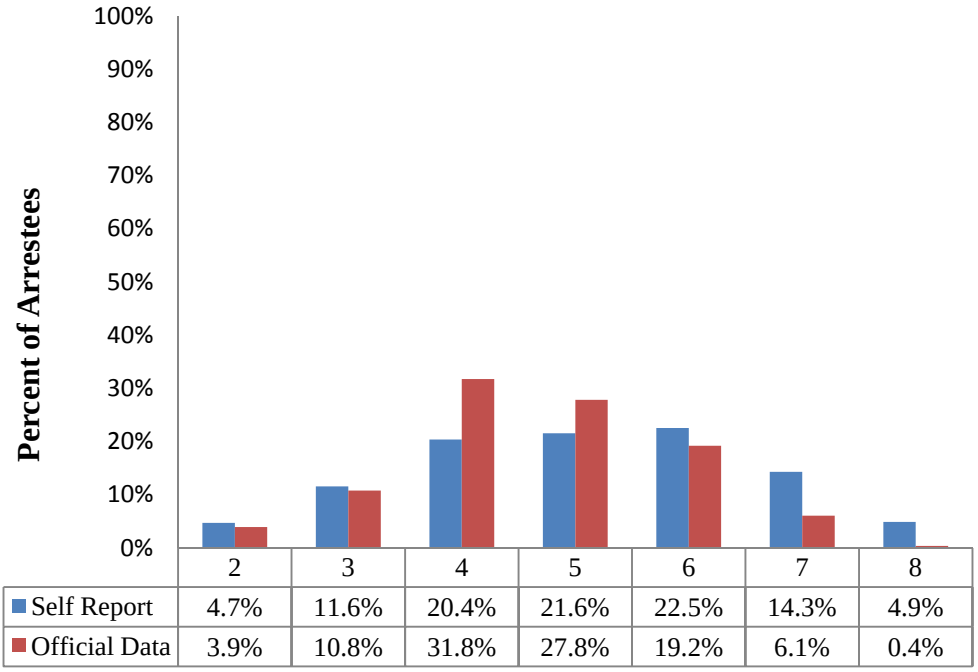
Figure 5: Distribution of Proxy Scores N=560



Then, the proxy score was created using the CJIS official data and compared to the self-reported proxy data provided at the time of arrest. Age was calculated based on date of birth, age at date of first arrest was calculated on date of birth and on the first recorded date of arrest in the CJIS criminal history file, and number of prior arrests was likewise calculated by summing the number of unique arrests reported in the CJIS records. Figure 6 illustrates the findings when observing the 510 individuals matched in CJIS and who self-reported proxy data.

As indicated below, the risk scores based on the proxy self-report data are generally equivalent to proxy scores created from the CJIS data for those scoring a 2, 3 or 6; differences emerge for those scoring 4, 5, 7 and 8. It would appear that based on self-report, fewer people would score a 4 and 5, and more people would score a 7 or 8. However, these raw scores are intended to be translated into a risk label of low, middle, and high risk. That translation is discussed below, and again, these 510 arrestees are compared on the risk label based on the score produced from the official history data, and the score produced using the self-reported proxy assessment tool.

Figure 6: Comparison of Risk Scores Self-Report vs. Official Data N=510



Risk Labels: Self-Report vs. Official Data

The final decision on attributing the labels of low, medium, or high risk based on the distribution of the proxy scores will likely depend on how DPSCS wishes to implement a risk-based reentry strategy and the resources available. For example, if resources are strained, ("fewer resources") DPSCS could determine that those scoring from 2 to 4 (37% of the 560 arrestees in the pilot test) on the proxy are low risk and receive only information at exit from the facility; while those scoring 5 to 6 points (45%) would be medium risk, who may be eligible for in-reach by providers for services once released; and those scoring 7 and 8 (18% of arrestees) would be high risk who could be targeted not only for additional assessment with a comprehensive tool such as the LSI-R, but also in-reach by providers, and released with a reentry plan for addressing those needs. However, if resources were more readily available ("more resources"), then perhaps those who score 2 to 3 would be low risk (16% of the sample) and those scoring 4 to 6 points (66%) would be medium risk, with those scoring 7 to 8 points remaining the same at 18%.[25]

Figure 7 and Figure 8 provide a cross-reference of the risk level categorization based on self-reported proxy data and the scores calculated from CJIS official criminal history. The italicized numbers across the diagonal are the cases where there is agreement across the two data sources in the risk level assignment. As evidenced by these figures, the degree of agreement of the risk level to which arrestees are labeled varies depending on whether the categorization of risk is based on the "fewer resources" or "more resources" cut scores.

[25]See Bogue, Woodward & Joplin (2006) for other considerations that may drive the cut-score decision.

Using the **fewer resources** cut scores, of the 510 arrestees, there is agreement among 306 (60%) arrestees, and disagreement among 204 (40%) arrestees. Specifically, of the 510 arrestees, 98 were rated as high risk based on proxy data, and there were 22 cases where both the proxy and CJIS risk label agree. Of the remaining 76 rated as high risk based on the proxy, 13 (13%) would be erroneously categorized as low risk and 63 (64%) as medium risk, if scores were to be based on CJIS criminal history data. Similarly, there is agreement among 137 (61%) of the 225 arrestees labeled as medium risk based proxy self-report data, while 77 (34%) would be labeled as low risk and 11 (5%) would be labeled as high risk if CJIS data were utilized instead of self-report. Finally, among the 187 arrestees labeled as low risk based on the proxy, there is agreement on 147 cases (79%), while 40 (21%) of those low risk arrestees would be labeled medium risk based on CJIS data.

Similarly, if the cut scores are based on having **more resources** available, there would be agreement between the self-reported proxy data and CJIS data for 361 of 510 (71%) of arrestees, with none of the high risk individuals receiving a low-risk classification, while 76 (78%) of the 98 high risk arrestees would be classified as medium risk. The majority of the medium risk would be appropriately classified (88%), while 8% would be labeled as low risk and 3% as high risk. Among the low risk, 42% would be labeled as medium risk.

Figure 7: Risk Label, Fewer Resources - Self-Report vs. Official Data N=510

		Self-Report			
		Low	**Medium**	**High**	Total
	Low	***147***	77	13	237
Official Data	**Medium**	40	***137***	63	240
	High	0	11	***22***	33
Total		187	225	98	**510**

**Based on cut scores where 2 to 4=low risk; 5 to 6=medium risk; 7 to 8=high risk

Figure 8: Risk Label, More Resources - Self-Report vs. Official Data N=510

		Self-Report			
		Low	**Medium**	**High**	Total
	Low	***48***	27	0	75
Official Data	**Medium**	35	***291***	76	402
	High	0	11	***22***	33
Total		83	329	98	**510**

**Based on cut scores where 2 to 3=low risk; 4 to 6=medium risk; 7 to 8=high risk

Overall, as those who completed the proxy are representative of the overall population, and as there is general agreement between CJIS official records and proxy self-report on risk label (between 60% and 71% depending on the cut scores), the proxy risk assessment tool can be considered as a valid screening tool to be used at booking.[26] However, there are limitations to the proxy that should be considered prior to implementation, as detailed below.

Validity and Limitations

Generally speaking, assessment tools attempt to categorize an offender's needs and risks to predict recidivism and to provide a roadmap of needs to be addressed in order to effectively ameliorate future offending. In the current context, the proxy is intended as a prescreening tool to guide the level of services and trigger additional assessment to meet the goal of reducing recidivism.[27] There is support in the literature for use of the proxy in this fashion. In Hawaii, arrestees who completed the proxy over a 15 month period were followed up for at least 6 months post-release (Davidson, 2005). They defined recidivism as "a new arrest on probation, parole or pre-trial revocation" (p.1). They found that those with higher scores on the proxy were not only more likely to recidivate, but did so in less time than those with lower proxy scores. In addition, Christensen, Jannetta & Willison (2012) note that two of the TJC sites using booking data found that the proxy accurately predicted who would return to the facility.

However, a study conducted in Salt Lake County Utah Adult Detention Center found mixed support for the proxy (Utah Criminal Justice Center, 2008). The researchers created two randomly selected groups of 500 arrestees and explored the predictive properties of the proxy combined with official criminal history records and additional demographics, and observed recidivism (defined as a new charge booking) for a 9 month follow-up period. While the total proxy score predicted recidivism for the first group, it did not for the second group. These researchers also looked at how the individual questions predicted recidivism and found that the self-reported number of prior arrests consistently predicted recidivism for both groups; however, there was no consistent impact of age at first arrest and current age on recidivism. There were no differences by race or gender.

These researchers also tested a combined model including four measures – 1) total bookings two years prior to the proxy; 2) drug offense at proxy; 3) public order offense at proxy) and 4) age at first offense reported at proxy. They found that the number of jail bookings in the prior two years was a good predictor of recidivism as "each additional booking in the two years prior to the proxy was associated with a 34% increase in likelihood of recidivism" and having a drug charge and public order offense "more than doubles the likelihood of recidivism" (p. 12). Instead of

[26] Conducting the proxy at booking is the most frequent practice at the TJC sites (Chirstensen, Jannetta & Willison, 2012). Alternatively, the proxy could be conducted following the Commissioner's Hearing to ensure that those who will be in the facility for more than 24 hours would be assessed, rather than assessing everyone at arrest. One option may be to add the proxy questions to the pretrial interview process, provided everyone is subject to an interview.

[27] Validating the proxy using recidivism as the outcome measure was beyond the scope of this project. In addition, it would not have been possible to conduct such a test at the current time as sufficient time needs to pass for those arrested in the week of October 21 to 28 to recidivate, and time for these activities to be reflected in CJIS records. (For example, the most recent arrest event in the CJIS data extracted in June 2013 was January 12, 2013). However, as the proxy data contains the State Identification (SID) number, this remains an option for the future.

conducting the proxy at booking, DPSCS could consider, in the event OCMS could be modified to automatically provide the number of bookings in the prior two years, having the booking officer assign a risk level based on that number of bookings in the prior two years and the current charge, rather than relying on arrestee self-report. This would require additional testing to determine and validate the cut scores to designate the low, medium, or high level in Baltimore, but it would be an option that relies on official booking records rather than arrestee self-report.

Another finding worth noting from the Utah study is that they found that the proxy score can't distinguish between the habitual misdemeanor offenders (who would likely be cataloged as medium to high risk due to frequency of arrests) and those offenders who are more serious offenders, but are arrested less frequently (and thus labeled as low or medium risk). The level of risk to the public and the treatment approach to these groups would likely vary; however, this supports the idea that the proxy is a brief screening tool where additional assessment is required to appropriately target treatment plans and resources.

A recent study by Vera Institute on the Comprehensive Transition Planning project provides another option for defining jail populations (Wei & Parsons, 2012). These authors studied the use of 4 measures contained in administrative data – age at admission to the jail, current charge, number of prior admissions, and recent admissions. Based on those measures, a "Service Priority Indicator" (SPI) was calculated ranging from 0 to 7, with individuals placed into one of four groups: low (score of 0); moderate (score of 1-2); high (score of 3-4) and very high (5-7) risk[28] (p. 3-4).

Wei & Parsons (2012) validated the SPI process by comparing the group levels by length of stay and readmission to the jail. Those who were categorized as very high "tend to be held in jail for longer periods and they are more likely to be released as sentenced inmates" (2012, p.4) and were more likely to return to jail. In contrast to the strategy proposed here, Wei & Parsons advocate working more closely with the sentenced population for a number of reasons including the difficulty in providing programming to detainees because their release is less predictable (e.g., they may be released or bond out of the facility at any time).

Given the findings overall, and the research evidence, it appears beneficial for the Baltimore facility to adopt either the proxy risk tool or incorporate measures from administrative data sources to triage those in the population who may have greater need for services and require additional assessment. The next challenge would be how to best incorporate either the proxy questions or include the review of administrative data into the booking process. Thereafter, DPSCS will need to determine how to best use the assessment information for identification of offenders by risk/level of need.

One option would be to generate a different color wrist band (or sticker to be added to the wristband) for medium and high risk individuals (e.g., blue for medium risk, green for

[28] The authors state the label of "High Risk" within this assessment and triage context should be relabeled as "High Service Priority" because this term is both less stigmatizing and less likely to be confused with "the classification system … commonly [used to classify] those of "high risk" to jail security" (Wei & Parsons, 2012, p. 3).

high risk).[29] This would enable service providers to easily identify individuals during in-reach sessions, and/or allow officers to call those individuals for services and/or for additional assessment by band or sticker color.

The next section of the report – Section IV - details how the proxy data was used in conjunction with CJIS and OCMS data to provide a portrait of the population by risk level. The data were further examined to explore the flow of individuals, by risk, release status, and length of stay in the facility to target reentry planning, and to inform the overall reentry strategy.

[29] There is the possibility that wearing a blue or green wristband or sticker may present issues related to privacy, and these concerns should be explored. However, I was advised that different colored wristbands (yellow, orange and pink) are currently used at the facility to designate detainees for different purposes such as medical (personal communication, Warden Scruggs, October 2012), thus, this may not be a barrier.

Section IV: Utilizing Proxy Data to Inform Reentry Planning

Conducting this proxy pilot allowed for setting risk scores based on the population, as well as providing a sense of the distribution of risk (e.g., number of individuals who are low, medium and high risk) within the facility. CJIS and demographic data were also compared by risk levels to further edify key differences between the designated populations. Finally, by obtaining the date and time of release from OCMS, this allowed for an analysis of the release flow from the facility. This, in turn, assists in answering questions related to resource allocation in the provision of reentry services. Population descriptions by risk level and the examination of release flow are described below.

Portrait of Population by Risk Level

Low Risk Population

There were 243 arrestees designated as low risk using the proxy data. These individuals were on average 39 years old (ranging from 19 to 77), 72% male, and 78% Black, 19% white, and 3% race unknown. CJIS data was available for 223 arrestees, and these data indicate that the low risk population has a 13 year criminal career, averaging 8.71 arrests, 32% conviction rate, 48% have spent one or more days incarcerated, averaging 3.2 times incarcerated over their career. Offender class for these low risk offenders was categorized by the most serious prior conviction.[13] Among the 153 with a conviction, 52% were convicted of a person offense, 36% drug crime, 7% property crime, 3% sex offense, and the remaining for traffic (<2%) and other[30] type of offense (<1%).

Medium Risk Population

There were 262 arrestees designated as medium risk. These arrestees were on average 31 years old (ranging from 17 to 63), 89% male, and 83% Black, 14% white, 2% race unknown and less than 1% Asian. CJIS data was available for 253 arrestees, and these data indicate that this medium risk population has a 10.5 year criminal career, averaging 10.47 arrests, 34% conviction rate, 57% have spent one or more days incarcerated, averaging 4.0 times incarcerated over their career. Offender class for these medium risk offenders was categorized by the most serious prior conviction.[13] Among the 192 with a conviction, 63% were convicted of a person offense, 28% drug crime, 4% property crime, and 5% for a sex offense.

High Risk Population

There were 101 arrestees designated as high risk. These arrestees were on average 25 years old (ranging from 18 to 39), 93% male, and 88% Black, 10% white, and 2% race unknown. CJIS data was available for 98 arrestees, and these data indicate that this high risk population has a 6 year criminal career, averaging 8.71 arrests, 35% conviction rate, 67% have spent one or more days incarcerated, averaging 3.0 times incarcerated over their career. Offender class for these high risk offenders was categorized by the most serious prior conviction.[13] Among the 78 with a

[30] Other offenses generally consist of nuisance or quality of life crimes including rogue and vagabond, pandering, urination in public, trespassing, consuming alcohol in public, and underage drinking.

conviction, 56% were convicted of a drug offense, 42% a person offense, and less than 2% for a sex offense.

Comparisons Between Low, Medium and High Risk Populations

The populations were further examined by testing for statically significant ($p<.05$) differences between the risk groups – as follows:

- There are more women in the low risk group than in the medium or high risk groups.

- As would be expected given older inmates score lower on the proxy risk tool, the low risk and medium risk populations are significantly older than the high risk population.

- Given that older individuals have a longer period to accrue a career, the low and medium risk populations have longer criminal careers than the high risk group.

- While those in the low risk group have a longer career, it is less serious than the high risk group; the low risk group has a lower average incarceration rate and fewer felony charges and convictions than the high risk group.

- Over the course of their career, the low risk group has a higher number of least serious category charges than the medium risk group; *but there was no significant difference between the low risk and high risk group on the number of least serious charges*. This would appear to support the findings of the Utah study that the proxy score doesn't distinguish the low-level habitual misdemeanor offenders (HMOs) who are classified as high risk based on frequency of prior arrests and who cycle repeatedly in and out of the jail.

- Comparing the risk groups by offender class (person, sex, drug, weapons, prostitution, property, traffic, and other offenses) the medium risk group has a higher number of person convictions compared to the low and high risk groups. (Again, this may be because the high risk group contains HMOS – individuals who have a high number of prior arrests, but of a less serious nature).

- The low risk group is convicted of other type offenses (nuisance/quality of life crimes) at a higher rate than those in the medium or high risk groups. The low risk group also has fewer weapons charges than the medium or high risk groups.

Overall, this examination indicates that the proxy questions of current age, age at first arrest, and total number of prior arrests generally identifies the risk populations. These findings also support that those who are classified as high risk should be triggered to additional assessment – particularly due to the comingling of low level HMOs in the high risk pool, and that these

individuals likely need different and/or additional services to address the causes of their repeated offending.[31]

Risk Level by Release Status and Length of Stay

While these findings above indicate general agreement between CJIS official records and the proxy self-report data, when viewed from the risk label designation perspective, there remains a concern related to misclassification of the high risk group.

Specifically, if risk labels are assigned based on self-reported proxy data *and* the cut scores were based on the assumption that fewer resources are available to assist those in the jail, a larger percentage of high risk arrestees would be labeled as low or medium risk and thus would not be eligible to receive either in-reach or additional assessment. Obviously the cut scores and risk label assignment decision is influenced by capacity: how many low, medium, and high risk arrestees will flow into the institution, how many will be released on bond, on their own recognizance, or without charge, and how many would be committed to the institution. These issues are explored below.

In addition, this report returns more directly to the issue of capacity following the discussion of the related findings of the Window Replication study and the LSI-R assessment data. Based on extrapolations from analysis of the various data sources, the flow through the facility is estimated to inform the overall reentry strategy plan. For both the present release and length of stay review by risk level, and for the later flow discussion, these estimates are based on using the cut scores where fewer resources are anticipated (so that those who score 2 to 4 are low risk; 5 to 6 are medium risk; and 7 and 8 are high risk).

The figures below utilize both the proxy scores and the OCMS data to illustrate release status by risk level (Figure 9), and length of stay by risk level (Figure 10).[32]

As indicated in Figure 9, among the 603 individuals who both completed the proxy and with release data, a small percentage of all three risk groups were released without charge, released from court, released at the expiration of their sentence and released with the status of exceptional. As would be expected, a large percentage of low risk individuals (59%) were released on their own recognizance, as were 46% of medium risk and 31% of high risk individuals. A fair percentage (37%) of high risk individuals were released on bail, as were 29% of medium risk and 23% of low risk individuals. Among those detained, 19% were high risk, 14% were medium risk and 11% were low risk.

