

Conditional Release Program

2008 Report to the Legislature



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Executive Summary

The Conditional Release Program (CRP) is designed for certain low-risk drug offenders who are incarcerated for a crime committed as a result of a controlled substance addiction. The goals of CRP are to provide chemical dependency treatment and reduce the prison population by releasing early those participants who successfully complete treatment and the incarcerated phase of CRP. Notably, offenders who fail to complete the incarcerated phase of CRP are required by statute to have the time spent in this phase added to their term of imprisonment. Those who complete the incarcerated phase of CRP are placed under Intensive Supervised Release (ISR).

While CRP was being implemented, the Minnesota Department of Corrections (DOC) sought input from two nationally-known researchers to alleviate concerns that the enabling legislation did not accommodate a viable outcome evaluation of CRP. These researchers were asked to complete program reviews and include recommendations for a CRP evaluation. The reviews were completed at the end of 2005. In addition, the DOC contracted with the Council on Crime and Justice (CCJ) to complete a process evaluation of CRP. The DOC will continue to further evaluate the program as additional data become available.

CRP was implemented in both Minnesota Correctional Facility (MCF)-Lino Lakes, a men's facility, and the MCF-Shakopee, a women's facility, during the fall of 2005. Programming is a compilation of pre-existing classes offered at these two facilities. The process evaluation completed by the Council on Crime and Justice (CCJ) in June 2007 shows that over 2,570 offenders were screened for CRP between the implementation of the program in the summer of 2005 and the publication of the report in the summer of 2007. Only 49 (1.9%) of the 2,570 offenders made it through the screening process during this time and entered CRP. Nonetheless, CRP has saved 5,427 days of prison bed space as of January 1, 2007. Given a marginal per diem of \$61.34 during FY 2006-2007, the bed days saved result in \$332,892 in costs that have been avoided. This figure is reduced to \$218,925, however, once the cost of ISR supervision for CRP participants is deducted. Notably, fiscal analyses conducted by the DOC and the legislature estimated the cost that would be avoided with the implementation of CRP was \$1.7 million; this amount was taken out of the DOC's budget when the CRP legislation was passed. The actual savings fall far short of the fiscal projections for this program.

By the end of October 2007, 51 offenders had entered CRP. Six of these offenders dropped out, and three currently are participating in the incarcerated phase of CRP. The remaining 42 (82%) completed programming and were released from prison. Of the 42 offenders released, only one (2%) was returned to prison for violating conditions of supervised release by the end of October 2007. None of the offenders has yet to return to prison for a new offense.

Examination of CRP approval and admission data over time showed a small number of offenders approved for and admitted to CRP, particularly after the initial screening of the incarcerated population in 2005. This finding is concerning as the decrease in approval

and admission rates has led to a decline in the CRP population. Part of the decline in recent months is likely due to a drop in the number of drug offenders – the type of offender targeted for CRP – admitted to prison. The total number of drug offense new commitments dropped from 806 in FY 2004 to 678 in FY 2007, a 16 percent decrease. Most of this decrease has been due to declining admissions for meth offender new commitments, which were down to 306 in FY 2007 after peaking at 417 in FY 2004. It is difficult to predict whether this decline in new commitments, particularly for meth offenders, will continue. If it does, however, the result will be a continued reduction in the pool of offenders eligible for CRP.

Also concerning is the number of offenders opting out during the screening process. Findings from the CCJ screening data analysis show that 267 offenders declined to participate in CRP at some point in the screening process. Undoubtedly not all of these offenders would have been deemed eligible for CRP, but it is certain that some would. Even if only 20 percent (N = 53) of the 267 decliners had elected to continue the screening process and ultimately were chosen to participate in CRP, the number of CRP participants would more than double in size.

