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**POPULATION HEALTH INSTITUTE**  
*Translating Research into Policy and Practice*

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## ***EXECUTIVE SUMMARY***

# **Progress Update on the Evaluation of the Earned Release Program (ERP)**

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**For  
The Wisconsin Department of Corrections**

## INTRODUCTION

The University of Wisconsin Population Health Institute was asked by the WI Department of Corrections to provide an evaluation of its Earned Release Program (ERP). The examination of ERP began on March 1, 2006 and will conclude on December 31, 2007. A comprehensive report detailing the findings of the process and outcome evaluation was submitted to the Department in January 2007 and finalized in February 2007. The report also contained numerous recommendations for program improvement. Former Secretary Matthew Frank ordered the creation of an ERP Action Plan to address each recommendation made in the report. The current report summarizes progress toward the development and implementation of the ERP Action Plan since February 2007. Extensive assistance with the evaluation was provided by DOC central office staff, ERP administrative and treatment staff, and Division of Community Corrections (DCC) agents and administrative staff.

## REVIEW OF RECOMMENDATIONS FOR IMPROVEMENT

The February 2007 evaluation report included a variety of suggestions for program improvement related to system-level issues, treatment program modifications, reach-in/reentry issues, assessment of post-release outcomes, and continuing evaluation.

### System-Level Recommendations

1. **Limit Admission To Those With At Least a Sixth Grade Reading Level Or Develop Separate Programming for Lower Functioning Offenders:** ERP should enforce the sixth grade minimum reading level suitability criteria or develop separate programming for lower functioning offenders.
2. **Reevaluate Program Staffing Pattern:** DOC should provide additional treatment and support staff positions for ERP, particularly for the female program at REECC which has experienced a reduction in staff positions available to operate the program while maintaining the same program capacity.
3. **Further Examine the Impact of Race Upon Treatment Completion:** While ERP provides gender-specific treatment, the cultural appropriateness of ERP for the wide range of program admissions has not been assessed.
4. **Convert the Temporary Hold Beds At DACC to ERP Pre-Program Beds:** Due to the disruptions to treatment caused by non-program inmates at DACC, these beds should be reserved solely for ERP eligible/suitable inmates awaiting admission to the program. Treatment staff suggested that a “pre-program” treatment orientation curriculum be developed for the inmates awaiting program entry.

### Treatment Program Recommendations

1. **Develop Consistent Data Collection Procedures For Admissions:** It is recommended that both ERP sites utilize a consistent system to document program admissions.
2. **Improve Participant Assessment at Program Admission:** ERP should utilize validated assessment tools to gather substance abuse diagnosis, addiction severity, criminogenic risk/needs, and treatment motivation.
3. **Consider Modifying Curriculum to Further Emphasize Employment:** While ERP must retain its focus on treatment issues, greater support of continuum of care and employment issues that impact success after release could be considered.
4. **Increase Selected Pre-Release Activities at REECC:** To enhance the transitional experience for female participants, REECC should increase consistency with the transitional services at DACC during Phase 3.

- 5. ERP Staff Should Discuss Participant Satisfaction Results:** ERP staff should read the participant and graduate quotes so that they can hear the opinions of participants in their own words and should then meet as a group to discuss suggestions for program improvement.
- 6. Increase Consistent Enforcement of Treatment Program Rules:** Participants at DACC reported that some program rules are enforced differently among the units and floors at DACC. This is not unanticipated with more than 20 social workers operating treatment groups.
- 7. Continue To Address Participant Retention Issues:** ERP should continue to address issues related to participant retention through individual treatment interventions and repeating treatment phases if necessary.
- 8. Improve the Speed With Which Participants Are Admitted and Released:** One way to increase the bed savings for ERP graduates would be to release graduates more promptly than the current average of 13 days after graduation.
- 9. Explore Options to Enhance the Transition/Aftercare Component:** Based on best practices as well as the intent of ERP to reduce both risk to the public and recidivism, ERP should consider designating a staff position to provide enhanced transition and aftercare coordination. If budgetary constraints prevent the creation of additional staff positions, ERP should assign responsibility for transition functions to existing staff without adding to individual workload.

#### **Reach-in/Transition Component Recommendations**

- 1. Conduct Agent Training Sessions to Increase Compliance With Contact Standards:** It would benefit the program to increase agent knowledge of ERP practices and procedures.
- 2. Designate Selected Agents to Supervise ERP Graduates:** As an alternative to training all DCC agents, DCC could designate selected agents within each unit to supervise ERP releases.
- 3. ERP Program Sites Should Document Frequency of Reach-In Contacts:** The number and type of reach-in contacts made for each participant should be systematically documented.