[31] Unfortunately, those who completed the proxy and those who completed the LSI-R assessment were not the same individuals. As a result, we are unable to test this with the current data available. Should DPSCS choose to implement the proxy, followed by LSI-R assessment for the high risk group, the LSI-R results should inform programmatic approaches for the HMO population.

[32] Excluding juveniles (N=2).

Figure 9: Release Status by Risk Level N=603

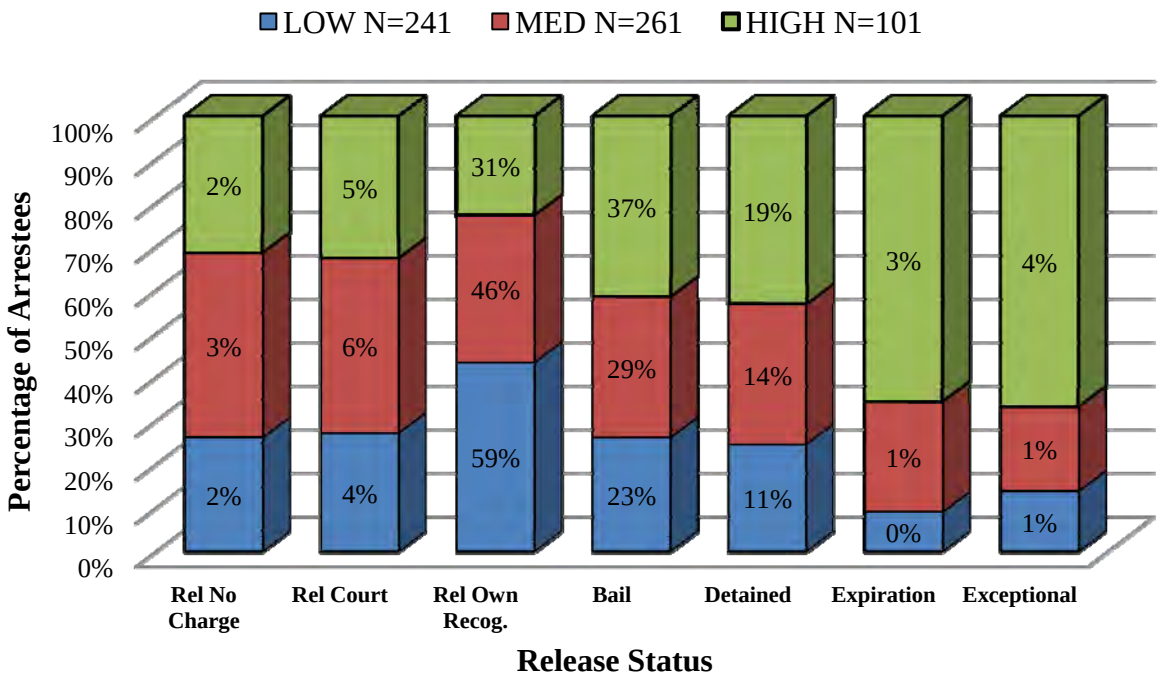
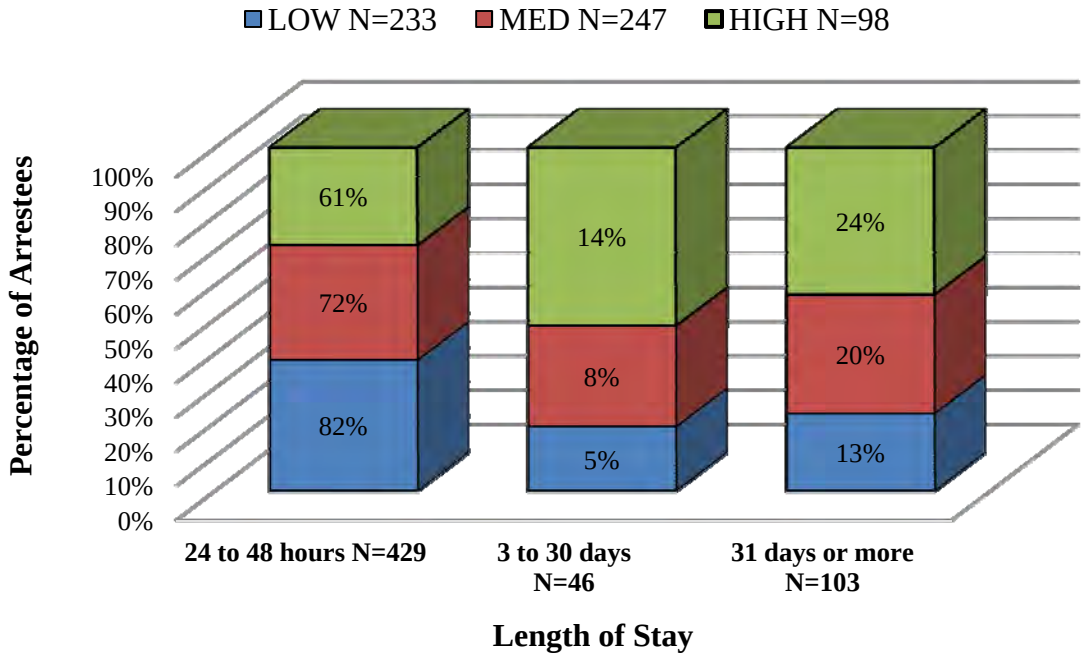


Figure 10 looks at length of stay by risk level. The numbers here also make sense – a large percentage of the low risk individuals (82%) were released within 24 to 48 hours, as were 72% of the medium risk and 61% of those designated as high risk using the proxy. Among those detained, 14% of high risk remained 3 to 30 days, 24% remained 31 days and more. In contrast, fewer of the medium risk and low risk individuals were in the facility for longer than 48 hours.

Figure 10: Length of Stay by Risk Level N=578



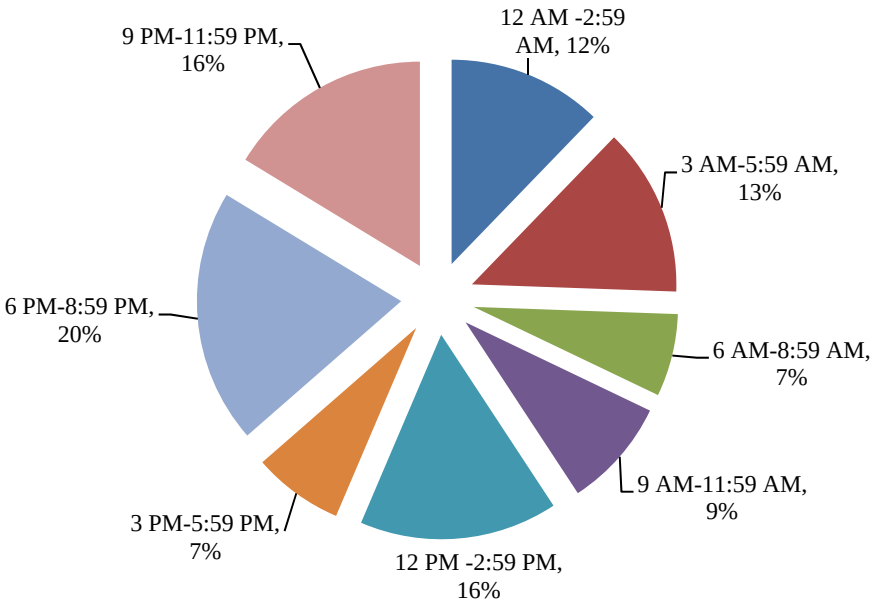
Again, the proxy is intended as a screening tool that provides a rough proximate of risk level for designation of an arrestee for provision of information, additional assessment, and reentry services. The findings related to risk level and release status and length of stay provided in the discussion above are consistent with what one would expect. More low risk individuals would be released, and released at an earlier time, than those who are medium and/or high risk.

Another consideration in terms of provision of planning reentry services is to observe when individuals are released – both by day of the week and time of day. This discussion follows.

Time of Release

If there were a pattern to when individuals are released, this could help to determine if it would be fruitful for service providers to station staff at the facility at particular times of day. Overall, based on OCMS data on the 810 arrestees who were subsequently released, there appears to be a fairly even distribution among the different times of day (Figure 11). The highest number of arrestees (36%) were released from 6 PM to midnight; followed by 25% from midnight to 6 AM, 16% in the morning from 6 AM to noon, and the remaining 23% released from noon until 6 PM.

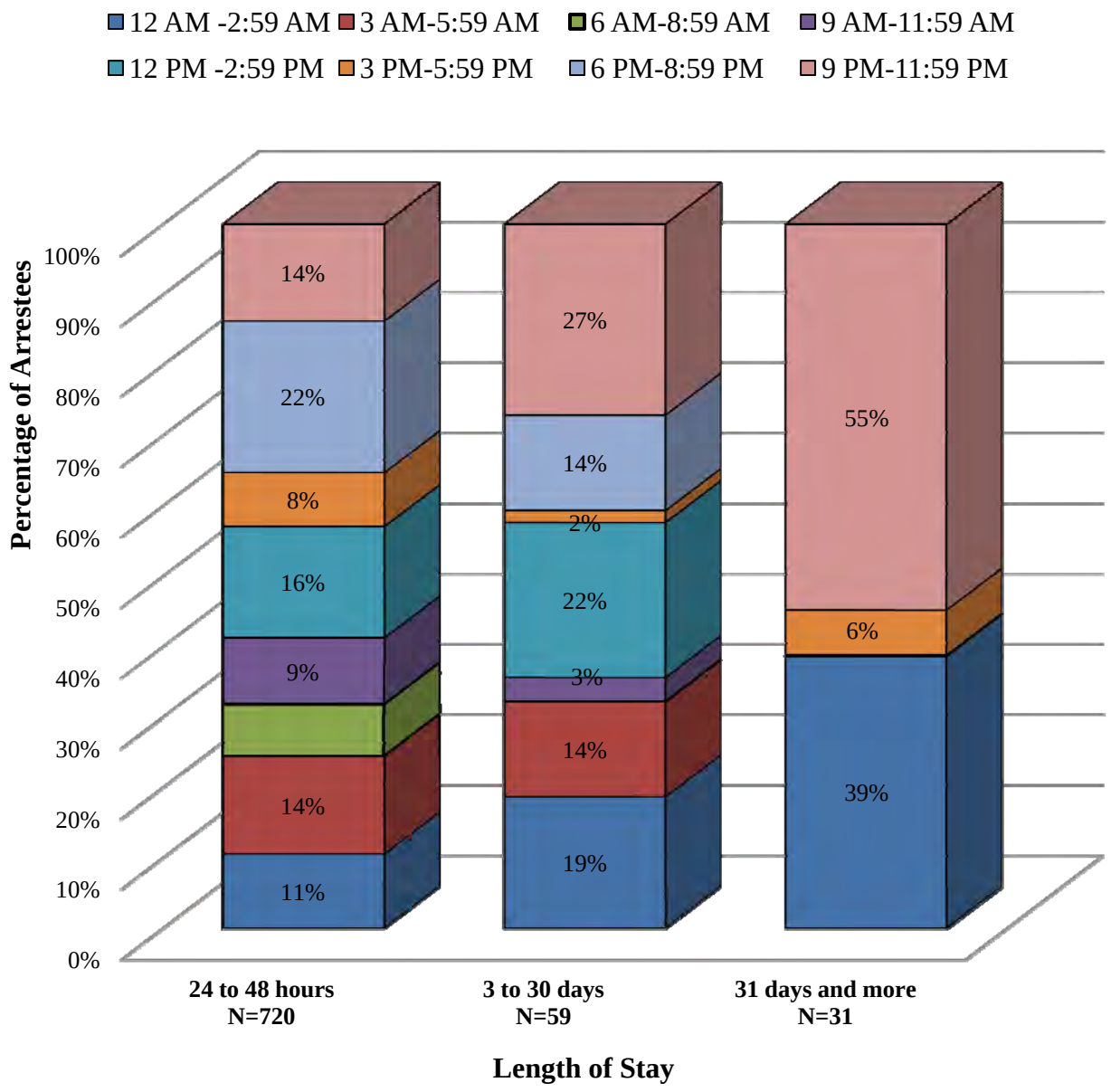
Figure 11: Time of Release N=810



However, as exhibited in Figure 12, the evenly distributed release times are principally driven by those released within the first 48 hours. There is an interesting pattern among those who have been in the facility for more than 31 days – the majority of individuals (94%) were released between 9 PM and 3 AM. Among the 28 individuals released at these times, 43% were released on bail and 57% were released from court. It may be worth reviewing the release process to ascertain if more of those who have been detained in the facility for a substantial length of time could be released during the day when the property room is open, and public transportation is readily available.

A recent change in the release process may assist in this effort. Effective June 26, 2013 all releases from BCDC and Central Booking will go through the BCBIC Eager Street lobby, and the property area will now be open 24 hours day, 7 days a week.[33] Although those released after the finance office is closed will need to return Monday to Friday from 10 AM to 2 PM to retrieve monetary property, the new hours of the property room will undoubtedly make it easier for individuals to obtain their property upon release.

Figure 12: Time of Release by Length of Stay N=810



[33] DPSCS Detention Reentry Model Development Committee Meeting Notes June 10, 2013

Another consideration for implementing a reentry plan is that elements of the plan are predicated on community service providers connecting with individuals near or at the time of their release. The question for the service provider would be: what is the best day and time to site a staff person in the lobby of the jail in order to make that connection? This is particularly relevant within the current suggested strategy of in-reach by community providers to those who were identified as medium and high risk based on the proxy, and who have been in the facility for more than 48 hours. This is explored in Figure 13.

Admittedly, the final number of those who fit these criteria is small – 50 arrestees – however, this represents only those who were arrested during a single week period *and* who completed the proxy. Given that 59% of those who were arrested completed the proxy, it is possible that a total of 80 individuals per week would be medium/high risk and would be released after being held in the facility for more than 48 hours. Extrapolate this figure by 52 weeks and this equates to 4,160 individuals per year or 346 a month. This level of traffic may justify the provision of service provider staff at the jail.

Based on Figure 13, two of the best times to reach these medium/high risk individuals would be from 9 PM to Midnight, and Midnight to 3 AM – 60% were released at these times. Among the 30 medium and high risk individuals leaving the facility during these hours, 57% were bailed out, 33% were released from court, and the remaining were released at the expiration of their sentence or own recognizance. Service providers may also wish to focus their efforts on Tuesday, Wednesday, Thursday, and Saturday evenings, when 77% of individuals are released.

Figure 13: Medium/High Risk Detained >48 Hrs Release Day of Week/Time of Day N=50

	Day of Release							
Time of Release	**Sunday**	**Monday**	**Tuesday**	**Wed.**	**Thurs.**	**Friday**	**Saturday**	***Total by Time***
12 AM - 2:59 AM	*1* 33%		*3* 30%	*2* 14%	*2* 50%	*1* 20%	*4* 80%	***13*** **26%**
3 AM - 5:59 AM	*1* 33%	*2* 22%					*1* 20%	***4*** ***8%***
6 AM - 8:59 AM								***0***
9 AM - 11:59 AM								***0***
12 PM - 2:59 PM		*1* 11%	*1* 10%	5 35%		*1* 20%		***8*** ***16%***
3 PM - 5:59 PM		2 22%						***2*** ***4%***
6 PM - 8:59 PM		*1* 11%	*1* 10%	*2* 14%		*2* 40%		***6*** ***12%***
9 PM - 11:59 PM	*1* 33%	*3* 33%	*5* 50%	*5* 35%	*2* 50%	*1* 20%		***17*** ***34%***
Total by Day	***3*** ***6%***	***9*** ***18%***	***10*** ***20%***	***14*** ***28%***	***4*** ***8%***	***5*** ***10%***	***5*** ***10%***	***50*** ***100%***

A similar analysis was conducted on all those released within the first 48 hours, regardless of risk status.[34] Those results indicate that if service providers wish to staff an information booth at the Eager Street lobby, they should have staff present from 6 PM to Midnight on Sunday, Monday, Thursday, Friday and Saturday, when the highest percentage of those released within 48 hours will leave the facility. Over half (54%) of those released on Sunday leave in this time frame, 38% leave during these hours on Saturday, as do approximately 33% of those on Monday, Thursday and Friday.

In Section V of the report, we delve into two additional sources of self-report data to profile the risk and needs of BCDC detainees and inmates. The two data sources consist of survey data from the Window Replication study of releasees and detainees, conducted at BCBIC and BCDC in 2009, and Level of Service Inventory Revised (LSI-R) data from assessments conducted on a sample of detainees and sentenced inmates from November 2012 to March 2013.

[34] Available upon request.

Section V: Using Survey and Assessment Data to Profile Risk/Needs

As previously noted, data from multiple sources were included in this project in order to describe and define those processed through BCDC and Central Booking. In addition to the OCMS and CJIS records, two additional primary sources of data are the Window Replication Study (both the release population sample and a sample of 200 male detainees surveyed in 2009) and the Level of Service Inventory-Revised (LSI-R) assessment conducted by DPSCS Office of Transition staff on male and female sentenced inmates and detainees between November 2012 and March 2013. The methodology and description of these data and the relevant findings are detailed below.

Findings from the Window Replication Study

Data from the Window Replication Study was examined for two populations – 142 individuals surveyed within hours of release from the Eager Street Lobby and Jail Industries Building, and among 200 male[35] detainees housed in the Jail Industries Building in 2009. Brief descriptions of the surveys and method of administration, and overall results follow. The data is then reported by length of stay for the release and detainee populations to inform the strategic models considered for this report.

Release Population Survey[36]

The survey for the release population consisted of 28 questions including the status of release (whether charges were dropped, released time served, or on bond/ROR), their plans on where they would be staying the night of their release, the form of transportation to this location, and their assessment of future needs. In addition, the survey captured information on possession of personal property when arrested and access to documents required to obtain a State Issued ID, a brief employment and health history (including whether on medications, whether received those medications while detained, whether released with a supply of medications, and if not, what their plans were to obtain their medications) as well as demographic information (race, age and gender).

The Release Population Survey was administered in two locations: the lobby of the Baltimore City Central Booking and Intake Facility (BCBIC) 401 Eager Street ("Eager Street"), and the release area of the Baltimore City Detention Center (BCDC) Jail Industries Building at 531 East Madison Street ("JI Building"). Data was collected by staff members of The Baltimore City Mayor's Office on Criminal Justice (hereinafter "survey staff") who conducted the surveys over 22 days from January 27, 2009 to October 5, 2009. Over 22 days of survey administrations, 93 surveys (65%) were obtained in the morning and early afternoon hours between 8 AM and

[35] See The Window Study by McLean, R., with Robarge, J. & S. Sherman (2005) of interviews with 148 female detainees in Baltimore. http://www.powerinside.org/uploads/reports/WINDOW.Report.FinalRev.pdf

[36] For more information about the methodology and outcomes of the study, see Flower and the Window Replication Partners (2009) Baltimore City REP/PI Window Replication Project Preliminary Analysis of Survey Results Report to the Division of Pretrial Detention and Services, Department of Public Safety and Correctional Services. Available from author upon request.

2 PM, 5 surveys (3.5%) conducted in the afternoon from 2 to 5 PM, 18 surveys (12.5%) in the evening from 5 to 9 PM, and 26 surveys (18%) from Midnight to 3 AM. Friday was the most frequent day upon which surveys were conducted (59 surveys or 41%), followed by Wednesday (39 surveys or 27.5%), Thursday (22 or 15%), Tuesday (10%) and Monday (6.5%). Surveys were not conducted over the weekends nor during the very early morning hours of 3 to 7 AM.