Additional findings from the CCJ process evaluation include:

- Overall, nearly all of the participants (97%) found CRP as a whole to be helpful. The aspects rated as most helpful by participants included the highly structured daily schedule, helping participants take responsibility for their illegal behavior, preparing participants for reentry, and assisting participants in avoiding illegal activities. Responses obtained from social support persons were similar in nature as all mentioned support, accountability, and responsibility.
- The majority of offenders screened had multiple reasons for ineligibility, but the most common reasons were that the offender was implicated in the sale of drugs, had insufficient time left to serve, or exhibited behavioral problems including disciplinary problems while incarcerated or was considered a security threat. Many offenders also had other active sentences or detainers or were classified as a violent or predatory offender. A relatively large number of offenders (267) elected to remove themselves from the screening process at some point.
- Female offenders were less likely than male offenders to be eliminated for behavioral issues (namely disciplinary issues or posing a security threat) but more likely to fail their Behavioral Health Review. In addition, women were more likely to be sentenced for a drug offense not included in the statutory requirements for CRP.
- African-American offenders are more likely than others to be deemed ineligible because of institutional behavioral issues, the offense involved the sale of drugs, a current or previous offense classified the offender as a predatory offender, or the offender did not have sufficient time to serve.
- CRP participants had less extensive criminal backgrounds and fewer prior incarcerations than non-CRP participants. None of the CRP participants had

more than two prior felony convictions, and 90 percent had not been incarcerated in prison prior to the current incarceration.

- Many of those interviewed commented on the CRP selection criteria. Some felt that the criteria were too stringent while others believed the criteria needed to be rigorous given that the program allows for the early release of offenders. Nevertheless, most want to proceed slowly if a decision is made to modify the criteria. Some design committee members commented that the criteria resulted in the selection of a certain type of offender to the program – namely, white offenders from rural Minnesota who comprise the majority of the methamphetamine inmate population. It is unclear from the CCJ report if the committee members felt negatively toward the selection criteria favoring methamphetamine users, or if they were aware that this was the intent of the legislation authors.
- Most CRP participants reported that the classes they participated in were helpful. All participants reported that the victim impact class was helpful. The smallest percentage of participants rated the pre-release class as helpful. Offenders and CRP staff commented on the limited educational programming made available to offenders due primarily to the fact that chemical dependency treatment takes up a large amount of an offender’s available time.
- Offenders at MCF-Lino Lakes were required to write an 18-page reentry plan prior to their release. Many of the CRP staff and offenders felt that this process was particularly helpful. A number of offenders, however, also said it was stressful.
- Once released, housing was easiest for participants to find and employment was most difficult. Most offenders did obtain employment, best described as manual labor.
- Intensive Supervised Release (ISR) was seen as a helpful component of CRP by both participants and their social support. A few participants commented on the contradiction between the importance of not isolating oneself in the community, as expressed by treatment providers, and the fact that ISR initially involves house arrest.
- Participants and social support interviewees felt the program prepared participants well for release. Overall, 57 percent of the offenders rated their transition as very or somewhat easy, and 97 percent found CRP as a whole to be helpful. All the social support interviewees who knew other people who had been incarcerated felt that CRP participants were better equipped to transition smoothly into the community.

CCJ recommendations:

- Modify the selection criteria to ensure that more offenders participate in the program.
- House all CRP participants separately from the rest of the prison population to better foster a therapeutic community.
- Allow participants to work on their vocational skills.
- Allow for more individualization of ISR.
- Place greater emphasis on parenting and family reunification.

- Eliminate the treatment “pull-up” system, which mandates that inmates report on each others’ behavior.
- Develop a brochure outlining CRP goals and programming, ISR, and after-care.

DOC conclusions:

CRP is scheduled to sunset in June 2009. If the program was extended beyond this date, the DOC believes the number of participants would need to increase in order for it to be a viable correctional program that reaches its anticipated cost-reduction potential. However, sufficiently increasing the size of the CRP population would require modifications to the selection criteria. To this end, the DOC has identified three areas where possible revisions to the eligibility criteria could be considered:

- Use the chemical dependency assessment completed at intake, rather than the drug offense for which the offender is incarcerated, to determine whether an offender is suffering primarily from an addiction to drugs.
- Incorporate validated risk assessment tools such as the Level of Service Inventory-Revised into the selection criteria to identify offenders who pose less of a risk to public safety and, thus, are more suitable candidates for early release.
- Examine whether chemically dependent offenders incarcerated for non-drug offenses should be admitted to the program provided they meet all other eligibility criteria and public safety would not be jeopardized.