#### **Ongoing Evaluation of Participant Outcomes Recommendations**

- 1. Develop a Plan for Ongoing Program Evaluation:** ERP should develop a plan for ongoing program evaluation that includes the systematic collection of participant information through a program-level database, and determination of who will summarize and interpret the data, how the results will be reported and to whom, and how the results will be used for program improvement.
- 2. Develop System For Agent Reporting of Participant Outcomes:** A system-level effort could be made to allow agent reporting of selected outcome indicators at specified intervals after release via an electronic database. As part of this evaluation, the evaluator developed a preliminary design for a system would allow agents to input information on ERP participant outcomes into a database residing on the DCC network.
- 3. Develop a System-Wide Procedure for Reporting of Offender Outcomes:** The above reporting system for ERP participants could also be viewed as a pilot test for potential implementation system-wide to collect post-release outcomes for all DAI releases.
- 4. Develop A Matched Comparison Group for ERP:** An additional consideration may be the development of a matched comparison group of offenders who do not participate in ERP. A potential comparison group might be those who are eligible, but timeframe inappropriate.

### **ACTION PLAN: A RESPONSE TO RECOMMENDATIONS**

In response to these recommendations the ERP Oversight Committee, ERP program staff, DCC Regional Chiefs, DCC agents, central office administrative staff, and the evaluator met on numerous occasions to collaboratively prioritize the recommendations and develop a program improvement plan. Table 1 provides a brief summary of progress toward each activity as of November 30, 2007.

**Table 1: Overview of ERP Action Plan Progress**

<b>Issue/Recommendation</b>	<b>Target Date/Status</b>
<b>Administrative</b>	
A. Develop a program improvement Action Plan based on the 2007 evaluation recommendations with input from the program staff	Completed
B. Examine composition of Oversight Committee and reissue charge	Completed
<b>System-Level</b>	
A. Update program suitability criteria	Completed
B. Reevaluate program staffing pattern	Completed
C. Explore the feasibility of providing enhanced transition and treatment aftercare coordination	Not yet addressed
D. Eliminate temporary hold beds at DACC	Completed
E. Revise ERP goals and objectives (i.e., completion rate goal) to be consistent with expectations in proposed State budget	Not yet addressed
F. Address barrier of delays in getting JOC paperwork back from judges to increase speed of graduate release from institution	Completed
<b>Potential Program Expansion Issues</b>	
A. Assess the system-wide need for a lower literacy AODA treatment program	Not yet addressed
B. Consider option of inviting representatives from potential expansion sites to Oversight Committee meetings	TBD
<b>DCC/Reach-In Issues</b>	
A. Address compliance with the administrative directive, increase knowledge of ERP, and improve overall continuum of transition planning. Develop plans for agent training.	In progress Coordinators Group formed
B. Improve reach-in procedures by implementing staff/agent ideas	Completed
C. Develop materials to better educate judges about ERP	Planning in progress
D. Obtain access to appropriate data systems for ERP staff	Completed
<b>Program-Level</b>	
A. Revise Form 2271 to reflect eligibility/suitability criteria changes	Completed
B. Implement systematic data collection at both ERP sites	Completed
1. Implement data collection procedures	Completed
2. Improve participant assessment	Completed
3. Further emphasize employment services	In progress
4. Staff discussion of participant satisfaction survey results	Completed
5. Continue to address participant retention issues	Completed
6. Investigate feasibility of pre-program component at DACC	Completed
<b>Evaluation</b>	
A. Include program information on Oversight Committee agenda	Completed/Ongoing
B. Develop a plan for ongoing program evaluation	In progress
C. Assess the feasibility of agent reporting of post-release outcomes	In progress
D. Presentation of evaluation results to the DCC regional chiefs	Completed
E. Facilitate meeting of ERP staff to gather input on Action Plan	Completed

## **ISSUES TO BE ADDRESSED PRIOR TO EXPANSION**

Several issues remain to be addressed by the Secretary and Executive Committee as ERP is poised for expansion. These issues are related to (1) assuring agent compliance with reach-in requirements and assignment of agents to ERP participants, (2) clarifying required ERP treatment program components, (3) revision of ERP goals and objectives, (4) treatment services for lower functioning offenders, (5) enhanced transition services, (6) rejuvenation of the ERP Oversight Committee, and (7) continued program evaluation.