A minimum of two people were available during each survey administration. Individuals leaving the Eager Street Lobby and those awaiting release from the JI Building were approached by survey staff and asked to take part in the survey. The survey was administered one-on-one with survey staff filling in the responses on the form. Once the survey was complete, the respondent was given an incentive (in the winter months, respondents were given a pair of gloves, and this was later substituted with a bus token) along with resource materials.

The 142 release respondents were on average 35 years old (ranging in age from 16 to 71), 86% were male, and 82% were Black, 16% White. The average length of stay for the release sample (from date of arrest to date of the survey) was 32 days, ranging from 1 to 325 days, with the majority (71%) released either on bond or own recognizance; 27% left time served; and 2% had charges dropped. A little less than half were employed (45%) and a quarter (27%) was receiving some social service benefits such as Food Stamps, TANF, and Social Security disability. Most of the release sample described themselves as stably housed with 86% stating they can stay where they were living for 30 days or more. Most (88%) also had a state ID card, a birth certificate (65%) and social security card (59%).

In exploring prescription medication issues, of the individuals who responded to this question, 38 people (or 27%) were taking medications for either a chronic condition, or another prescription medication, or both. Of the 38 taking prescription medications 61% received their medications while in custody and 46% were released with a supply of medications. The quantity of the supply varied – with most (7 people or 44%) receiving 11 to 29 days of medications, and 3 people received a 6 to 10 day supply and 3 others received a 3 to 5 day supply. Thirty-eight percent have medications at home or at the pharmacy, while others plan to go to the free clinic or Healthcare for the Homeless to re-fill their supply (31%). Another 31% do not have a current prescription or don't know how they will resolve the issue when their medications run out.

Finally, the 142 individuals listed the following services as useful on release – transportation (42%), employment (38%), job training (35%), housing (27%), education/GED (26%) basic health care (20%), drug treatment (18%), food (18%) and dental care (15%).

Detainee Population Survey[37]

The survey for the male detainees consisted of 182 self-administered questions over fifteen broad areas of interest including the detainees' criminal history, income and employment history and future plans, education and literacy, family and friendship relationships, leisure time activities, measures of neighborhood safety, problem solving and decision making skills, social skills and

[37] For additional discussion of the methodology and outcomes from the detainee sample, see Flower and the Window Replication Partners (2010) Adjusting The Lens: A Window Into The Needs of Men in Jail available at http://www.abell.org/pubsitems/cja_windows1110.pdf

self-esteem, health (sexual, physical and mental health) and history of substance use and interest in treatment. In addition, the survey queries their anticipated conditions following their release (where they will be living once released; the form of transportation to this location, and assessment of needs including information on access to documents required to obtain identification), demographic information (race, age, martial status, sexual orientation) and information related to how safe from physical, mental or emotional harm they felt in BCDC and what types of programs they would be interested if available in the facility.

The sample consisted of males detained in the Jail Industries Building in a six week period from May to July 2009. Surveys were administered principally by Catholic Charities Maryland Reentry Partnership staff, assisted by a Choice Research Associates Research Intern (hereinafter referred to as "Window Replication survey staff" or "survey staff"), with a minimum of two people per administration. Male detainees were called by correctional officers from a list of randomly sorted bed numbers, and asked to go into the cafeteria, where Window Replication survey staff waited. Consent forms were distributed and once returned, the surveys were distributed with an envelope for respondents to place and seal their completed survey.

All survey questions were read aloud, although respondents were advised they could complete the survey at their own pace. If anyone had questions, they could raise their hand and a survey staffer would assist. Once the individual completed their survey, they raised their hand, whereby the survey was picked up by Window Replication staff, and after ensuring the envelope was sealed, gave the respondent the incentive envelope containing a pad of paper, a small pencil, and resource lists of local services available to them once released.

The 200 male detainee respondents were on average 39 years old (ranging in age from 18 to 62), 84% were Black, 11% White and 5% identified as other. The majority of detainees (59%) were single, never married; and 75% were fathers. The average length of stay for the detainee sample (from date of arrest to date of the survey) was 67 days, ranging from 1 to 1,024 days.

Almost half (48%) had less than a high school education, with 31% having either a GED or high school diploma and 21% had at least some college education. Among the 200 detainees, 36% were employed and 46% were receiving some social service benefits such as Food Stamps, TANF, and Social Security disability. Most of the detainee sample described themselves as stably housed with 63% stating they can stay where they were living for 30 days or more. A little more than half (55%) also had a state ID card, while 70% had a birth certificate and 68% had access to their social security card.

The 200 detainees listed the following services as useful on release -- housing (64%), employment (62%), food (47%), transportation (46%), dental care (46%), basic health care (43%), job training (40%), drug treatment (35%), education/GED (29%) and obtaining an ID (29%).

The Window Replication study samples were then combined to describe the population and indicate the needs by length of stay. Among the 342 respondents, 23% had been in the facility for up to 48 hours, 28% had been in the facility for 3 to 30 days, 28% for 31 to 90 days; and the remaining 21% had been in the facility for 91 or more days.

Table 5 provides information about the 3 groups reviewed for this report. Generally speaking, the 76 respondents who were about to be are released after spending 48 hours or less are younger than those held for 3 to 30 days and 31 to 90 days (32 years old vs. 39 vs. 40 years old).

In addition, there are fewer African Americans released within 48 hours than in the other two groups (79% vs. 82% vs. 86%, respectively) and the majority of women surveyed (85%) were released within the first 48 hours (17 of 20 women, with the remaining 3 released within 30 days.)

In terms of needed services, those 76 people about to be released after 48 hours in the facility ranked transportation[38] as most useful service (42%); followed by employment (33%), job training (30%) and education/GED (24%). Housing was the next useful service (18%), then food (16%), drug treatment (16%), legal services (12%), mental health care (11%), and basic health care (9%).

Among 98 respondents who had been in the facility from 3 to 30 days, the most useful services were reported as employment services (54%), housing (53%), dental care (47%), transportation (44%), food (43%), job training (40%), basic health care (40%), applying for health care benefits (33%) and vision care (31%).

For those 97 individuals who had been in the facility for 31 to 90 days, employment was the top need (62%), followed by housing (60%), dental care (44%), transportation (42%) applying for health benefits (42%), basic health care (40%), food (38%), job training (38%), drug treatment (36%) and applying for benefits (e.g., TANF and food stamps) (34%).

Not surprisingly, these findings support the contention that this is a population with many needs – from basic living (housing, food) to employment to health care. The limitation to these data is that it is based on a self-report where the individual was provided a list of services they felt would be useful - and it is possible that their perception of what they needed most - at the moment they were asked – was influenced by both the environment and the proximity to (or distance from) their release from the facility. Additional analysis conducted on these data found significant differences between the stated needs of those who were about to be released and those who were detained in the facility.

[38] See also Flower (2012) Baltimore City REP/PI Window Replication Project Brief on Transportation, for more information on transportation and time of release.
http://www.choiceresearchassoc.com/documents/transportation_from_jail_final_102012.pdf

Table 5: Window Replication by Length of Stay - Demographics and Useful Services

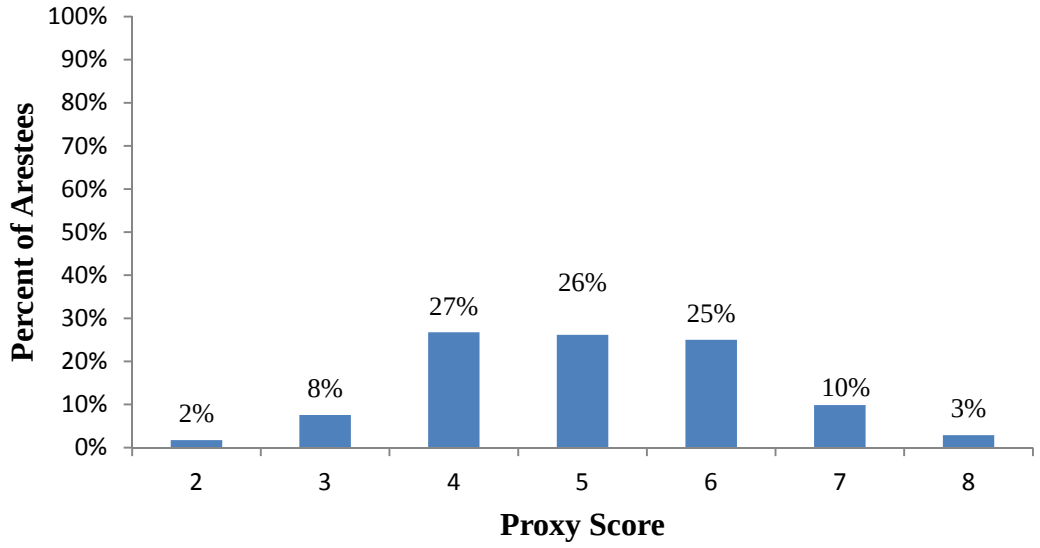
	Released within 48 Hours N=76 Release Sample			***Detained 3 to 30 Days N=98 Release and Detainee Samples***			***Detained 31 to 90 Days N=97 Release and Detainee Samples***		
	N	*Range*	*Mean (SD)*	*N*	*Range*	*Mean (SD)*	*N*	*Range*	*Mean (SD)*
Age	74	16 to 71	32.6 (12.3)	91	18 to 62	38.8 (11.3)	88	19 to 62	39.7 (11.3)
	N	*Freq*	*%*	*N*	*Freq*	*%*	*N*	*Freq*	*%*
Race	*73*			*94*			*92*		
Black		58	79%		77	82%		79	86%
White		13	18%		14	15%		8	9%
Other		2	3%		3	3%		5	5%
Gender	76			98			97		
Male		58	77%		95	97%		97	100%
Female		17	23%		3	3%		0	0%
Useful Services Upon Release	*N*	**Ranking**	**%**	*N*	**Ranking**	**%**	*N*	**Ranking**	**%**
	76			98			97		
Employment		2	33%		1	54%		1	62%
Job Training		3	30%		6	40%		8	38%
Education/GED		4	24%		15	21%		12	31%
Transportation		1	42%		4	44%		5	42%
Housing		5	18%		2	53%		2	60%
Shelter		16	4%		14	22%		16	18%
Food		6	16%		5	43%		7	38%
Clothing		13	5%		12	29%		11	33%
Apply for Benefits (TANF, Food Stamps)		24	1%		8	37%		10	34%

	Released within 48 Hours N=76 Release Sample			***Detained 3 to 30 Days N=98 Release and Detainee Samples***			***Detained 31 to 90 Days N=97 Release and Detainee Samples***		
Apply Health Care Benefits		25	1%		9	33%		4	42%
Basic Health Care		10	9%		7	40%		6	40%
Mental Health Care		9	11%		18	18%		19	15%
Drug Treatment		7	16%		11	31%		9	36%
Help Getting Meds		20	4%		21	18%		18	15%
Vision Care		17	4%		10	31%		14	24%
Dental Care		11	8%		3	47%		3	44%
Needle Exchange, Harm Reduction		26	1%		26	5%		25	7%
HIV/STD Testing		14	5%		24	9%		26	6%
HIV Care		19	4%		25	8%		24	8%
Obtaining ID		23	3%		13	23%		13	25%
Family Reunification		18	4%		20	18%		22	14%
Child Support Modification		12	7%		17	19%		21	14%
Legal Services		8	12%		23	16%		23	9%
NA/AA Meetings		15	4%		19	18%		17	18%
Spiritual/Religious		21	3%		16	20%		15	22%
Support Group “Taking Care of Business”		22	3%		22	16%		20	15%

As noted previously, one of difficulties of providing reentry planning in a jail is appropriately targeting services to those most in need/highest risk. Fortunately, the three proxy risk questions (how old are you, how old at first arrest, and number of prior arrests (although we neither specifically excluded nor included juvenile arrests)) were also asked of the Window Replication detainees conducted in early summer 2009. Based on these responses, a proxy score was calculated for 172 detainees, using the same cut points as the arrestees who completed the proxy at booking in October 2012.

The distribution of those scores is provided in Figure 14. Note there are differences between the detainee sample and the proxy scores provided by the arrestees at booking (Figure 5). For example, more arrestees scored in the bottom on the scale (4.6% scored 2, 11.6% scored 3) compared to the Window detainee sample (with only 2% scoring a 2 and 8% scoring a 3). There are also fewer arrestees in the mid range scores of 4, 5, or 6 (a total of 65%) compared to the Window detainee sample (with 78% scoring 4, 5, or 6.). Finally, 18% of the arrestee proxies scored a 7 or 8 compared to only 13% of detainees. This is not entirely surprising given that the arrestee proxy was completed on those at the arrest stage – at entry to the jail; many of whom would be released within 48 hours, versus the detainees who had been in the facility for longer periods of time. Their opportunity to be released from court, or on their own recognizance, or released without charge had passed, unlike the arrestees who completed the proxy at booking. In addition, the differences in the raw proxy scores between the arrestee and detainee samples might also reflect that the detainees were either generally more serious offenders than the arrestee sample (thus denied bail) and/or they may have been less able to post bail, had that been an option.

Figure 14: Distribution of Window Replication Detainee Proxy Scores N=172

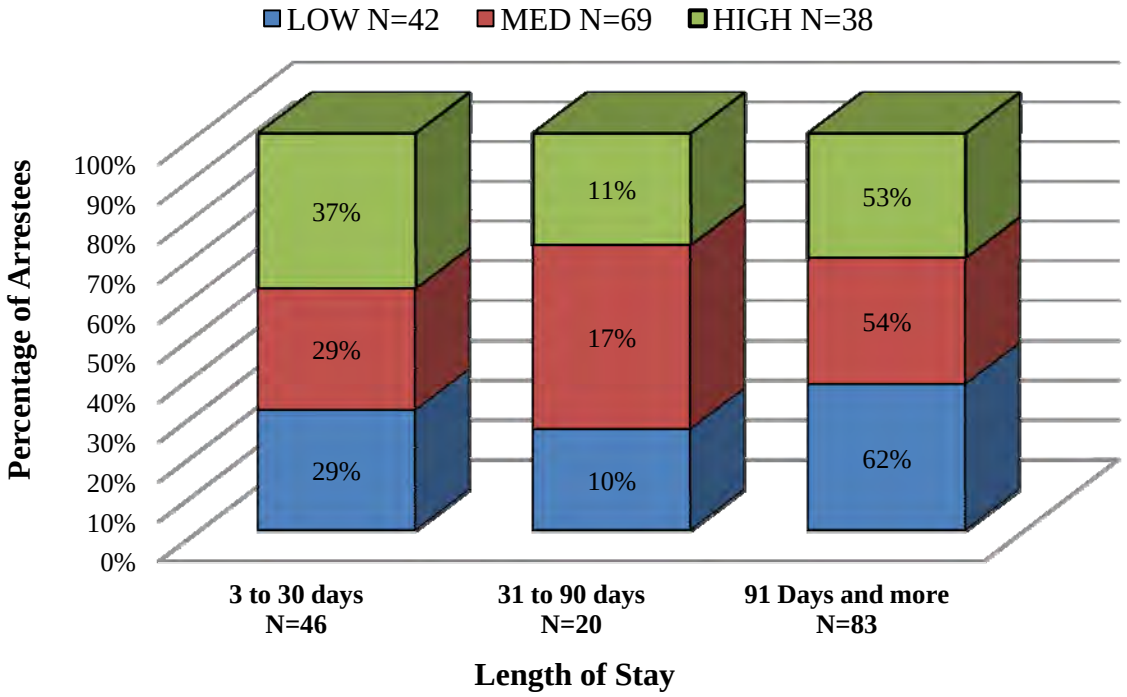


The next step was to compare the proxy risk level of Window Replication detainees to the risk levels of the arrestees by length of stay. To do this, the one window replication detainee who had been in the facility less than 48 hours was omitted, and then the length of stay was charted by risk level (see Figure 15). Then the arrestee proxy data contained in Figure 16 was reconfigured to remove those who were released within 48 hours).

There appear to be differences between the two populations, (although some caution should be exercised as one continues to categorize these samples, the numbers begin to diminish to the point where representativeness is called into question. In this case, this is particularly true with the high risk groups). Compared to the 171 Window Replication detainees, higher percentages of low risk arrestees are detained in the facility for 31 days or more (72% of low risk arrestees vs. 63% of low risk detainees). For the medium risk groups, there were more arrestees remaining in the facility for longer than 31 days (71% of arrestees vs. 54% of detainees), but fewer high risk (64% of arrestees were high risk detained 31 days or more compared to 77% of detainees). However, these differences among those who were in the facility for 31 to 90 days and those in for more than 91 days were not statistically significant.[39]

Looking at those who remained in the facility from 3 to 30 days, there is a difference in that more high risk individuals in the arrestee sample remained in the facility compared to the detainee sample. This is confirmed in both the average proxy score (arrestees averaged 5.52 versus 4.93 for detainees) and risk level (2.04 vs. 1.74 on a scale of 1 (low risk) to 3 (high risk) (both significant at $p<.05$). Consequently, in observing the Window Replication findings of useful services by length of stay (Table 5), it is possible that the needs of those in the facility from to 3 to 30 days are understated and/or do not reflect all the needs for those arrested.

Figure 15: Length of Stay by Risk Level Window Replication Detainees N=171



[39] The length of stay was combined to include all who remained 31 days or more, and the results remained the same.