Introduction

The Conditional Release Program (CRP) is the result of M.S. § 244.055, Section 6. The enabling legislation, passed in May 2005, gave the commissioner of corrections authority to grant conditional release of certain low-risk drug offenders from prison following successful completion of chemical dependency treatment. The legislation stipulates that CRP is available to those offenders who are incarcerated for a crime committed not primarily for profit but as a result of a controlled substance addiction. The goals of CRP are to provide chemical dependency treatment for these offenders and reduce the prison population by releasing early those who successfully complete treatment and the incarcerated phase of CRP. The primary funding provided for CRP is \$600,000 to support Intensive Supervised Release (ISR) for CRP participants. Additional funding was not provided as it was hoped that the program would be funded with the money saved by releasing offenders early. The legislation requires the Minnesota Department of Corrections (DOC) to contract with an organization to complete an evaluation of this new program including addressing recidivism rates among program participants “to the degree feasible.” The legislature allocated \$50,000 to complete this evaluation with the report due by January 15, 2008.

CRP was implemented in both the Minnesota Correctional Facility (MCF) at Lino Lakes, a men’s facility, and the MCF-Shakopee, a women’s facility, during the fall of 2005. The DOC personnel determine offender eligibility for CRP using a seven-step screening process. This process incorporates statutorily-mandated criteria as well as criteria developed by DOC staff. By the end of October 2007, a total of 51 offenders had been selected to participate in CRP. Six of these offenders dropped out, and three currently are participating in the incarcerated phase of CRP. The remaining 42 (82%) completed programming and were released from prison.

This report provides a description of CRP, the selection process, and a brief analysis of bed days saved and program outcomes. The report also summarizes a preliminary program review and an evaluation plan completed by two nationally-known researchers. Both researchers recommended that the DOC change the focus of the final report from an **outcome** to a **process** evaluation. An outcome evaluation would assess the impact of the program on an outcome measure such as recidivism, whereas a process evaluation would examine how the program has been implemented. DOC staff followed this advice, and the results of the resulting process evaluation – completed by the Council on Crime and Justice (CCJ) pursuant to a contract between CCJ and the DOC – are summarized here as well.

Program Description

DOC personnel select offenders to participate in CRP using a seven-step screening process. This process incorporates statutorily-mandated criteria as well as criteria developed by DOC staff.

In step one, DOC staff apply statutorily-mandated criteria and determine whether:

- the offender's current offense is drug-related
- the offense was committed as a result of a controlled substance addiction and not for profit
- the offender has not been convicted of or adjudicated delinquent for a violent crime within the past ten years
- the offender has not been involved in criminal gang activity during his or her current incarceration
- the offender will not pose an undue risk to the public or an individual
- the offender previously has not been conditionally released under M.S. § 244.055

Step two eliminates offenders who meet the statutory requirements described in step one but have any detainers, warrants, or untried charges; any convictions for escape, attempted escape, or fleeing an officer within the last five years; those who do not have sufficient time to complete the necessary level of treatment as determined by the program assessment; and those whose projected custody classification level is close or maximum on his or her projected conditional release date. Also eliminated are offenders classified as predatory and those who were removed from another early release program during the current incarceration. Offenders also are given the opportunity during step two to decline the opportunity to participate in CRP.

Step three involves the mailing of letters to the prosecuting authority and the sentencing court on offenders who make it through steps one and two. DOC staff review and consider the opinions expressed in these letters throughout the remainder of the screening process.

Step four requires that each candidate undergo a Behavioral Health Review with a mental health professional from the correctional facility. The mental health professional assesses the offender's mental health, commitment to living a drug-free and law-abiding lifestyle, and capacity to participate in required programming. Based on this evaluation, the mental health professional recommends acceptance or denial into CRP.