1. The Department should formalize their commitment to providing a continuum of services to enhance transition of ERP graduates. One of the primary features of ERP is the reach-in component that provides the opportunity for the participant and DCC agent to develop a relationship prior to release. The Department should decide if the three reach-in contacts and associated transition planning are essential to the overall ERP model. Participant feedback indicates that these contacts are viewed as extremely valuable in helping them transition from the institution to the community. However, the reach-in contacts could be eliminated if the Department does not feel that they positively impact offender outcomes. If the Department feels that this relationship benefits the offender, reduces risk to the community, and impacts positive post-release outcomes then a concentrated effort should be made to:
  - a. Assure that agents perform the three required reach-in contacts prior to release and develop mechanisms to assure compliance with DCC AD 5-12;
  - b. Assure that the agent who performs the pre-release contacts is the agent who will supervise the offender in the community;
  - c. Clarify the roles/responsibilities of ERP institutional staff and DCC agents regarding initiation of contact, paperwork completion, housing plans, continuing treatment, etc.;
  - d. Revise the DAI IMP (dated 6/15/2004) pertaining to ERP and CIP to specify procedures related to ERP participants; and
  - e. Assure that the ERP Coordinators Group meets frequently, and that one member is given lead responsibility for the implementation of the goals of this group.
2. During planning for expansion the Department should clearly delineate the program elements that should be consistent across all of the ERP programs, as well as those that can vary by gender or special condition. Numerous changes were made to the programs at DACC and REECC to increase the consistency of services offered. The recent efforts at REECC to modify the female program to increase consistency with the male program at DACC have eliminated some of the therapeutic community model elements. As the expansion for both male and female programs progresses, the Department should define the specific program models and elements required for ERP, as well as the program elements that make each program gender specific.
3. The Oversight Committee should revise the ERP goals and objectives to be consistent with the criteria set forth in the recently passed State budget.
4. ERP sites have tried to independently handle lower functioning participants by clustering them within treatment groups (when possible) or providing mentors and special services on an individualized basis. However, the Department should develop a policy for ERP on whether to (a) prohibit lower functioning offenders from entering, (b) to provide specialized services within the programs as determined by a comprehensive plan, or (c) to develop a separate treatment program for these offenders.
5. The Oversight Committee, Reentry Coordinator, and facility wardens and/or superintendents should discuss enhancing the effectiveness of the current program by designating an ERP treatment staff position to be responsible for coordinating pre-release transition and aftercare services, acting as a liaison between the program, DCC, and the community.

6. The work of the ERP Oversight Committee to increase collaboration, coordination, and communication among relevant DOC units has been pivotal to improving ERP structure and services. The committee has recently received a new charge and new members, and this committee should once again meet monthly to continue this important function.
7. Ongoing program evaluation for ERP should be assigned to staff from the Office of Program Services. An evaluation plan should be developed to include both ongoing program improvement activities as well as collection of post-release outcome data for ERP participants. While the implementation of the participant-level database will facilitate the collection of some of the information, a formal plan should be developed detailing overall roles and responsibilities for evaluation activities. Finally, the Department should consider developing a process to allow the four ERP sites and DCC agents to enter participant-level data into a centralized database, rather than having four separate databases for the treatment sites and a separate data collection effort to gather post-release outcome and service data from agents. The current database could be used as a model, with additional modules added for post-release data from agents.

## **CONCLUSIONS**

The Oversight Committee has devoted a great deal of time to the development and implementation of the program improvement Action Plan during the past year. This effort has created the impetus for significant improvement to ERP operation and services. The Oversight Committee itself has been restructured, ERP suitability criteria have been addressed, and the program services have been refined and enhanced.

ERP institutional staff put extensive time and effort into increasing the consistency of the services offered for males and females. During the past year, ERP has made the program length, assessment tools, and collection of participant data consistent for the two sites. In addition, staff at both sites agreed to develop a consistent set of definitions to use when assigning reason for discharge, and REECC will continue to investigate opportunities to allow more activity outside the institution for the women (i.e., AA, community service, family activities).

In addition to increasing consistency between the ERP sites, the programs have also improved services by making changes to the female treatment model, enhancing the employment services offered, and implementing practices to increase participant retention. The planned integration of the DAI Pre-Release Curriculum into services at both sites will also enhance transition planning for ERP participants.

Perhaps the most significant effort has been put forth in regard to improving the reach-in component of ERP. While many of the reach-in improvement plan activities have not yet been implemented, numerous meetings involving both DCC and DAI institutional staff have already increased the level of contact and generated productive discussions. The creation of the ERP Coordinators Group has the potential to improve coordination and communication among agents and ERP institutional staff. The agent training materials developed have the potential to improve agent knowledge of ERP procedures and requirements. Further action needs to be taken to implement the remaining reach-in component program improvement tasks.