Figure 16: Length of Stay by Risk Level Proxy Excluding Released within 48 Hours N=149

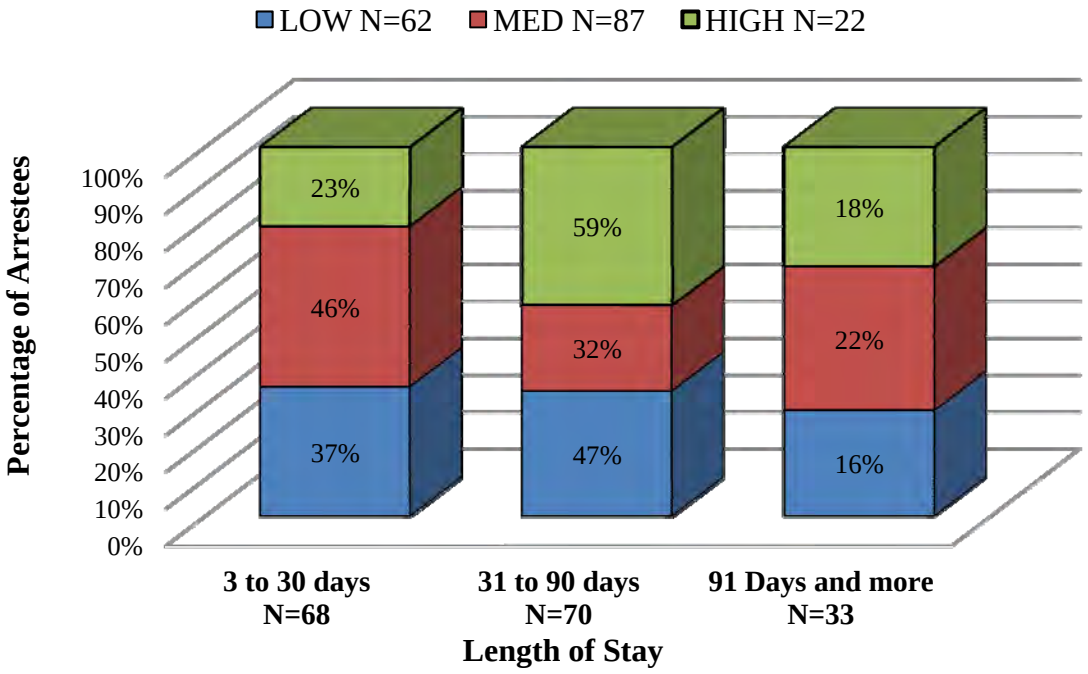


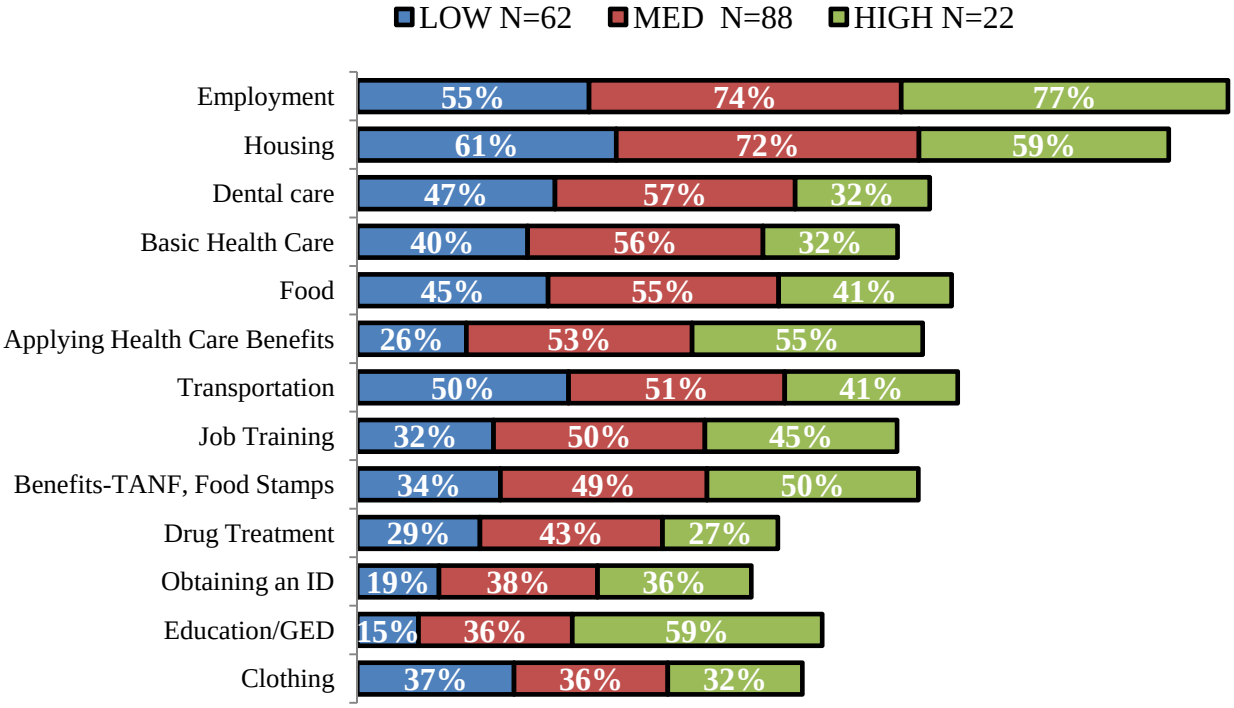
Figure 17 provides another view of the needs of detainees in Baltimore, by identifying the top useful services by risk level. While the suggested reentry strategy for the BCDC/BCBIC is to focus resources on medium and high risk individuals, the list below helps to inform which services and/or service providers should be targeted for kiosk and/or resource wall materials provided to all processed and released in Baltimore City.

For example, among the 62 individuals classified as low risk, 38 (61%) wanted housing, 34 (55%) employment and 29 (47%) cited dental care. Community organizations providing these and other services such as transportation, food banks, basic health care, and clothing should be the primary target for obtaining and disseminating resource information.

For the medium to high risk individuals, community organizations that provide the following services should be engaged to conduct in-reach sessions. Services were chosen based on frequency -- when more than half of those in either the medium or high risk group cited this as a need: employment and job training services, housing, dental and basic health care, applying for TANF, food stamps, and health care benefits,[40] food, and transportation.

[40] Since December 2010 Healthcare Access Maryland has assisted sentenced inmates by facilitating health care insurance applications.

Figure 17: Useful Services by Risk Level Window Replication Detainees N=172



Data provided through the LSI-R assessments conducted by the Office of Transition Services provides additional insight as to the needs and risks for both the sentenced and detainee populations and to allow for a closer examination of the differences among men and women in the facility. These findings are detailed in the section below.

LSI-R Assessment Data

The DPSCS Office of Transition Services (OTS) volunteered to train their staff to conduct the Level of Service Inventory Revised (LSI-R) assessments on individuals held in the Baltimore City Detention Center. The LSI-R is a risk/needs assessment tool that is used by correctional agencies throughout the United States. The tool is a 54 question interview intended to not only provide an overall risk score for the individual, but also includes ten domains which are "indicators of the major risk factors identified by theory and research … and many of the subcomponents describe dynamic risk factors … which represent reasonable targets of intervention" (Multi-Health Systems, 2001, p. 1).

The offer by OTS to conduct the LSI-R assessment was welcome, as this met the need for data for both the sentenced population and women. Selection of the sample for the LSI-R assessment was conducted in November 2012 and February 2013, where DPSCS jail staff submitted an extract of the jail database containing SID numbers, gender, and other identifiers of currently detained/sentenced inmates. A subset of individuals were randomly selected and then randomly sorted to set the order they were to be approached and assessed. These files were returned to the jail staff for implementation of the LSI-R assessment.

OTS staff conducted the LSI-R assessment and entered the scores into a Survey Monkey database created for this purpose. Once the data were downloaded from Survey Monkey, the SID numbers were submitted to DPSCS to include these individuals in the CJIS data extract.

Once the CJIS data was returned, the individuals listed on the randomly sorted list ("sort list") were compared to individuals within the LSI-R data. While more than half (82 of 146 or 56%) of those on the sort list were in the LSI-R, the other 44% were not on our original sort lists. Those who were on the sort list were then compared to those who were not on a variety of measures including CJIS criminal history data, gender, and the LSI-R scores and there were significant differences among these two groups. Those differences were primarily found among the male sentenced population, who were older and had longer criminal careers with more charges on average, and more prison days imposed, than those on the sort list. OTS staff advised that due to implementation difficulties in conducting the LSI-R, the strategy for sentenced males was revised to recruitment of volunteers from the housing units.[41]

While the information in the LSI-R is still valuable and is included in considering reentry strategies, it is possible that as the sentenced men volunteered to be assessed, they may or may not be representative of the population as a whole. Thus the LSI-R results should be viewed cautiously. Should BCDC choose to routinely institute LSI-R assessments in the future, the findings below can be confirmed. Until that time, these data provide insight into the risk and needs of men and women detained and sentenced in the Baltimore City Detention center.

LSI-R Assessees Sample – Demographics and CJIS Criminal Histories

As indicated in Table 6 below, those in the LSI-R sample were on average 35 years old, (ranging in age from 18 to 68), and the sample was evenly split between male and female.[42] Race was not available as the race of the individual is not captured in the LSI-R data. A little over half (57%) were detainees and the remaining 43% were sentenced at time of the LSI-R assessment.

Table 6: LSI-R Sample Demographics N=146

	N	Freq.	Percent	Range	Mean (SD)
LSI-R Sample with CJIS Data	140				
Completed LSI-R	146				
Completed LSI-R, No Proxy		142	97%		
Completed both LSI-R and Proxy		4	3%		
Age when in BCDC	135			18 to 68	35.79 (11.9)
Gender	146				
Male		73	50%		
Female		73	50%		
Case Disposition	146				
Detainee		83	57%		
Sentenced		63	43%		

[41] Personal communication, Dennis Ferrell, Office of Transition Staff, August 6, 2013.

[42] In order to include more women in the sample, women were purposefully oversampled.

In terms of criminal histories, Table 7 provides a number of measures of criminal history, calculated or summarized from the CJIS criminal history data. The most common type of offender is a person offender (58%), followed by drug (31%), sex offender (9%), and property (3%). None of those assessed with the LSI-R ("LSI-R assessees") had traffic and other crime as their most serious conviction.[13] Again, as noted in the discussion of the CJIS criminal history descriptives for the arrestee sample, offender class is based on the most serious conviction over their criminal career, and not on the most frequent type of crime or most recent offense committed. The length of the LSI-R assessees' criminal career spanned a range from as little as less than 1 day to over 34 years.[43] On average, LSI-R assessees had been criminally involved for 11 years.

In terms of prior history, LSI-R assessees had an average of 10.4 arrests (ranging from 1 to 36), 4.9 prior convictions and an average conviction rate of 45% overall. Among those convictions, approximately 24% were for felony level offenses and the maximum seriousness category averaged 3.4 – a level V offense (ranging from the most serious category of level I to least serious, level VII).[15] Level V offenses include second degree assault; false statement to law enforcement officer; uttering false document; theft over $500; motor vehicle theft; possession of controlled dangerous substances (not marijuana); third degree sexual offense; weapons – illegal possession by convicted felon; and obstructing & hindering.

Table 7 also provides arrest information broken down to provide charge data. LSI-R assessees had an average of 27 prior charges (ranging from 1 to 135 charges) in their criminal career, with 6.7 charges resulting in a conviction (ranging from 0 to 29 charges convicted), thus 25% of all charges resulted in a conviction. Among these charges, 25% were for felony level offenses, and the most serious charge category averaged 4.47 – falling between a Level IV and Level III offense. Level IV offenses include arson, manufacture and/or distribution of controlled dangerous substances, second and third degree burglary, escape from confinement, and robbery. Level III offenses include first degree assault, first degree burglary, robbery with a dangerous weapon, and manufacture and/or distribution of narcotics.

A breakdown by different types of offenses includes both the number of charges overall, within a range, and the number of those charges that lead to a conviction. Note that the offenses listed include person crimes (including weapons charges) and sex crimes (including prostitution). Given that weapons (due to their potential lethality) add a level of seriousness to the offense, and that those who engage in prostitution have a fair number of charges within a relatively small group of LSI-R assessees (N=22), both weapons and prostitution charges and convictions are provided separately so as to present a balanced view. For example, for the 140 LSI-R assessees, 112 have been charged in their career with at least 1 person offense (including weapons) up to 102 person offenses, averaging 10.2 person charges over their career. Among those charged with a person offense, 99 were convicted of 1.7 person offenses, on average, over their lifetime (ranging from 0 to 9 person offense convictions.) Likewise, the 22 individuals charged with prostitution had from 1 to 19 charges over their career, with an average of 4.7 charges. Of those charged with prostitution, they averaged 2.9 convictions, ranging from 0 to 12 convictions.

[43] As date of arrest for the LSI-R sample was not available, the length of criminal career was calculated based on the first date of arrest in the CJIS data to date of LSI-R assessment.

The final section of Table 7 is incarceration history. In the LSI-R assessees sample, 74% had been incarcerated for one or more days during their career.[16] These 104 assessees experienced from 1 to 20 periods of incarceration, on average serving 6.3 times. The total time imposed over the course of the LSI-R assessees career ranges from 0 days to 68 years, with an average time imposed of 5.4 years. The average sentence per incarceration period is 49 days, but ranges up to one year.

Table 7: LSI-R Sample CJIS Criminal History Descriptive N=140

	N	Freq.	Percent	Range	Mean (SD)
CJIS Data					
Offender Class (Serious Conviction)	121				
Person		70	58%		
Sex		11	9%		
Drug		37	31%		
Property		3	2%		
Traffic		0	0%		
Other		0	0%		
Criminal Career					
Length of Career (in months)[44]	140			<1 to 408.6	132.2 (116.6)
Length of Career (in days)	140			0 to 12430	4021 (3547)
Arrest, Charge, and Conviction History					
Total Number of Prior Arrests	140			1 to 36	10.4 (9.1)
Total Number Prior Convictions - Arrest	140			0 to 20	4.9 (4.7)
Prior Arrest Conviction Rate	140			0 to 1	.45 (.26)
Proportion of Prior Felony Convictions	121			0 to 1	.24 (.26)
Most Serious Category - Convictions	121			1 to 6	3.4 (1.18)
Total Number of Prior Charges	140			1 to 135	27.1 (23.9)
Total Number Prior Convictions - Charges	140			0 to 29	6.7 (6.9)
Average Charges Per Prior Arrest	140			1 to 24	3.1 (2.5)
Prior Charges Conviction Rate	140			0 to 1	.25 (.18)
Proportion of Prior Felony Charges	137			0 to 1	.25 (.18)
Most Serious Category - Charges	137			1 to 7	4.47(1.2)

[44] Length of criminal career was calculated based on the first date of arrest in the CJIS data to date assessed.

	N	Freq.	Percent	Range	Mean (SD)
Charge & Conviction History By Type of Offense					
Person Offenses (Including Weapons)					
Total Number of Charges	112			1 to 102	10.2 (12.4)
Total Number of Convictions	99			0 to 9	1.7 (2.0)
Weapons Only Offenses					
Total Number of Charges	74			1 to 21	4.0 (4.1)
Total Number of Convictions	67			0 to 5	.55 (.90)
Sexual Offenses (Including Prostitution)					
Total Number of Charges	28			1 to 21	4.7 (4.5)
Total Number of Convictions	27			0 to 13	2.5 (3.0)
Prostitution Only Offenses					
Total Number of Charges	22			1 to 19	4.7 (4.5)
Total Number of Convictions	22			0 to 12	2.9 (2.9)
Drug Offenses					
Total Number of Charges	107			1 to 57	12.8 (11.5)
Total Number of Convictions	106			0 to 15	3.6 (3.4)
Property Offenses					
Total Number of Charges	108			1 to 62	7.3 (8.3)
Total Number of Convictions	96			0 to 12	1.7 (2.3)
Traffic Offenses					
Total Number of Charges	29			1 to 11	2.3 (2.3)
Total Number of Convictions	28			0 to 1	.21 (.42)
Total "Other" Charges					
Total Number of Charges	22			1 to 8	2.1 (1.8)
Total Number of Convictions	20			0 to 3	. 50 (.82)
Total Violation Probation/Parole					
Total Number of Charges	58			1 to 14	2.8 (2.6)
Total Number of Convictions	57			0 to 14	2.1 (2.2)
Incarceration History					
Sentenced to Incarceration Rate	140			0 to 1	.74 (.43)
Prior Times Incarcerated	104			1 to 20	6.3 (4.72)
Total Time Imposed (in days)	104			1 to 25181	2676 (4526)
Average Incarceration Sentence (in days)	104			1 to 365	66.0 (77.0)

LSI-R Risk/Need Results

While the overall LSI-R sample population is presented above in terms of demographics and criminal history records, there were significant differences between the detainee and sentenced population, and between men and women. For this reason, the LSI-R total score and domain scores are broken down first by the total LSI-R sample (Table 8) then by subpopulations (Table 9 sentenced vs. detainees and by gender in Table 10). As the date of arrest for each of those assessed with the LSI-R was not provided, it is not possible to disaggregate the assessment findings by length of stay. Nonetheless, the assessment provides important information as to the level of risk, and areas of need, for the BCDC population.

LSI-R Results Overall

As evidenced in Table 8, among the 146 individuals assessed with the LSI-R, the average LSI-R score was 22 – ranging from 5 to 44. Among all those assessed, 11% were minimum risk, 49% were medium risk, 35% were high medium risk and 5% were scored as high risk.[45] The subscales provide a snapshot view of the risk/needs of this population.

The overall mean scores provide a view of the distribution among the population, but readers should note the relative percent[46] and rank columns to determine the overall most pressing needs of those assessed. (See also Figure 18 for details of the top 3 subscales based on individual (rather than overall mean) relative percentage scores). Based on the relative percent values, financial and companions/peers are tied for first rank, and criminal history and use of leisure time are tied as second highest need/risk.

Table 8: LSI-R, Domain Scores, and Risk Level N=146

Total and Domain Scores	Freq	Range	Mean (SD)	Relative %	Rank
Total LSI-R Score N=146		5 to 44	21.89 (8.2)		
Risk Level N=146	**Freq**	**Percent**			
Minimum (0 to 12)	16	11%			
Medium (13 to 23)	72	49%			
High Medium (24 to 36)	51	35%			
High (37 to 47)	7	5%			

[45] Risk level cut scores of 0 to 12 as minimum risk; 13 to 23 as medium risk; 24 to 36 as high medium risk; and 37 to 47 as high risk were determined after a search of the literature for scoring systems for both male and female inmates. The deciding factor to use these cut scores was based on Van Voorhis, Peiler, Presser, Spiropulis & Sutherland (2001) research on the LSI-R tool for women offenders and because these were similar to other scores used for male offenders.

[46] The relative percentage was calculated by dividing the mean value by top score possible, *within those assessed.* Thus for 146 assessed in BCDC, the top criminal history score was 8 and the mean of 4.45 divided by 8 = 56%.