The fifth step requires that the Program Review Team (PRT), an existing group at each facility comprised of various facility staff, reviews the information compiled thus far and determines that the screening has been completed accurately. If approved by the PRT, the screening process progresses to the sixth step in which the offender is asked to sign an agreement indicating he or she is interested in participating in CRP. The seventh step involves a final review by the commissioner of corrections or a designee to ensure—in the interest of public safety—that all eligibility stipulations have been fully upheld. The programming offered via CRP is a compilation of pre-existing classes offered at the two participating facilities. According to statute, CRP must include chemical dependency treatment appropriate for the offender's degree of chemical use as determined by a chemical use assessment, a highly structured daily schedule, individualized educational programs, programs designed to promote the offender's self-worth and acceptance of responsibility, and a very specific release plan. In addition, programming must be

licensed by the Minnesota Department of Human Services (DHS). Accordingly, DOC staff included the following as components of CRP:

- Chemical dependency treatment – The enabling statute requires that the treatment component begin 160 days after the offender’s term of imprisonment commences. The program attended by participants is based on a cognitive behavioral curriculum developed by Hazelden, and participants are required to read six books and attend a minimum of two nightly support groups each week. The chemical dependency program at Lino Lakes is TRIAD, and the chemical dependency program at Shakopee is Changing PATHS.
- Critical thinking classes – This class uses the curriculum “Thinking for a Change: Integrated Cognitive Behavior Change Program,” and offenders are required to attend nine classes.
- Anger management classes – Classes meet for eight sessions, and much of the time is spent viewing and discussing a PowerPoint presentation addressing the aspects of anger.
- Pre-release planning classes – All participants attend pre-release planning classes. Male CRP participants write a detailed 18-page release plan as well.
- Victim impact classes – Classes meet for six weeks using curriculum developed by the Corrections Learning Network entitled “Success from the Inside Out, Victim Awareness.”

Notably, all of these classes are offered to the inmate general population as well. Thus, CRP participants attend classes along with non-CRP participants. CRP participants are given priority, however, on waiting lists for these classes so they can be completed within six months.

Completion of all components is required for graduation from CRP, and participants are required to present a release plans to caseworkers, mental health professionals, and program coordinators for feedback and final approval. Offenders who fail to complete the incarcerated phase of CRP are required by statute to have the time spent in this phase added to their term of imprisonment. Those who complete the incarcerated phase of CRP are placed on ISR.

Initial Program Review and Evaluation Plan

Shortly after the CRP legislation was passed, the DOC reviewed the evaluation requirements and became concerned that there was not enough time to conduct a proper outcome evaluation. The DOC typically uses a minimum follow-up period of three years for recidivism studies, a standard generally accepted in the corrections research community as necessary to produce valid and reliable results. The first program participants entered the treatment phase of the program in mid-October 2005 and left the treatment phase in April 2006. Data collection for a recidivism study would have to be completed by October 2007 in order to perform necessary data analysis, write the final evaluation report, and submit it to the legislature by the due date of January 15, 2008. Thus, the first group of CRP participants could be followed in the community for a maximum of 18

months; those who entered the program at a later date could be followed for an even shorter period of time.

The DOC subsequently sought input from two nationally-known researchers: Richard Tewksbury, Ph.D., Professor of Justice Administration at the University of Louisville and Program Review Consultant for Justice Management Research Associates; and Linda G. Smith, Ph.D., of PDRE, Inc. The DOC contracted with both Tewksbury and Smith to complete program reviews and include recommendations for a CRP evaluation.¹ The reviews were due to the DOC by the end of 2005 in order for the DOC to provide an update to the 2006 legislature and potentially implement the recommendations.

Tewksbury's Program Review

Richard Tewksbury's program review is based on the CRP legislation, supporting documents provided by the DOC, reviews of evaluation literature in correctional programming, and best practices in correctional programming. He focuses on six primary components of the program – program structure, criteria for admission of program participants, operational plan, personnel/staffing plan, location/placement of program, and evaluation plan – and identifies where these components are consistent with six core principles of correctional treatment programs linked in prior research to offender success and where they deviate. “Success” is defined as reduced recidivism, individuals abstaining from substance use/abuse, and maintenance of employment and self-sufficiency.

The six core principles for successful correctional treatment programs cited by Tewksbury are:

- Program offerings are specific to offender needs and not generalized.
- Program participation is as close as possible to the time of an offender's release from incarceration.
- Programming is ongoing and at least several months in duration.
- Programs target needs related to criminality, such as attitudes and pro-social activities.
- Evaluation efforts are both ongoing (i.e., process) and outcome-focused to ensure programs stay on target and use resources efficiently.
- Programming during incarceration is followed by treatment and services in the community following release from incarceration.

According to Tewksbury, the strengths of the CRP are that the program relies on implementation of a licensed treatment program, uses licensed (or license-eligible) treatment staff, and has (with one exception) clear and easy-to-implement criteria for offender eligibility. In addition, there is a mandatory review at completion of the program, and offenders who complete the program will be considered for, and not automatically granted, conditional early release.

¹ Combined, Tewksbury and Smith received \$4,750 of the \$50,000 allocated by the legislature for contract evaluation services.

The author reports that there are six significant ways in which the CRP deviates from generally accepted best practices and, therefore, shows signs of weaknesses which likely will inhibit the success of the program:

- The legislation establishing the CRP includes a clause extending the period of incarceration for offenders who enroll in but do not successfully complete the treatment program. According to Tewksbury, this establishes the treatment program as based on sanctions rather than on a supportive approach and presents a major disincentive to offenders considering participation in the program.
- There is no mention of aftercare provided following release from incarceration. Provision of aftercare is one of the basic principles in best practices for correctional programming. Research on substance abuse treatment programming suggests that the chances of success are significantly decreased without aftercare.
- The program does not include a process evaluation or other means of monitoring program development.
- The legislation creating CRP calls for an outcome evaluation but does not allow for a sufficient follow-up period of released offenders. At best, offenders who complete the program and are granted conditional early release will be followed in the community for a period of 18 months, which does not allow for a valid and reliable outcome evaluation to be completed. In addition, the evaluation must include a comparison group of substance-abusing offenders who do not complete the program. The comparison group should be as similar as possible to the group completing treatment on key characteristics such as demographics, criminal history, substance abuse history, and community to which returned.
- The evaluation plan for the program does not clearly define participant success. “Recidivism rates of offenders released” is used, but no operational definition of recidivism is offered.

Tewksbury suggests that these weaknesses can be corrected rather easily and therefore enhance the likelihood of the program achieving success. He offers the following recommendations as ways to address the identified issues:

- Remove Section 6, Subdivision 6, “Extension of Term of Imprisonment for Offenders Who Fail in Treatment” from the enabling legislation. Offenders may perceive this aspect of the program as a “threat” and may be discouraged from enrolling in the program.
- Establish provisions for offenders to transition to community-based substance abuse treatment following release from incarceration.
- Develop and implement an ongoing process evaluation and periodically report on ways to manage and enhance program operations, structures, and participant flow.
- Extend the period of time for following released offenders to a minimum of two years to ensure a valid and reliable measure of recidivism.
- Collect data not regularly collected by the DOC on CRP offenders, including measures of institutional behavior, measures of family and community sup-

ports, attitudes regarding the treatment program, and motivation for treatment participation.

- Specify an operational definition of recidivism. Ideally, this would be the standard definition used by the DOC (i.e., reincarceration in prison for a new offense or for a violation as well as new felony conviction with or without prison sentence) to maximize generalizability.

Smith's Evaluation Plan

Linda Smith submitted an evaluation plan for CRP focusing on how well the program would reduce recidivism, and thus the costs of incarceration, and how successful the program would be at meeting the reentry needs of drug offenders. Smith posits that optimizing best practices, part of the DOC's mission and vision, involves rigorous program evaluations designed with the objective of showing scientific evidence that the programs are accomplishing the desired outcomes. To this end, Smith's recommendations for the CRP evaluation address six areas: evaluation plan, process evaluation, outcome evaluation, data elements, data collection and data analyses techniques, and time line.

Smith recommends both a process and an outcome evaluation. Smith contends that a process evaluation is useful in that it addresses the link between a specific problem or need to a set of activities. Such evaluations also examine the appropriateness of the treatment modality, selection criteria for participation, organizational capacity, quality of staff, program policies and procedures and, in this case, whether CRP is in compliance with the intent of the legislature. The legislature specified that CRP should include several program components – educational and vocational training, structured schedules, activities promoting offender responsibility for criminal behavior, and chemical dependency assessments. The process evaluation could assess the delivery of these services to CRP participants. A process evaluation also could be used to develop the process of data collection involving outside agencies that is necessary for the outcome evaluation. Finally, a detailed social survey administered to all program participants as part of a process evaluation would provide baseline information for the evaluation on an array of items known to impact recidivism.