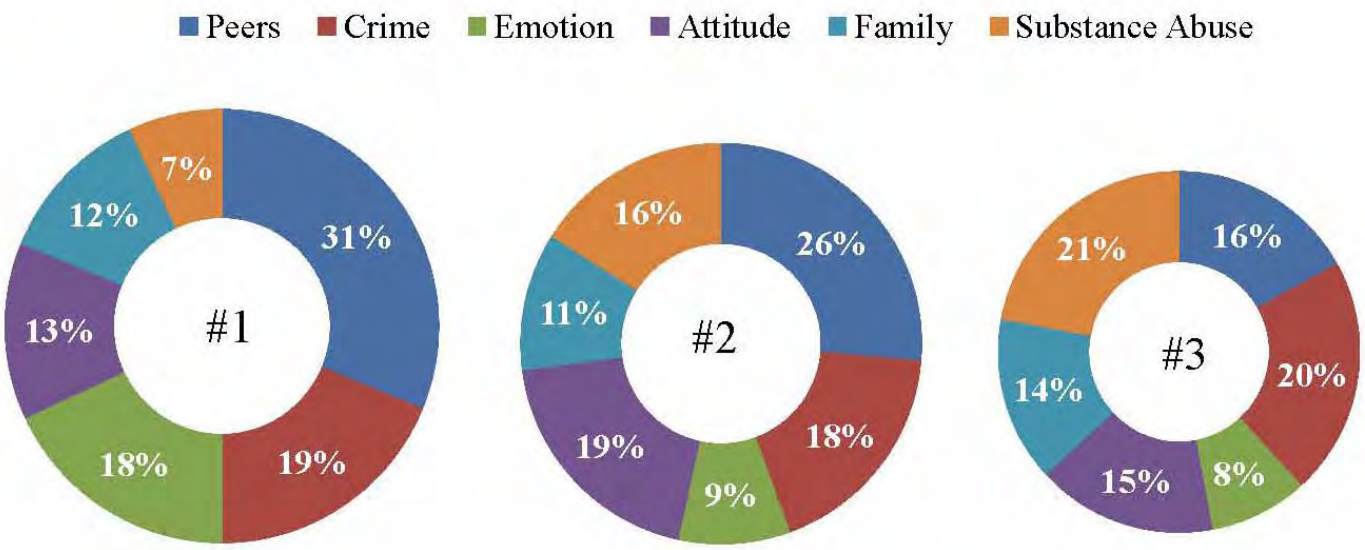
Domains	Freq	Percent	Mean (SD)	Relative %	Rank
Criminal History (0-8) N=143			4.45 (2.1)	56%	2*
0 pts.	4	3%			
1-3 pts.	47	33%			
4-6 pts.	63	44%			
7-8 pts.	29	20%			
Educ./Employ. Total (0-10) N=129			4.50 (2.2)	45%	3
0 pts.	2	2%			
1-3 pts.	50	39%			
4-6 pts.	50	39%			
7-10 pts.	27	21%			
Financial (0-2) N=137			1.26 (.75)	63%	1*
0 pts.	25	18%			
1-2 pts.	112	82%			
Family/Marital (0-4) N=139			1.25 (1.3)	32%	8
0 pts.	49	35%			
1-2 pts.	66	47%			
3-4 pts.	25	18%			
Accommodation (0-3) N=129			1.15 (1.0)	38%	5
0 pts.	44	34%			
1-2 pts.	67	52%			
3 pts.	18	14%			
Use of Leisure Time(0-2) N=141			1.12 (.67)	56%	2*
0 pts.	24	17%			
1 pts.	76	54%			
2 pts.	41	29%			
Companions (0-5) N=138			3.15 (1.5)	63%	1*
0 pts.	6	4%			
1-2 pts.	44	31%			
3-4 pts.	54	40%			
5 pts.	34	25%			
Alcohol/Drugs (0-9) N=133			2.95 (2.4)	33%	7
0 pts.	34	26%			
1-3 pts.	44	33%			
4-6 pts.	45	34%			
7-8 pts.	10	8%			
Emotional (0-5) N=140			1.80 (1.8)	36%	6
0 pts.	50	36%			
1-2 pts.	43	30%			
3-5 pts.	51	34%			
Antisocial Attitudes (0-4) N=133			1.59 (1.3)	40%	4
0 pts.	38	29%			
1-2 pts.	54	41%			
3-4 pts.	41	31%			

* Tied

In addition to providing the domain and total LSI-R scores, the OTS staff designated, among 6 of the subscales, which were the top 3 scales by highest percentage value for each individual assessed.[47] Figure 18 illustrates these results for the 146 individuals who completed the LSI-R.

As noted below, the 6 subscales were criminal history, family/martial, companions/peers, alcohol/drug; emotional/personal; and attitude/orientation. These results indicate that peers are the top issue – 31% of those assessed had peers as the top issue; 26 had it as the secondary highest issue; and for 16%, it was the third highest subscale. All together, 73% of those assessed scored peers as one of their top 3 needs/risks. Criminal history was the second highest overall subscale with 19% as the top issue, 18% listed it as the second highest and 20% as the third highest. This was followed by attitudes (total of 47% listed as one of top third); substance abuse (43%); family/marital (36%) and emotional/personal (35%).

Figure 18: LSI-R Top 3 Subscale Needs/Risks N=146



A summary of the LSI-R results by subsample (disposition and gender) are presented below. In addition to discussing the risk/needs of these broader categories, key differences within each subsample are discussed (e.g., sentenced males vs. sentenced females; detainee males vs. detainee females). However as the sample is further divided, the number of those assessed within each category becomes quite small. Thus the discussion related to these specific subgroups should be viewed anecdotally until additional assessments can be conducted on a larger number of individuals within each category.

[47] For example, if an individual scored a 4 on peers/companions, out of 5 possible points, their percentage would be 80%. If they scored 3 out of 4 on the attitude scale, their percentage was 75%. The LSI-R interviewer conducted these calculations and designated which were the top 3 subscales based on highest percentage. See Appendix F for a copy of the "Cheat Sheet" used for calculating these scores.

LSI-R Results by Disposition

As indicated in Table 9, the comparison of LSI-R risk level and domain scores for the sentenced population versus the detainees, indicates the sentenced population has a higher LSI-R total score (on average 23.3 vs. 20.8 for detainees) which is statistically significant at p<.10. This is likely influenced by the fact that the sentenced population scores higher on the criminal history and family domains (significant at p<.05). However, the sentenced population scores lower on the emotional/ personal domain (significant at p<.10). In terms of comparing domains by relative percent,[48] both the sentenced and detainee populations indicated financial, companions, and criminal history domains were on the top 3 risk/need domains.

Table 9: LSI-R, Risk Level and Domain Scores, Sentenced vs. Detainees N=146

Total and Domain Scores	**Sentenced N=63**			**Detainees N=83**		
	N	**Range**	**Mean (SD)**	**N**	**Range**	**Mean (SD)**
Total LSI-R Score	63	5 to 41	23.3 (7.9)	83	5 to 44	20.8 (8.3)$^{+}$
Risk Level	63	**Freq**	**%**	83	**Freq**	**%**
Minimum (0 to 12)		4	6%		12	14%
Medium (13 to 23)		29	46%		43	52%
High Medium (24 to 36)		27	43%		24	29%
High (37 to 47)		3	5%		4	5%
Domains	**N**	**Range**	**Mean (SD)**	**N**	**Range**	**Mean (SD)**
Criminal History (0-10)	63	0 to 8	4.92 (2.0)	80	0 to 8	4.09 (2.2)*
Educ./Employ. (0-10)	58	0 to 10	4.62 (2.2)	71	0 to 10	4.41 (2.3)
Financial (0-2)	58	0 to 2	1.31 (.75)	79	0 to 2	1.23 (.75)
Family/Marital (0-4)	60	0 to 4	1.52 (1.4)	79	0 to 4	1.05 (1.1)*
Accommodation (0-3)	59	0 to 3	1.24 (1.0)	70	0 to 3	1.07 (1.1)
Leisure/Recreation (0-2)	60	0 to 2	1.15 (.57)	81	0 to 2	1.10 (.73)
Companions (0-5)	59	0 to 5	3.24 (1.4)	79	0 to 5	3.09 (1.6)
Alcohol/Drug (0-9)	62	0 to 8	2.90 (2.4)	71	0 to 8	3.00 (2.4)
Emotional/Personal (0-5)	61	0 to 5	1.51 (1.7)	79	0 to 5	2.03 (1.8)$^{+}$
Attitudes/Orient. (0-4)	61	0 to 4	1.79 (1.3)	72	0 to 4	1.43 (1.3)

$^{+}$ Significantly different p<.10 *Significantly different p<.05

[48] Not shown, but available upon request.

When the sample is further divided by disposition and gender (e.g., exploring among the sentenced population and then by gender), there are significant differences.[48] Among 43 sentenced male inmates with available data, they have higher employment/education needs (4.98 vs. 3.60) compared to the 15 sentenced women (significant at $p<.05$). Further, among 47 sentenced men, they have higher criminal history risk scores than 16 sentenced women (5.23 vs. 4.00) while the women have higher accommodation[49] scores (1.63 vs. 1.09 for the men) (both significant at $p<.10$).

There are also significant gender differences among the detainee population.[48] The 26 male detainees with data available have higher criminal history risk scores than the 54 female detainees (5.00 vs. 3.65) significant at $p<.05$. However, female detainees have higher financial risk scores (1.39 among 54 women vs. .88 among 25 men); accommodation scores (1.37 for 46 women vs. .50 for 24 men) (both significant at $p<.01$) and higher family marital risk scores (among 53 women average of 1.23 compared to 26 men at .69).

To summarize these differences, for both detainees and sentenced inmates, males are more at risk with respect to their criminal history than females. Housing is a greater need/risk factor for women than men. Among detainees only, women have a higher need for assistance with financial and family issues. Among the sentenced, employment and educational needs for men are greater than for women. Again – caution should be exercised in interpretation of these results given the small numbers of those assessed.

LSI-R Results by Gender

Table 10: LSI-R, Domain Scores, and Risk Level, by Gender N=146 provides the comparison of LSI-R risk level and domain scores by gender. Women have a significantly ($p<.000$) lower criminal risk score than males (3.73 vs. 5.15); as well as higher financial needs (1.42 vs. 1.10 – significant at $p<.05$), higher accommodation/housing needs (1.44 vs. .88) and higher emotional/personal needs (2.20 vs. 1.41) (both significant at $p<.01$). There were no other significant differences by domain or by overall LSI-R score.

In terms of the comparing domains by relative percent,[50] as was the case with the sentenced vs. detainee populations, among the 83 men and 73 women assessed, the top 3 need/risk domains were financial, companions, and criminal history.

[49] Accommodation measures housing – either unsafe (e.g., high crime neighborhood), unstable (more than 3 address changes in the prior year) and/or the individual is "unhappy or dissatisfied … takes no pride and makes no attempt to improve the residence … expresses a desire to move and others that live there would like him or her to move" (Multi-Health Systems. Inc., 2001, p. 8).

[50] Not shown, but available upon request.

Table 10: LSI-R, Domain Scores, and Risk Level, by Gender N=146

Total and Domain Scores	Males N=83			Females N=73		
	N	**Range**	**Mean (SD)**	**N**	**Range**	**Mean (SD)**
Total LSI-R Score	73	6 to 44	22.22 (7.7)	73	5 to 40	21.56 (8.7)
Risk Level	73	**Freq**	**%**	73	**Freq**	**%**
Minimum (0 to 12)		6	8%		10	14%
Medium (13 to 23)		36	49%		36	49%
High Medium (24 to 36)		27	37%		24	33%
High (37 to 47)		4	6%		3	4%
Domains	**N**	**Range**	**Mean (SD)**	**N**	**Range**	**Mean (SD)**
Criminal History (0-10)	73	0 to 8	5.15 (2.0)	70	0 to 8	3.73 (2.1)***
Educ./Employ. (0-10)	68	1 to 10	4.69 (2.2)	61	0 to 9	4.30 (2.2)
Financial (0-2)	68	0 to 2	1.10 (.81)	69	0 to 2	1.42 (.65)*
Family/Marital (0-4)	70	0 to 4	1.19 (1.4)	69	0 to 4	1.32 (1.1)
Accommodation (0-3)	67	0 to 3	.88 (.97)	62	0 to 3	1.44 (1.0)**
Leisure/Recreation (0-2)	70	0 to 2	1.04 (.65)	71	0 to 2	1.20 (.68)
Companions (0-5)	69	0 to 5	3.20 (1.4)	69	0 to 5	3.10 (1.6)
Alcohol/Drug (0-9)	71	0 to 8	2.76 (2.3)	62	0 to 8	3.18 (2.5)
Emotional/Personal (0-5)	71	0 to 5	1.41 (1.7)	69	0 to 5	2.20 (1.8)**
Attitudes/Orient. (0-4)	70	0 to 4	1.60 (1.4)	63	0 to 4	1.59 (1.3)

*Significantly different p<.05 **Significantly different p<.01 *** Significantly different p<.00

When the sample is further divided observing gender by disposition (e.g., women who are sentenced versus women who are detainees), there is only one significant difference.[48] Compared to the 16 sentenced women, the 53 women in detention score significantly higher (at p<.05) on the emotional/personal domain (2.47 vs. 1.31).

Exploring men by disposition, there are 3 differences – the 43 sentenced men have higher financial needs than the 25 men in detention (scoring 1.23 vs. .88) (significant at p<.10); higher family/marital risk scores (1.48 among 44 sentenced men vs. .69 among 26 male detainees); and higher accommodation (housing) needs than those in detention (1.09 vs. .50) (43 sentenced males vs. 24 detainee males), (significant at p<.05). In sum, sentenced men have greater financial, family and housing needs than detainee men; and detainee women have greater emotional/personal needs than sentenced women.

The final step in this effort to build a reentry plan based on data available was to examine the issue of capacity by estimating the flow of individuals through the facility. This is detailed in Section VI below.

Section VI: Estimating Flow through Extrapolation

Based on extrapolations from analysis of the various data sources used in this project, the flow of individuals through the facility was estimated to inform the overall reentry strategy plan.

Among the 1,032 individuals arrested during the proxy period of October 21 to October 28, 720 (74%)[51] were released within 24 to 48 hours; 59 (6%) remained in the facility from 3 to 30 days; and the remaining 197 (20%) stayed 31 days or more.

Release status was examined by length of stay (Table 11), providing estimates of the number of arrestees released on their own recognizance (70% of all those released within 48 hours and 7% within 3 to 30 days in the facility); and bail (25% of those released within 48 hours, 69% of those held from 3 to 30 days and 7% of those held in the facility for 31 days or more).

Table 11: Release Status by Length of Stay, Annual Extrapolated Estimates

Release Status	Group 1: Released Within 48 Hours		Group 2: In Facility 3 to 30 Days		Group 3: In Facility 31 Days or More	
	Freq	Percent	Freq	Percent	Freq	Percent
Released No Charge	1202	3%	0	0%	0	0%
Released from Court	382	1%	382	12%	1093	10%
Released Own Recog.	27370	70%	219	7%	0	0%
Bail	9779	25%	2240	69%	765	7%
Exceptional	437	1%	164	5%	0	0%
Juvenile	164	0.4%	0	0%	0	0%
Expiration	0	0%	219	7%	55	1%
Detained	0	0%	0	0%	8850	82%
Total	**39334**		**3223**		**10762**	

Overall, we estimate that 53,319 individuals are booked into BCBIC annually, with 39,334 released within 48 hours, 3,223 held for 3 to 30 days, and 10,762 are retained in the facility for 31 days or more.[52]

[51] This is in contrast to the booking estimates based on CCJC reports which indicated that approximately 50% of the "committed" population were released within 48 hours. This difference may reflect either a shift in release policy since the fiscal year 2011 CCJC report, and/or there was something unique about the week the proxy was piloted that resulted in a higher number of releases within 48 hours; or the within 48 hour release figure of 74% is reflective of standard flow throughout the facility. For this report, as there is no data available to test these theories, the flow of individuals during the proxy pilot week (October 21 to October 28, 2012) are assumed to represent overall facility traffic. An additional study using a larger cohort of arrestees, preferably over different time periods, would more definitively address this concern.

[52]Based on booking data (discussed in Unique (Unduplicated) Persons section of this report, the number of *unique* individuals booked into the facility over a year would total 37,041. Among those, 27,040 (73%) would likely only be arrested one time during the year, while among the remaining 10,001, 17% (6,297) would be arrested twice; 6% (2,148) would be arrested three times, 2.3% (852) would be booked four times and the remaining 1.7% (650)

Using the figures in Table 11, a multiplier was computed based on those individuals with both a proxy risk assessment and a release status, providing estimates of the flow of individuals through the facility by risk status and length of stay (Table 12) and release and risk status annually and per month (Table 13).

Table 12 indicates that on an annual basis, 21,477 low risk, 22,957 medium risk, and 8,875 high risk individuals are processed through the Baltimore Jail.

Table 12: Risk Level by Length of Stay, Annual Extrapolated Estimates

Length of Stay	**Annual Estimates by Risk**		
	Low	**Med**	**High**
Group 1: Released within 48 hrs	17501	16422	5411
Group 2: Released 3 to 30 Days	784	1485	954
Group 3: Remain 31 days or more	3192	5060	2510
Total by Risk Level	**21477**	**22967**	**8875**
Total	**53319**		

Both annual and monthly estimates by release status and length of stay are provided in Table 13. Among those in Group 1 – individuals detained less than 48 hours – 13,138 low risk individuals will be released on their own recognizance, as will 11,222 medium risk, and 3,011 high risk individuals. There are an estimated 3,618 low risk, 4,205 medium risk, and 1,956 high risk individuals who will be bailed out of the facility within 48 hours.

For Group 2 – we estimate that 538 low risk, 1,030 medium risk, and 672 high risk people will be bailed out within 3 to 30 days, as will the bulk of those who are medium and high risk estimated to depart the facility on expiration (72 medium, and 146 high risk) annually. A fair number are estimated to be released from court within this time frame – 164 low risk, and 164 medium risk, as well as 54 high risk individuals departing from court within the first 30 days.

Among Group 3 – those who remain in the facility 31 days and beyond – a small number of folks are released from court (235 are low risk, 623 medium risk, and 235 high risk). An estimated 107 low risk, 436 medium risk, and 222 high risk individuals are bailed out after spending 31 days or more in the facility. The distribution by risk level of the remainder of detainees housed in the facility for 31 days or more are estimated as 2,832 low risk, 3,983 medium risk, and 2,036 high risk. These medium and high risk populations would be the most appropriate target for intensive and comprehensive reentry programming.

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would come in and out of the jail 5 or more times in a single year. This may be useful information in the event DPSCS chooses to implement a reentry strategy which specifically addresses “frequent flyers” (e.g., those who are booked into the facility 4 or more times a year). However, from a capacity perspective – in terms of ensuring there are sufficient staff to implement a cohesive and targeted jail reentry plan – it is best to frame that discussion around the entire population flowing in and out of the jail rather than solely considering unique individuals.

Note that the sample size used for the multipliers (particularly for Group 2 – those who remain in the facility from 3 to 30 days N=46) is quite small. This is because this data necessary to calculate the multiplier was dependent on having both proxy and release status – which was the case for only 578 arrestees. While not ideal, these estimates provide a basis to ascertain the degree of staffing and effort required to implement the proposed reentry strategy.

Section VII of this report incorporates these estimates in detailing a reentry strategy for those arrested and booked in Baltimore City. Six reentry tracks are discussed including the number of staff interactions within each reentry track anticipated to be required to implement the strategy, discussion of the role of community service provider in-reach, highlights programming topics of interest to the inmates based on Window Replication data, and proposes exploration of the development of a reentry transition program within a closed housing unit fashioned on the Duchess County program which has consistently demonstrated reductions in recidivism among high risk offenders by 25%.