The outcome evaluation that Smith recommends includes recidivism rates, specified in the legislation as an evaluation outcome, as well as other short- and long-term impacts. The short-term outcomes Smith specifies in her report include measures of the attainment of educational and vocational skills, development of communication skills, and the acquisition of violence prevention techniques and relapse prevention skills. Gains in these areas would be assessed by comparing pre- and post-test scores. The long-term outcomes mentioned in the report include re-arrest, reconviction, and re-imprisonment as well as technical violations of release. Other outcomes include indicators of employment, quarterly wage earnings, and relapse. Finally, time to failure would be measured as time to recidivism, violation of conditional release, and relapse. Ideally, the evaluation would employ an experimental design where offenders are assigned randomly to the

CRP. A quasi-experimental design, utilizing the CRP group and a group of offenders matched on several key variables, could be used if an experimental design is not feasible.

The social survey Smith recommends as part of the process evaluation could be used to collect many of the data elements needed for the evaluation that the DOC may not collect routinely. Some of the items included in this survey include offender demographics, prior education and training, employment history, criminal history, prior adult and juvenile commitments, mental and medical health, prior treatment and programming participation, substance abuse history including prior substance abuse episodes and treatment, and family stability. Smith also recommends the use of chemical dependency assessments and diagnostics, like those currently used at the MCF-St. Cloud. Data on the measures of recidivism noted previously would be extracted from other data sources, such as the Minnesota Bureau of Criminal Apprehension (BCA).

Regarding data collection and analysis techniques, Smith's plan requires that the data collected for the evaluation come from several different sources and is extensive enough as to require a separate database. She recommends univariate, bivariate, and multivariate analysis to guarantee the rigor of the research. The final report should include simple percentages, comparisons between the treatment and control groups, an examination of predictor variables, and assessment of selection bias if a quasi-experimental design is used. Finally, the evaluator must interpret the study findings for a variety of audiences, including legislators, DOC administration, CRP staff, and the general citizenry.

As Tewksbury also noted, the standard three-year follow-up period used by the DOC (and recommended by best practices) for the measures of recidivism cannot be realized before the final report is due to the legislature on January 15, 2008. For most program participants, only 18-month follow-up recidivism and employment data will be available, and for some the follow-up period will be only one year. As a result, data analysis techniques will yield only simple percentages.

DOC Response to Tewksbury and Smith

The early reviews provided by Tewksbury and Smith suggested that CRP would be a viable program as designed. The only faults that either author found with the program included the extension of the term of imprisonment for offenders who enrolled in but failed to complete the program and the apparent lack of aftercare for those who completed the institutional phase of the program. The enabling legislation calls for the extension of the offender's term of imprisonment for those who fail to complete the program, and the legislature would have to modify M.S. § 244.055 in order to change this aspect of the CRP. In addition, the DOC felt that the provisions for aftercare for those who completed the institutional phase of the CRP were adequate and that perhaps insufficient information was available to the reviewers on the intended use of aftercare for CRP participants.

The remaining recommendations put forth by Tewksbury and Smith addressed the evaluation design. First, Tewksbury and Smith both reported that the follow-up period

determined by the due date for the final report to the legislature was too short to ensure the validity and reliability of the outcome measures. The authors suggested, and DOC staff concurred, that the follow-up period must be extended to a minimum of two but preferably three years. The DOC will monitor the outcomes of CRP participants as additional data become available. Second, both authors suggested that the DOC implement a process evaluation in addition to the outcome evaluation required by the enabling legislation. A process evaluation could be used to monitor development and implementation of the CRP. Moreover, if the due date for the final report was not extended and the maximum follow-up period remains only 18 months, evaluation efforts are best spent on a rigorous process evaluation. Changing the focus to a process evaluation would not preclude an outcome evaluation, since most data needed for an outcome evaluation can be obtained as part of the process evaluation. The primary additional data that would have to be collected for an outcome evaluation are re-arrest, reconviction, and reincarceration data, and these data are easily obtained by the DOC from the information systems maintained by the BCA and DOC.