Table 13: Release Status by Length of Stay & Risk Level, Annual and Monthly Estimates

Group 1: Individuals Detained Less than 48 Hours									
	Risk Multiplier N=429			Flow Estimates Per Year			Flow Estimates Per Month		
Release Status	**Low**	**Med**	**High**	**Low**	**Med**	**High**	**Low**	**Med**	**High**
Rel No Charge	0.31	0.54	0.15	373	649	180	31	54	15
Rel from Court	0.60	0.20	0.20	229	76	76	19	6	6
Rel Own Recog.	0.48	0.41	0.11	13138	11222	3011	1095	935	251
Bail	0.37	0.43	0.20	3618	4205	1956	302	350	163
Exceptional	0.14	0.43	0.43	61	188	188	5	16	16
Juvenile	0.50	0.50	0.00	82	82	0	7	7	0
Expiration	0.00	0.00	0.00	0	0	0	0	0	0
Detained	0.00	0.00	0.00	0	0	0	0	0	0
Group 2: BCDC Population In Facility 3 to 30 Days									
	Risk Multiplier N=46			Flow Estimates Per Year			Flow Estimates Per Month		
Release Status	**Low**	**Med**	**High**	**Low**	**Med**	**High**	**Low**	**Med**	**High**
Rel No Charge	0.00	0.00	0.00	0	0	0	0	0	0
Rel from Court	0.43	0.43	0.14	164	164	54	14	14	4
Rel Own Recog.	0.00	1.00	0.00	0	219	0	0	18	0
Bail	0.24	0.46	0.30	538	1030	672	45	86	56
Exceptional	0.50	0.00	0.50	82	0	82	7	0	7
Juvenile	0.00	0.00	0.00	0	0	0	0	0	0
Expiration	0.00	0.33	0.67	0	72	146	0	6	12
Detained	0.00	0.00	0.00	0	0	0	0	0	0
Group 3: BCDC Population In Facility 31 Days or More									
	Risk Multiplier N=103			Flow Estimates Per Year			Flow Estimates Per Month		
Release Status	**Low**	**Med**	**High**	**Low**	**Med**	**High**	**Low**	**Med**	**High**
Rel No Charge	0.00	0.00	0.00	0	0	0	0	0	0
Rel from Court	0.22	0.57	0.22	235	623	235	20	52	20
Rel Own Recog.	0.00	0.00	0.00	0	0	0	0	0	0
Bail	0.14	0.57	0.29	107	436	222	9	36	18
Exceptional	0.00	0.00	0.00	0	0	0	0	0	0
Juvenile	0.00	0.00	0.00	0	0	0	0	0	0
Expiration	0.33	0.33	0.33	18	18	18	2	2	2
Detained	0.32	0.45	0.23	2832	3983	2036	236	332	170

Section VII: Proposed Reentry Model Strategies – By Population and Length of Stay

The 6 track reentry planning model outlined below relies heavily on Mellow et al. (2008) as the basis of this proposed strategy. The models outlined below are defined by population and length of stay in the facility. As noted previously, the three populations of interest are:

1) Individuals detained in Central Booking for short periods (e.g., 24 to 48 hours);
2) Detainees housed for longer periods (e.g., up to 1 month); and
3) Those who remain in the facility for several months (31 days or more).

Note that some type of screening tool is required to implement this proposed reentry strategy based on risk and length of stay. The proxy appears to be the simplest tool to use for the immediate time as it relies on self-report data rather than requiring booking staff to access the Offender Case Management System to obtain administrative data to designate an individual's risk level. In the long term, however, DPSCS might consider other administrative data reliant tools in order to distinguish the low level "frequent flyer" arrestee from the more serious offender, and to provide treatment and programming accordingly.

As a matter of practice, for all tracks that involve at least one interaction between correctional staff and the inmate, a log should be maintained in order to gather data to assess the efficacy of this model. At a minimum, the logs should capture the date(s) and time of the interaction, the SID number of the individual who received services, and a brief description of the interaction. The log could vary depending on service track, so the log for Track 2 would contain only the date, SID number, and a checkbox to indicate whether the inmate was provided the reentry plan form to complete on their own (passive assistance) or if the staff guided them through completing the form (active assistance). The Track 3 log could be more specific to capture the top priority services/needs outlined in the reentry plan developed with the inmate, and for those higher risk individuals requiring treatment or HIV aftercare, the log would indicate the names of providers and so on.

To be useful for continued monitoring of these reentry strategies, these logs would be maintained electronically (e.g., using a form built on tablet or hand held device)[53] and completed at the time of the interaction. Then, the data should be reviewed periodically to assess the number of inmates receiving the various services along the various tracks, dates/times of interactions (to ensure sufficient staffing if interest from detainees peeks at particular times or days of the week), what types of services are more most frequently needed, etc. to allow for revisions and corrections to the various reentry strategies. Recidivism analysis from CJIS data obtained with the SID numbers should be routinely conducted. The service log and CJIS data, when analyzed together, will provide a robust portrait of the services provided ('dosage'), will ensure that the targeted populations are receiving the designated level of services, and will provide a mechanism

[53] One option is to use HandBase from DDH Software. This software allows one to create customized databases for handheld devices, tablets and desktop computers, which can then be synced to integrate the information into a larger database. The cost is $14.99 per user license, and $24.99 for one Professional license which is needed to create and edit the database forms. See http://www.ddhsoftware.com/index.html

to assess the outcomes of those efforts.[54] This data, coupled with expenditure information (e.g., staff time, printing costs), provides an opportunity to conduct a cost-benefit analysis to assess sustainability and viability of the reentry strategy.

Overall, we estimate that 53,319 individuals are booked into BCBIC annually, with 39,334 released within 48 hours, 3,223 held for 3 to 30 days, and 10,762 are retained in the facility for 31 days or more.

The various reentry tracks and identified populations follow.

[54] The need for data on measures of services provided and treatment dosage are highlighted in a recent article by White, et al., (2012) which examined a Riker's Island jail "in-reach, outreach" reentry program (p. 140). Sentenced jail inmates are provided services behind the walls, followed by services beyond the walls for 90 days. This evaluation found those who received the full dosage of 90 days survived in the community without a return to jail significantly longer than those who received less than 90 days of treatment services.

Reentry Track 1 - No Staff/Inmate Interaction Required

Target: All Arrestees Released within 48 hours, Regardless of Risk Score
Monthly Estimates by Risk: 1,789 low risk; 1,368 medium risk; 451 high risk
Track 1 Estimate: 3,608 persons per month; 43,296 persons annually (Figure 19)

Figure 19: Track 1 Monthly Estimates by Risk and Length of Stay

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	**1458***	**1368***	**451***
Group 2: Released 3 to 30 days	**65***	124	79
Group 3: Remain 31 days or more	**266***	422	209

*** Reentry Track 1 Target Population**

Action: Resource Information

Due to the very short stay, intervention options are limited. Focus should be on provision of information to the majority of these detainees.

- As of June 2013, all those leaving from BCDC and Central Booking are now released from the Eager Street Lobby. The facility should implement a "Resource Wall" in this release location with copies of service provider brochures, information on city services, and other assistance guides are available. A staff member or intern should be designated who would be responsible for monitoring the Resource Wall to ensure it is well stocked. This should include tracking the inventory to assess which brochures and information are picked up more frequently (in order to both gather a sense of what is of greatest interest by releases) and to provide information to service providers in terms of planning for continued stocking of the Resource Wall.

- Place a phone with a direct line to 211 and a computer in the Eager Street lobby, limiting access to the Maryland Community Service Locator website at http://www.mdcsl.org/advantagecallback.asp?template=map_search and provide easy step-by-step instructions of how to access the information.

- If service providers wish to staff an information booth, they should have staff present in particular from 6 PM to midnight at the Eager Street lobby on Sunday, Monday, Thursday, Friday and Saturday, when the highest percentage of those released within 48 hours will leave the facility.

- Implement the "Reentry Support Hot Line" strategy used in Kentucky.

- Pamphlets, brochures or other printed materials could be printed by Maryland Correctional Enterprises (MCE) to reduce the cost.

Reentry Track 2 - One Staff/Inmate Interaction Required

Target: Medium Risk Arrestees in Facility from 3 to 30 days
Estimated Distribution by Risk, per month: 124 medium risk
Track 2 Estimate: 124 persons per month, 1,488 annually

Figure 20: Track 2 Monthly Estimates by Risk and Length of Stay

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	1458	1368	451
Group 2: Released 3 to 30 days	65	**124***	79
Group 3: Remain 31 days or more	266	422	209

***Reentry Track 2 Target Population**

Action: Resource Information + Self-Service or Guided Snapshot Reentry Plan

While the time allowed to interact with a detainee who is housed between 3 and 30 days is short (and the individual may be released anytime within that range), medium risk arrestees would likely still benefit from more than the passive sharing of resource information (vis-à-vis the resource wall) available to all individuals who are low risk and/or released within 48 hours. Thus, this group should be targeted for a single planned interaction to complete a "snapshot"[55] reentry plan, and they can use the plan to target service information from the resource wall. This snapshot reentry plan could focus on the top three self-defined reentry needs[56] and priorities, and would likely be most effective if guided by reentry and/or correctional staff. A brief self-assessed services/needs tool could be developed to guide the snapshot reentry plan.

- Staff could guide Track 2 offenders to help them develop their snapshot reentry plan.
- The self-service or guided snapshot reentry plan assistance could be provided in the library reentry service center.
- The center could include copies of both the reentry plan and a service/needs tool so that those detainees who wish to complete the reentry plan without direct assistance from staff can do so.
- Given the lack of case management staff available to work with detainees one-on-one (See Appendix B, issues #4 and #13) Social work and criminal justice students from local Colleges and Universities could be recruited as interns to staff the library reentry center to assist Track 2 inmates.

[55] The snapshot plan matrix and guide would have to be developed but it could consist of key needs which are known criminogenic factors such as financial concerns, housing, employment, education, family and martial relationships, substance abuse, peers, and use of leisure time. The guide could include a self-test and/or scenarios which seek to help the individual to self-identify those issues which require immediate action.

[56] There are limitations to focusing efforts on self-defined reentry priorities particularly in the behavioral health arena. Those assessed as having a need for mental health and substance abuse services are considerably less likely to self-define that need than indicated on a risk/needs assessment. See discussion in Sandwick, et al., 2013, pgs. 14-15.

Reentry Track 3 - One or More Staff/Inmate Interaction; Community In-Reach

Target: High Risk in Facility from 3 to 30 days
Estimated Distribution by Risk, per month 79 High Risk
Track 3 Estimate: 316 persons per month, 3,792 annually

Figure 21: Track 3 Monthly Estimates by Risk and Length of Stay

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	1458	1368	451
Group 2: Released 3 to 30 days	65	124	**79***
Group 3: Remain 31 days or more	266	422	209

***Reentry Track 3 Target Population**

Action: Resource Information + Comprehensive Assessment + Reentry Plan & Identify Specific Providers + Community Service Provider In-Reach Fair + Prioritize for Community Provider Pre-Release Appointments

All those initially assessed as medium or high risk should be provided a different color wrist band (or sticker to be added to the wristband) (e.g., blue for medium risk, green for high risk). This would enable service providers to easily identify individuals during in-reach sessions, and/or allow officers to call those individuals for services by band or sticker color.

Those designated as high risk at initial screening would be assessed using a comprehensive risk screening tool LSI-R or the COMPASS[57] in order to identify recidivism risk factors and service needs. It is estimated that 288 individuals per month (or 3,456 annually) would require this comprehensive assessment.

- Following completion of the more comprehensive assessment tool, high risk individuals in Track 3 would work with staff with to develop a reentry plan based on that assessment. Staff would provide inmate with names/contact information of specific service providers.

- All Track 3 individuals attend community service provider in-reach sessions to make contact with the service providers outlined in their reentry plans. These sessions could be conducted within a "resource fair" model with a different providers coming to the facility gym or other large program area at a set time, one day a week for several hours. Each community provider could have a "booth" or information desk to provide general service information, and to set up appointments with Track 3 individuals for pre-release follow-up conversations.

[57] For more information on these and other commonly used assessment tools, see the Reentry Policy Council Assessment Tool http://tools.reentrypolicy.org/assessments/instruments/Recidivism+Risk#LSI-R

Reentry Track 4 - Multiple Staff/Inmate & In-Reach by Community Providers Required

Target: Medium and High Risk Arrestees in Facility for 31 days or more
Estimated Distribution by Risk, per month: 422 Medium Risk, 209 High Risk
Track 4 Estimate: 631 persons per month, 7,572 annually

Figure 22: Track 4 Monthly Estimates by Risk and Length of Stay

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	1458	1368	451
Group 2: Released 3 to 30 days	65	124	79
Group 3: Remain 31 days or more	266	**422*+**	**209***

***Reentry Track 4 Target Population**

Medium Risk: Resource Information + Guided Self-Defined Reentry Plan & Identify Specific Providers + Community Service Provider In-Reach Fair

<u>Special Group:</u> Substance Abuse Treatment and/or HIV Aftercare: Encourage Connection In-Reach Fair and/or Staff Facilitate Appointment for Post-Release Services

High Risk: Resource Information + Comprehensive Assessment + Reentry Plan & Identify Specific Providers + Community Service Provider In-Reach Fair + Prioritize for Community Provider Pre-Release Appointments

<u>Special Group:</u> Substance Abuse Treatment and/or HIV Aftercare: Encourage Connection In-Reach Fair and/or Staff Facilitate Appointment for Post-Release Services + Staff Follow-up Service Linkage

All those initially assessed as medium or high risk should be provided a different color wrist band (or stickers) to enable service providers to easily identify individuals for in-reach. Those designated as high risk at initial screening would be comprehensively assessed to identify recidivism risk factors and service needs.

- **Medium Risk:** Staff would work with Track 4 offenders to develop a reentry plan based on self-defined reentry priorities, including provision of specific provider information. For those identifying the need for substance abuse treatment or HIV aftercare, discharge planning staff will encourage inmates to set an appointment with the provider at the in-reach session or assist by contacting a provider to set an appointment for service initiation immediately upon release.

- **High Risk:** Following completion of the more comprehensive assessment tool, high risk individuals in Track 4 would work with staff to develop a reentry plan based on that assessment. Staff will provide inmates with names/contact information of specific

service providers. For individuals who need substance abuse treatment or HIV aftercare, staff will set appointments for these services with critical providers prior to release. Staff will follow-up with provider to ensure appointments are kept and services provided.

- All Track 4 individuals attend community service provider in-reach sessions to make contact with the service providers outlined in their reentry plans. During these resource fair type sessions, providers could have a "booth" or information desk to provide general service information, and set up appointments with high risk Track 4 individuals for follow-up conversations prior to release.

- Note that medium risk individuals in the facility from 3 to 30 days are not included in the community service provider in-reach fair in either Track 3 or Track 4. However, if the different colored wrist band or sticker approach is utilized where they are simply called for the service provider in-reach fair by color of their wrist band or sticker, it is possible that those who are in the facility from 3 to 30 days may attend the fair. Consequently, this might cause a capacity shortage for service providers who may have too many individuals to serve in time allotted for the fair. Should DPSCS implement both the color band/sticker and the community provider in-reach strategies, then capacity at the fairs should be tracked and the process refined to target only those medium risk individuals who have been in the facility for 31 days or more in order to meet the needs of both the inmates and the providers.

Reentry Track 5 - Multiple Medical/Mental Health Coord. /Inmate Contacts Required

Target: Medium and High Risk Identified by Medical
Estimated Distribution by Risk: Unknown, but pool of 834 person per month
Track 5 Estimate: Pool of 834 persons per month, as determined by Medical

Figure 23: Track 5 Determined by Medical at Pre-Trial Interview

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	1458	1368	451
Group 2: Released 3 to 30 days	65	**124****	**79****
Group 3: Remain 31 days or more	266	**422****	**209****

****Eligible for Track 5 Target Population**

Medical: Resource Information + Discharge Planning + Flag Reentry Services Referral + Individualized Case Plan + Care Coordination with Community + Post-Release Follow-up DPSCS Community Supervision (If Applicable)

As noted in Gaps and Barriers document (see Appendix B, Issue #3) the lack of medical discharge planning and medication dispensing hinders successful transition to the community. Medical Discharge Planners are now in the facility to improve communication with custody and medical providers in-house and in the community to ensure continuity of care.

As illustrated in the "Reentry Process From Intake Through Sentence Expiration" flowchart in Appendix C, those who remain in the facility following the bail decision are assessed by the Medical unit. This is the opportunity for medical and mental health staff to identify and provide a discharge plan, reentry services, conduct a suicide risk and mental health evaluation (within 7 days) of the commitment decision.

Data required for estimating the number of individuals assessed by Medical staff who require services was not included in this review. However, the overall pool is the 834 individuals per month who are either medium or high risk, and who remain in the facility for more than 3 days. Analysis should be conducted to provide a better sense of the flow and needs of these individuals.

Note that the pool of eligible individuals to be served by medical are included in prior reentry tracks, and thus will still receive services by risk level and length of stay.

Reentry Track 6 - Reentry Programming Multiple Staff/Inmate Interactions Required

Target: Medium and High Risk, based on snapshot, standard or medical reentry plan
Estimated Distribution by Risk, per month: 546 Medium Risk, 288 High Risk
Track 6 Estimates: Prioritize High Risk: 288 persons per month, 3,456 annually
Waitlist Medium Risk: 546 persons per month, 6,552 annually

Figure 24: Track 6 Monthly Estimates by Risk and Length of Stay

	Monthly Estimates By Risk		
Length of Stay	**Low**	**Med**	**High**
Group 1: Released within 48 hrs	1458	1368	451
Group 2: Released 3 to 30 days	65	**124*+**	**79*+**
Group 3: Remain 31 days or more	266	**422*+**	**209*+**

***Reentry Track 6 Target Population**
+Not Exclusive to Track 6 – Included as Target Populations in Tracks 2-5

- Those designated as high risk at initial screening would be comprehensively assessed to identify reentry programming that best addresses those identified needs.

- All inmates identified as medium or high risk should be eligible for programming based on the needs and risks identified in either the snapshot, standard, or medical reentry plan. If program space is limited, higher risk inmates should be prioritized for services.

- DPSCS should consider implementing a reentry transition program within a closed housing unit for high or medium risk sentenced inmates (akin to a therapeutic community) who will be in the facility for 6 or more weeks and/or targeted toward those in the last 6 weeks of their sentence. This strategy could be based on the Duchess County Jail Transition Program[58] which has demonstrated to successfully reduce recidivism among high risk offenders by 25% to 33% (compared to a similar group of offenders released in the same time period) in repeated studies of the program.

- Note that the pool of eligible individuals for reentry programming are in the prior reentry tracks, thus those who do not participate in programming will still receive services by risk level and length of stay.

In considering what types of programs would be most useful, data from the 64 detainees from the Window Replication study who were medium or high risk and were in the facility for 31 days or more shed light on the programs they would like to participate in if they were available. Programs include trade or vocational training (70%); employment skills (55%); GED (48%); substance abuse treatment (42%); life skills (33%); anger management (28%); parenting skills (27%), 12 Step meetings (25%) and conflict resolution skills (22%).

[58] A detailed description of the program with planning documents are available in Appendix A of the Christensen and Crime and Justice Institute (2008) report available at: http://static.nicic.gov/Library/023357.pdf

While there are a variety of programs offered in the facility, it may be useful DPSCS to review these programs to ensure that the programs target both recidivism risk factors and meet the needs of participants. One way to do this would be to conduct the Correctional Program Checklist - Group Assessment (CPC-GA). The CPC-GA is a tool designed to "provide a standardized, objective way of assessing the quality of correctional programming against empirically based standards. The CPC and CPC-GA are designed to measure how closely programs meet the known principles of effective intervention" (Latessa, Smith, Schweitzer, & Lovins, 2009, p. 15).

In Section VIII, barriers to implementing these strategies are explored below. These barriers were based both on the research literature and on the work of the members of the Mayor's Adult Population Subcommittee, in collaboration with the DPSCS Detention Reentry Model Development Committee.

Section VIII: Barriers to Implementation

The Mayor's Adult Population Subcommittee consisted of staff from the Mayor's Office of Human Services and DPSCS, as well as members of the community. The DPSCS Detention Reentry Model Development Committee included DPSCS staff and Mayor's Office of Human Services staff. One of the primary efforts of Adult Population Subcommittee was to discern barriers to the effective implementation of a reentry strategy, and to brainstorm solutions to these issues in collaboration with the DPSCS Detention Reentry Model Development Committee (see Appendix B for the draft matrix detailing these efforts).