Summary of the CCJ Process Evaluation

The Council on Crime and Justice (CCJ) conducted the process evaluation of CRP pursuant to a contract between CCJ and the DOC. The process evaluation was completed to better understand the design, implementation, and perceived strengths and weakness of CRP. The final draft of the report was submitted to the DOC in June 2007.

The process evaluation includes a literature review and three primary data analyses. First, CCJ staff conducted and analyzed data from interviews with 80 individuals involved with CRP in some way. CCJ staff interviewed:

- two state senators considered to be the primary proponents of the CRP legislation,
- eleven of the twelve DOC staff who helped design CRP,
- twenty DOC staff members directly involved in CRP programming at Lino Lakes or Shakopee,
- thirty-four offenders who enrolled in CRP,
- nine friends or family members of CRP participants, and
- four offenders deemed eligible for CRP but who declined to participate.

Second, CCJ staff completed a textual review of documents relating to the design and implementation of CRP. Finally, staff of CCJ analyzed CRP screening data as a means to better understand the selection process. Following are the findings from the interviews and the analysis of the screening data. The textual review primarily addresses the information summarized in the previous section and, thus, the findings are not presented here.

Analysis of Participant Screening Data

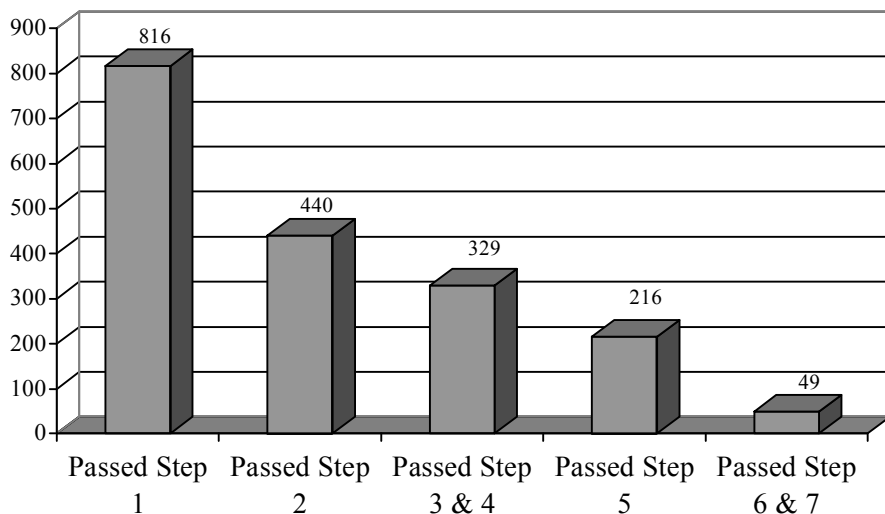
The entire population of incarcerated drug offenders was “prescreened” when CRP first was implemented in order to include as many eligible offenders as possible at start-up.

The prescreening process eliminated inmates who were violent offenders, had been sentenced for a drug sale, or simply had insufficient time remaining to serve and would have been unable to complete CRP if selected. The remaining offenders were screened according to the seven-step process described previously, as were all inmates admitted to prison after CRP began. The CCJ process evaluation found that over 2,570 offenders were screened between the implementation of CRP in the summer of 2005 and the publication of the CCJ report in the summer of 2007. Of the 2,570 offenders, 78 percent (N = 2,005) consisted of offenders in the existing prison population as of September 2005. The remaining 565 offenders were screened following their admission to prison after September 2005.

The CCJ process evaluation provides rather detailed analyses of the screening data available on the approximately 2,570 offenders considered for CRP. As shown in Figure 1, most of the offenders were eliminated in Step 1 when the population was reduced from 2,570 to 816. The most common reasons an offender was eliminated in Step 1 were the offender had additional active sentences, the offender committed the offense for profit and/or distribution, or the offender committed a crime of violence.