One of the critical barriers concerns the correctional staff and the culture of the custodial environment (Appendix B, issue #12). Key to this discussion is the issue of legitimacy, or procedural fairness. Procedural fairness is related to the treatment of people with dignity and respect, influencing their view of the legitimacy of group authority, and ultimately affects their obedience to group norms. Studies have found that individuals who feel they have been treated fairly are less likely to engage in criminal behaviors (see for example Paternoster, Brame, Bachman & Sherman, 1997). While much of the work on legitimacy has focused on police actors, Franke, Bierie, & McKenzie (2010) conducted a randomized experiment in two DPSCS facilities and found that fair treatment from correctional staff promotes legitimacy, while negative experiences worsen perceptions of fairness.[59]

It is clear that all DPSCS staff who interact with the population will need to be engaged, and believe in the value and viability of a jail reentry effort (see also Appendix B, issue #13). This requires ongoing staff training (Lerch, 2012) and frequent monitoring to ensure efficient implementation of these policies. One possibility suggested by the Adult Population Subcommittee is to develop and include a reentry training module in the annual in-service training program non-core requirement to address both cultural concerns (including gender-specific, and trauma informed) and to encourage staff to engage detainees and inmates into reentry services.

A related barrier with respect to staff are challenges faced by community service providers seeking to come into the facility, and ensure providers understand the "do's and don'ts" in their relationships with detainees and inmates (Appendix B, issues #1, #6). Community providers in particular noted it was difficult to provide services when, despite having made arrangements prior to their scheduled time, they were delayed or denied entry into the facility.[60] The Adult Population Subcommittee suggested (Appendix B, issue #1) that information should be relayed to custody staff during roll call. They suggest the development of a brief outline including program and service providers' schedule and the role of the officer in facilitating timely access to the facility. Service providers would also benefit from having a regular contact person at the facility and a protocol for resolving same-day facility entry issues.

[59] Interviews conducted in the Los Angeles County Jail indicate that inmate reports on the behavior of correctional staff impacts the capacity of the program to engage people into services (Sandwick, et al., 2013).

[60] This concern is not unique to Baltimore; this was also an issue in the Los Angeles Jail. (Sandwick, et al., 2013)

At the same time, service providers need to have a solid understanding of the rules and regulations related to interacting with inmates. It was suggested that the Inmate Handbook needed to be updated (Appendix B, issue #5) to reflect information on reentry services available to the BCDC population. The inmate handbook dated 2007 is available on the DPSCS website.[61] Another barrier identified by the subcommittee is that inmates lack access to computers (Appendix B, issue #7). As a result, detainees/inmates are unable to obtain information about a variety of reentry related needs that may not necessarily be addressed by specific providers while the individual is housed in the facility (e.g., tips for resume writing, job opportunities, housing etc). Fortunately, the Maryland Department of Labor, Licensing, and Regulation (DLLR) and DPSCS have an existing initiative to open computer labs in all correctional facilities; however, the initiative would need to be expanded to include BCDC.

Dissemination of reentry programs and services to all those processed into the facility is another challenge identified by the Subcommittee (Appendix B, issue #8). Several suggestions include development of an information sheet to include in the inmate orientation materials; and possibly adding a reentry module to the orientation in Central booking, WDC, and the juvenile units. The challenge to this would require adding additional time to the orientation session. Other suggested solutions include adding resource materials to a mobile cart to go into each housing unit in the facility, and recording a video[62] to be broadcast on inmate televisions, although this would require routine updating.

Another identified challenge to any programming effort is the lack of space throughout BCDC (Appendix B, issue #10). The subcommittee suggested thinking "outside the box" to find space including the gym, library, and tier dayrooms for program purposes. In addition, they suggest putting posters and other reentry materials in the hallways.

Section IX concludes this report.

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[61] http://www.dpscs.state.md.us/publicinfo/publications/pdfs/2007_Inmate_Handbook.pdf

[62] The Cook County Illinois Sheriff's office developed a 40 minute DVD shown on the jails closed circuit network that is intended as "both educational and motivational for current inmates". Two versions of the DVD (one of which includes a discussion of policy) were provided to CRA by the Deputy Director of Cook County Department of Corrections. The DVD includes discussions with correctional staff, community program providers, and former inmates on topics including release planning, drug and alcohol treatment, mental health, housing, and employment. The policy section of the DVD discusses the changing perceptions of offenders, the role of community in jail reentry and costs of providing supportive housing versus reliance on incarceration. The DVD is available to borrow upon request, or can be requested directly here: http://ecommons.luc.edu/cgi/viewcontent.cgi?article=1006&context=criminaljustice_facpubs In addition, Cook County recently partnered with an organization called Jail Education Solutions which provides a variety of educational content (e.g., from basic literacy, to career development, health and wellness, and success stories) to jail inmates through the closed circuit television system. http://jaileducationsolutions.com/

Section IX: Conclusion

The overall purpose of this project was to highlight jail reentry programs and strategies that could be targeted toward the higher risk/need populations processed in the Baltimore City jail. In addition, this project utilized numerous sources of data to inform this process including criminal history data, Offender Case Management System, Window Replication project survey data, proxy assessment tool data at booking, and LSI-R assessment data. This information was utilized to paint a contextualized portrait of those arrested in Baltimore from a demographic and criminal history perspective, and to gain a better understanding of their needs, by risk level and length of stay. Data and other statistical reports were also used to compute estimates of the number of individuals arrested, by risk level and length of stay on an annual and monthly basis.

The work of the Mayor's Adult Population Subcommittee and of the DPSCS Detention Reentry Model Development Committee further informed the process – particularly with respect to operational issues and barriers. These groups not only identified the most relevant issues, but sought creative solutions.

These proposed strategies are ambitious; implementing and maintaining this plan will require effort, investment, and leadership. The challenges include an environment of limited resources, staff resistance, and cultural perspectives that are at cross-purposes for the goals of successful and long term reentry of jail detainees and inmates to the community. These are known barriers[63] that can hinder what can be accomplished in the immediate versus intermediate and long term goal attainment.

However, this should not deter the effort. Helen Keller stated:

> *"Do not think of today's failures, but of the success that may come tomorrow. You have set yourselves a difficult task, but you will succeed if you persevere; and you will find a joy in overcoming obstacles. Remember, no effort that we make to attain something beautiful is ever lost."*

The number of individuals processed through the jail on an annual basis, and the collateral consequences of continued engagement in the criminal justice system on these individuals, their families, and the community emphasize why implementing a jail reentry strategy is critical. A focused comprehensive reentry strategy, such as the one proposed, which is data informed, evidenced-based, and continually monitored for fidelity to the model and impact on outcomes is a sensible approach. Implementation of such a strategy aligns with the vision of DPSCS as a national leader in addressing difficult issues by building on the strengths of staff, use of technology, and interagency cooperation. Finally, this effort speaks most strongly to the value of human life; to provide a chance for those in the Baltimore City Jail and the community beyond.

[63]See Putting the Pieces Together: Practical Strategies for Implementing Evidence Based Practices for suggested solutions to these types of challenges. http://nicic.gov/Library/024394.

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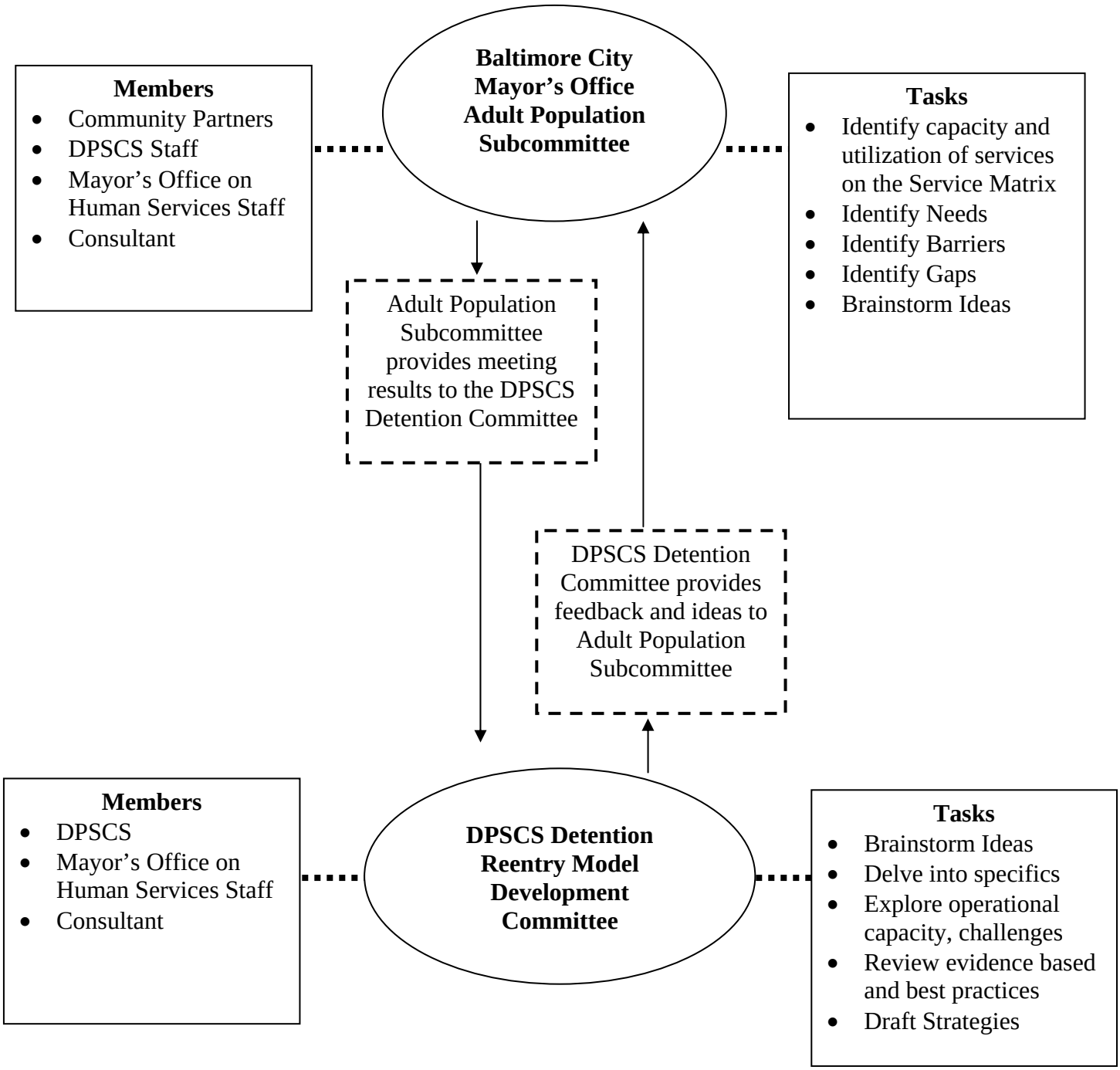
Appendix A: Adult Population Subcommittee & DPSCS Detention Committee Flow Chart



Appendix B: Mayor's Adult Population Subcommittee Draft Plan Address Gaps and Barriers

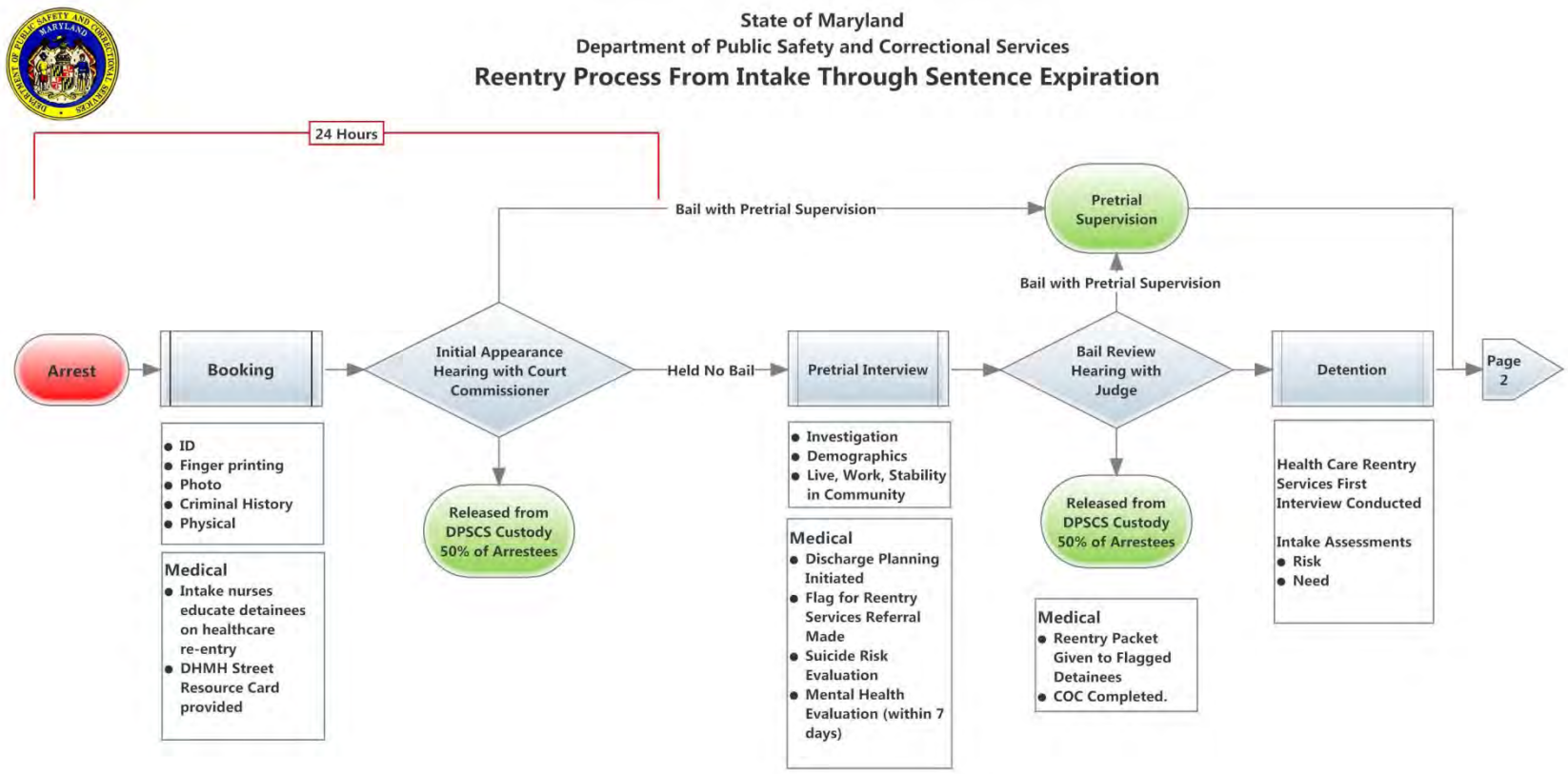
Service Gap	Population	Recommended Solution	Partnership/Action Required
1. Custody Staff should utilize "roll call" to disseminate information regarding "Service Providers" scheduled to enter the facility, the importance of timely access to the facility and what the custody officers' role is in the overall reentry process	All - Booking; Pre-trial Detainees; and Sentenced	Discuss dissemination of reentry programs and service providers with Warden, Asst. Warden, Security Chief, etc. to gain approval for roll call reentry program information sharing.	Develop brief outline of reentry information to be disseminated during roll call. Outline should include programs and service provider schedule and role of the Custody Officers, i.e. entry points, housing units, etc. **Person Responsible: Ms. Alexander will develop the outline with the assistance of Ms. Oliver and Ms. Edmondson. Ms. Oliver and Ms. Edmondson will provide program schedule.**
2. Lack of risk assessment implementation at Booking upon intake hampers directing detainees to services which would create the best opportunities for successful reentry programming. Assessments should be implemented ASAP.	All - Booking; Pre-trial Detainees; and Sentenced	Evidence based best practices have demonstrated that a brief risk assessment during "Booking" provides information to determine which types of reentry services can benefit the detainees during incarceration and upon release. Implement risk assessment at Booking.	Select risk assessment tool from "Best Practices" to implement at Booking. Per Bonnie Cosgrove Department will purchase electronic LSI-R Sept. 2012 to include in OCMS which can be used gather additional "detailed" risk assessment information for reentry planning, exit orientations, etc. by case managers. **Person Responsible: Bonne Cosgrove/ Deputy Secretary's Office. As of September 25, 2012 the risk assessment tool had not been decided.**
3. Lack of Medical Discharge Planning and Medication Dispensing hinders successful transition to the community. Frequently detainees are released without a 30 day supply of medication as required by law due to a lack of communication between custody and medical staff. The new RFP (July 2012) for medical services includes Medical Discharge Planner positions to improve communication with custody and medical providers in-house and in the community to ensure continuity of care for patients/detainees being released from custody.	Pretrial Detainees; and Sentenced	Consult with Dr. Baucom and Dr. Odunze to determine the status of hiring **"Medical Discharge Planners" by Wexford (medical) and two social workers by MHM (mental health)** to coordinate medical discharge planning/medication dispensing and COC. Establish subcommittee with medical and custody to outline procedure for providing release information to medical staff, how medications will be delivered to offenders waiting for release, etc.	Detention Center should develop small subcommittee to develop strategy for medical discharge planning protocol. This will include how MHM socials workers interface with Wexford staff to create seamless medical/mental health discharge plans. Committee should include: K. Harris, K. Jones, Dr. Odunze, Wexford and MHM staff, custody staff, reentry staff. **Person Responsible for organizing subcommittee: Dr. Odunze has been designated to organize the committee.**

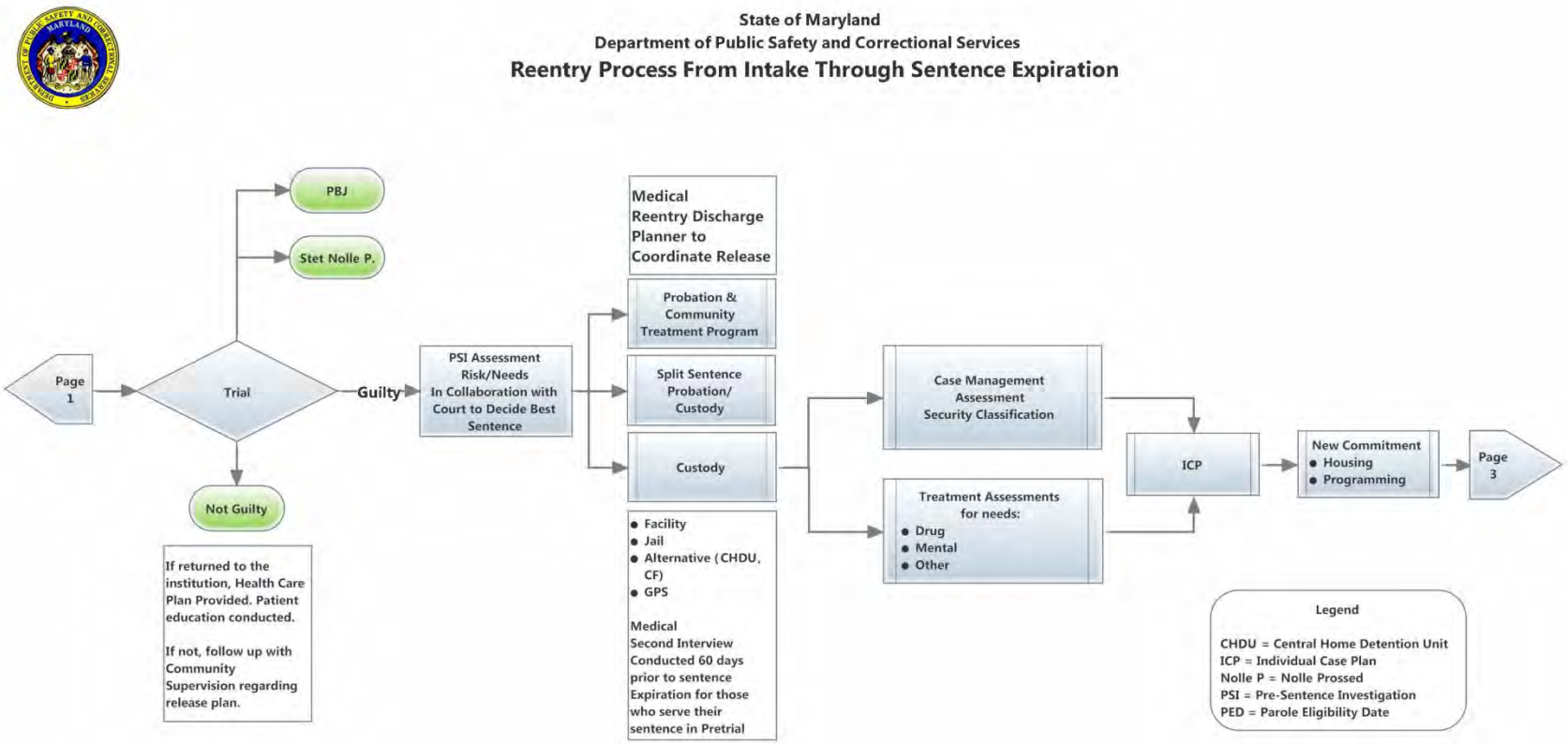
Service Gap	Population	Recommended Solution	Partnership/Action Required
		Dr. Odunze and Wexford staff should develop protocol for communicating patient (authorized) health care treatment information to community health care providers to ensure "Continuity of Care" upon release	Examine Electronic Health Record (EHR) proposal from BSAS and how OCMS and Wexford can play a role in disseminating health care information to community health care providers. **Person(s) Responsible: Dr. Odunze and Medical/Mental Health Subcommittee**
4. Facilities lack enough Case Management staff to provide information on reentry services available and conduct service referrals versus the volume of detainees which flow through the facilities.	All - Booking; Pre-trial Detainees; and Sentenced	Consider utilizing the library as a "Reentry Information Service Center" to disseminate reentry program services available. Consider revising the "Inmate Help Request" policy to include requests to CM for services connected to assessment needs and service provider available.	**Person Responsible: The Library is currently used as a Reentry Service Center. A Reentry section has been developed and is maintained by the librarian, Ms. Oliver and Ms. Alexander with the assistance of Corrections HQ Transition Services staff.** **Ms. Alexander will work with Case Management to revise the Inmate Help Request policy.** **Case management has advised they have enough staff to provide information on reentry services to the population and can make resources available in the case management department by way of a resource wall/shelf (area). However, staffing does not exist for case management staff to conduct direct referrals for individual inmates.**
5. Inmate Handbook/Orientation Materials lacks information on Reentry services available to detainees/inmates. Currently no reentry information is offered to arrestees in Booking	All - Booking; Pre-trial Detainees; and Sentenced	Update inmate handbook/orientation handouts to include information on how detainees can access available reentry services during incarceration and upon release to the community	**Person(s) Responsible: There is a committee already established to revise and update Inmate Handbook/Orientation materials. As noted above Ms. Alexander will work with case management staff to revise the Help Request policy to include reentry service processing by case mgt.**

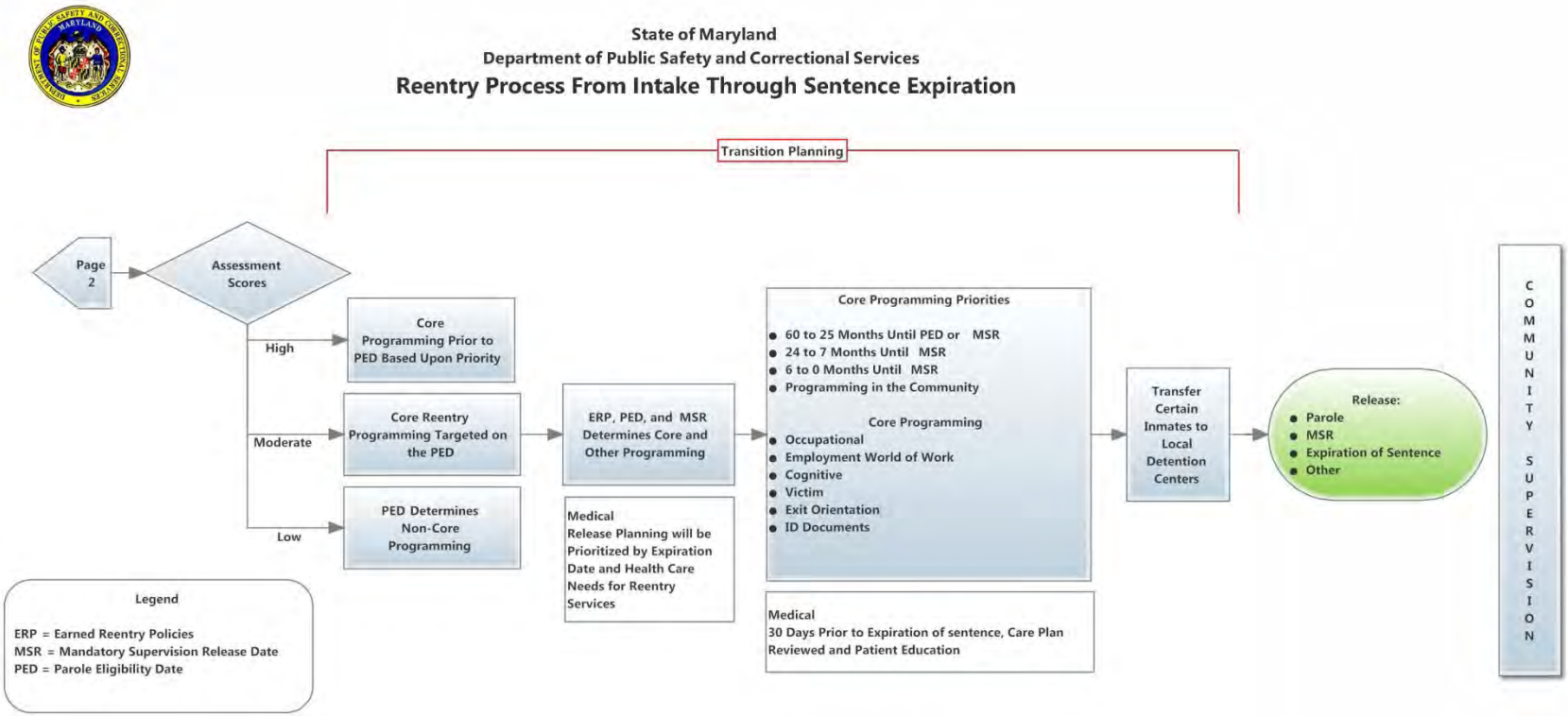
Service Gap	Population	Recommended Solution	Partnership/Action Required
6. Provide Inmate Handbook to service providers to help them understand the rules and regulations. Can consider providing this information on-line for service provider staff and volunteers.	All - Booking; Pre-trial Detainees; and Sentenced	Providing service providers with access to the inmate handbook will help educate providers on the "do's and don'ts" of interacting with offenders/inmates. Consider providing on-line access to inmate orientation information.	**Person (s) Responsible: Once the assigned committee completes the revision to the handbook, it can be provided on-line via the DPSCS Public Website. Service Providers can be referred to the site. Review of the DPSCS Public Website revealed that currently on the site Corrections has its inmate handbook on the site (Publications> External Resources). Responsible staff will have to ensure that revisions are posted to the site.**
7. Lack of computer lab/Reentry center offenders can access in-house to find information about services available	All - Booking; Pre-trial Detainees; and Sentenced	Consider grant funding to create reentry computer lab to research, job opportunities, resume building, housing, etc. PC labs can be considered for J.I Bldg. BCDC library, WDC.	**Person (s) Responsible: Currently DLLR and DPSCS have partnered to open computer labs at all Corrections facilities. This initiative needs to be expanded to Detention facilities (BCDC).**
8. Getting reentry program information to offenders in all areas. Dissemination of reentry program information should be provided during the orientation process for detainees committed to the jail. (**Additional time added to the orientation process may be a barrier to this recommendation**) However, materials could be provided for review and follow-up per the "Help Request" policy with case management.	All - Booking; Pre-trial Detainees; and Sentenced	Incorporate reentry programs and services information available into the inmate orientation materials, handouts, handbook, etc. Research pros and cons of adding a reentry module to the current offender orientation in Central Booking, WDC and Juvenile units.	**Person (s) Responsible: Ms. Alexander will develop an information sheet to be included in orientation presentation. Further discussion is needed to determine feasibility of recording a video to be broadcast on the inmate televisions (have to be updated routinely). Will also look into adding information to a mobile cart.**
9. Only a small number of offenders have access to reentry services compared to total number of population. Develop strategies to increase offender program access	All - Booking; Pre-trial Detainees; and Sentenced	Develop central region internal workgroup to create strategies to address/examine ways to increase offender exposure to reentry services at pretrial and detention	**Person (s) Responsible: DPSCS Detention Reentry Model Development Committee will address this matter. Items of discussion included an in-house resource fair, strategic placement of resource materials throughout facilities.**

Service Gap	Population	Recommended Solution	Partnership/Action Required
10. Lack of program space throughout BCDC. Think "outside the box" to find space to utilize for reentry programming, (i.e. gym, library, tier dayrooms, hallways, etc.) disseminate reentry information, posters, etc.	All - Booking; Pre-trial Detainees; and Sentenced	Develop central region internal workgroup to create strategies to address/examine ways to increase reentry services programming space throughout pretrial facilities	**Person (s) Responsible: Ms. Alexander will work with facility Wardens, Assistant Wardens and Facility Administrators to determine available programming space.**
11. Lack of MOU's with service providers to share data and measure outcomes from services provided	All - Booking; Pre-trial Detainees; and Sentenced	Solicit input from service providers to develop "Memorandum of Understanding" to address data sharing to track outcome measures and program success. **How can Adult Pop Committee help with this initiative?**	**Person (s) Responsible: DPSCS has a Partnership Coordinator, Terri Ricks, JD; who can assist with development of partnerships including MOUs with service providers.**
12. Poor mind-set (attitudes) of some custody staff versus Service Providers regarding the need for reentry programs and services.	All - Booking; Pre-trial Detainees; and Sentenced	Development of reentry training module is necessary to change attitudes and mind-set of staff. **Recommend inclusion in annual in-service training program for non-core requirement.**	**Person (s) Responsible: Ms. Alexander will contact the Assigned training coordinator to develop the reentry training module.**
13. Case Management lacks the capacity to have enough case managers to interact with all detainees/offenders to encourage participation in reentry services	All - Booking; Pre-trial Detainees; and Sentenced	Develop training program for custody and non-custody staff to participate in the encouragement of offenders to enroll in reentry programs to reduce recidivism.	**Person (s) Responsible: This can be included with the above training module. This will also be included in orientation.**
14. The poor literacy skills of offenders can hinder reentry program participation	All - Booking; Pre-trial Detainees; and Sentenced	**Seek suggestions from DLLR, REC Center Reentry, etc. on ways to address and improve adult offender literacy skills.**	**Person (s) Responsible: Ms. Alexander will contact DLLR staff and REC staff already on board with Corrections to further discuss.**

Appendix C: DPSCS Reentry Process from Intake through Sentence




State of Maryland
Department of Public Safety and Correctional Services
Reentry Process From Intake Through Sentence Expiration
Page 1
Trial
PBJ
Stet Nolle P.
Guilty
Not Guilty
If returned to the institution, Health Care Plan Provided. Patient education conducted.
If not, follow up with Community Supervision regarding release plan.
PSI Assessment Risk/Needs In Collaboration with Court to Decide Best Sentence
Medical Reentry Discharge Planner to Coordinate Release
Probation & Community Treatment Program
Split Sentence Probation/ Custody
Custody
Facility
Jail
Alternative (CHDU, CF)
GPS
Medical Second Interview Conducted 60 days prior to sentence Expiration for those who serve their sentence in Pretrial
Case Management Assessment Security Classification
Treatment Assessments for needs:
Drug
Mental
Other
ICP
New Commitment
Housing
Programming
Page 3
Legend
CHDU = Central Home Detention Unit
ICP = Individual Case Plan
Nolle P = Nolle Prossed
PSI = Pre-Sentence Investigation
PED = Parole Eligibility Date


State of Maryland
Department of Public Safety and Correctional Services
Reentry Process From Intake Through Sentence Expiration
Transition Planning
Page 2
Assessment Scores
High
Moderate
Low
Core Programming Prior to PED Based Upon Priority
Core Reentry Programming Targeted on the PED
PED Determines Non-Core Programming
ERP, PED, and MSR Determines Core and Other Programming
Medical
Release Planning will be Prioritized by Expiration Date and Health Care Needs for Reentry Services
Core Programming Priorities
60 to 25 Months Until PED or MSR
24 to 7 Months Until MSR
6 to 0 Months Until MSR
Programming in the Community
Core Programming
Occupational
Employment World of Work
Cognitive
Victim
Exit Orientation
ID Documents
Medical
30 Days Prior to Expiration of sentence, Care Plan Reviewed and Patient Education
Transfer Certain Inmates to Local Detention Centers
Release:
Parole
MSR
Expiration of Sentence
Other
COMMUNITY SUPERVISION
Legend
ERP = Earned Reentry Policies
MSR = Mandatory Supervision Release Date
PED = Parole Eligibility Date

Appendix D: Proxy Risk Assessment Pilot Tool

Department of Public Safety and Correctional Services
Central Booking Proxy Risk Assessment Pilot Tool

Arrestee SID # _____

BIN# _____

Please ask the Arrestee the following 3 questions:

What is your Current Age?		How old were you the FIRST time you were arrested? INCLUDING Juvenile Arrests		How many PRIOR arrests do you have? INCLUDING Juvenile Arrests	
___	___	___	___	___	___
0	0	0	0	0	0
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
6	6	6	6	6	6
7	7	7	7	7	7
8	8	8	8	8	8
9	9	9	9	9	9

*******To be completed by the Officer – Please check all that apply**

Did this Arrestee APPEAR to be:

O Inebriated or High?

O Mentally Incapacitated/Challenged (such as disabled, slow learner, or psychotic)

Proxy Completed:

A Shift	Shift B	Shift C
O	O	O

Date: _____/_____/_____

Officer Initials: _____

Appendix E: Reentry Resource: The Reentry Policy Council Interactive Assessment Tool

Keeping in line with the concept of the need to triage individuals by risk, need, and length of stay, a web-based interactive tool is available at http://tools.reentrypolicy.org/assessments/chart (see Figure 25) which provides information on various assessments and issues related to key crimineogenic risk and need areas. The tool allows the user to select a topical area and time frame, and provides examples of different programs. For example, if you want to review all the issues related to a topic (e.g., physical health) for a time period, you would select the time period (2weeks to 1 month). For this example, issues related to physical health for those detained for 24 to 72 hours include acute medication and treatment needs, screening for infectious disease, HIV/STD testing, pregnancy testing and further assessment. The tool detains who would be needed to conduct these assessments (a corrections intake counselor) and information sources needed (community based medical records, and corrections medical records).

Alternatively, if you wanted to review issues related to a particular area you can select that area (e.g., recidivism risk) and the issues related to that specific area is listed for each of the various time frames. You could then select "More detail and program examples" for more information and a link to program examples.

Figure 25: Reentry Policy Council Assessment Tool Information Tool

Appendix F: LSI-R Sub-Scale Cheat Sheet and Score Sheet

"Cheat Sheet" for Calculating LSI-R Subscales

Go to the score sheet. This is where you will add up the Xs in both columns A and B to get the risk score. On this page, you will also be able to figure the percentages with regard to the LSI-R subscales – which will aid you in determining the top three criminogenic needs. This information is extremely valuable in developing the supervision plan. For the purpose of the Detention Center Pilot, the subscales will help us identify the top services needed by this population. From there, we can recruit community partners to help in meeting these needs.

To come up with the top three subscales, you will add up the Xs in each of the following categories:

Criminal History
Family/Marital
Companions
Alcohol/Drug Problems
Emotional/Personal

Each category has a different amount of questions – therefore each question with an X will have a different percentage value based on the category in which it was counted. See below for the X percentage value for the different categories.

Criminal History has 10 questions, therefore each X you count is worth 10%.
Family/Marital has four questions, therefore each X you count in this category is worth 25%.
Companions has five questions, therefore each X will count as 20%.
Alcohol/Drug Problems has nine questions, therefore each X counted is valued at roughly 11.1%
Emotional/Personal has five questions making each X counted a value of 20%
Attitude/Orientation has four questions, therefore each X counts as 25%.

See attached score sheet to see the breakout. Once you have identified the three subscales with the highest percentages, you will then compare those categories to the Big Six. This will help in determining the assistance and services most needed by the individual. See below:

These are the subscales that match up to the Big 6:

Criminal Personality = Emotional/Personal
Anti-Social Values = Attitude/Orientation
Low-Self Control = Criminal History
Substance Abuse = Alcohol/Drug Problems
Anti-Social Peers = Companions
Dysfunctional Family Ties = Family /Marital

LSI•R: The Level of Service Inventory • Revised

by D. A. Andrews, Ph.D., and James L. Bonta, Ph.D.

Name:_____ Identifying Number:_____
Date of Birth:___/___/___ Sex: M F Date:___/___/___
Referral Source:_____ Reason for Referral:_____
Disposition:_____ Present Offenses:_____

Instructions: Add up the number of X's in column A and record the number in the appropriate box. Do the same for column B. Add the totals for columns A and B for the total LSI-R score. Refer to the Male or Female Profile Sheet for charts of the LSI-R total score. Note: X's that fall in the blackened areas are not counted. Circled numbers represent missed questions.

Column A

Criminal History: 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.

Education/Employment: 11. 12. 13. 14.

School: 15. 16. 17.

Employed: 18. 19. 20.

Financial: 21. 22.

Number of prior convictions ☐

Number of present offenses ☐

Number of times punished for institutional misconduct ☐

Type of drug associated with current drug problem (if any) ☐

Other indicators of drug problem ☐

Area of psychological assessment indicated ☐

Total from Column A and Column B is:

Column B

Family/Marital: 23. 24. 25. 26.

Accommodation: 27. 28. 29.

Leisure: 30. 31.

Companions: 32. 33. 34. 35. 36.

Alcohol/Drug Problem: 37. 38. 39. 40. 41. 42. 43. 44. 45.

Emotional/Personal: 46. 47. 48. 49. 50.

Attitude/Orientation: 51. 52. 53. 54.

Total number of X's in column A ☐ → **TOTAL LSI-R SCORE** ☐ ← **Total number of X's in column B** ☐

Interviewer:_____ Date:___/___/___