Nearly half of the remaining population was eliminated in Step 2; notably, one-third of those eliminated in this step withdrew themselves from further participation in the screening process. CCJ staff surmise that this may have occurred because inmates did not fully understand CRP and the benefits of the program, inmates were deterred from participation due to the risks associated with failing CRP (namely, completion of the entire term of imprisonment with no credit for time served in CRP), or perhaps inmates simply chose CIP as it is a more established DOC program. Another third was eliminated in Step 2 due to active detainers, warrants, or untried charges, and most of the rest did not have sufficient incarceration time remaining to complete the program. Only a small number (n=33) were ineligible because of discipline incurred while incarcerated.

Figure 1: Attrition by Step in Screening Process



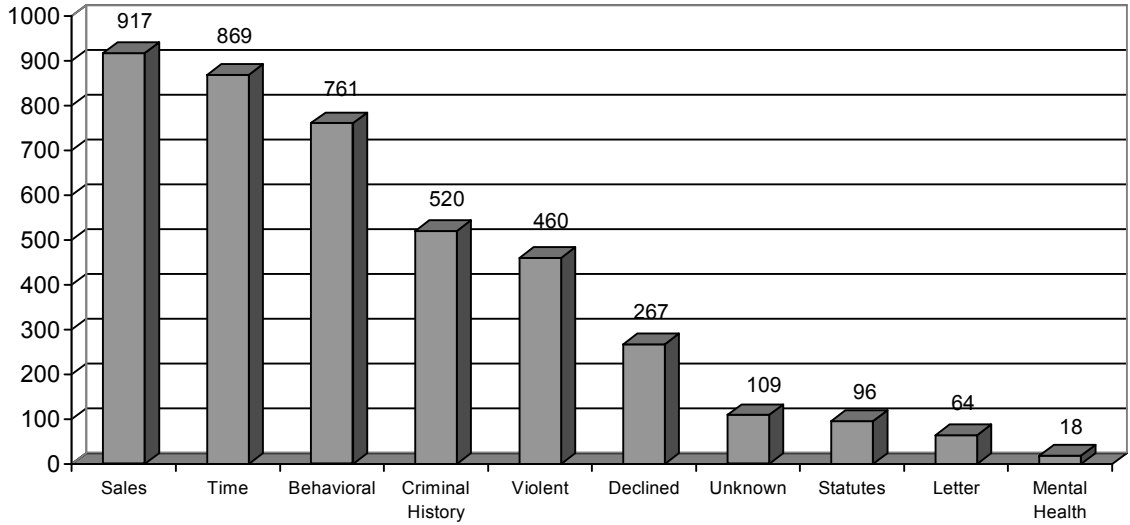
An additional 111 offenders were eliminated in Steps 3 and 4. Most of these offenders were eliminated in Step 3 after a prosecuting attorney or sentencing judge submitted a letter opposing the offender's participation in CRP. Notably, these letters were received throughout the screening process, so some of these offenders actually were deemed ineligible after progressing to a later step in the process. Only 18 offenders failed to pass Step 4, the point at which a mental health professional conducts a Behavioral Health Review to assess the inmate's mental health, commitment to living a drug-free and law-abiding lifestyle, and capacity to participate in the required programming.

One-third of the remaining offenders were eliminated in Step 5, the largest number of which were eliminated by the PRT due to concerns expressed in a county attorney or sentencing judge letter of objection. Twenty offenders were eliminated because the PRT felt the offense committed involved sales or manufacturing of drugs, and 19 were eliminated based on their criminal history. Most of the remaining offenders were eliminated due to behavioral issues or prior violence or weapon use; only three offenders declined participation during this step.

No offenders were eliminated in Step 6, which simply involved asking remaining eligible offenders if they still were interested in participating in CRP. In the seventh and final step, the commissioner and assistant commissioner conducted a detailed file review in which they closely examined whether each offender fully met all of the statutory and departmental requirements to participate in CRP. Three-fourths of the remaining offenders were eliminated at this step. The analysis conducted by CCJ shows that almost one-third of those eliminated in this step were due to concerns over drug paraphernalia and manufacturing tools at the place of arrest. A large number also was eliminated based on a letter received from a prosecuting attorney or sentencing judge, the offender's criminal history, or concerns addressed by the PRT. Overall, at the time CCJ prepared its final report in June 2007, only 49 (1.9%) of the 2,570 offenders qualified and entered CRP.

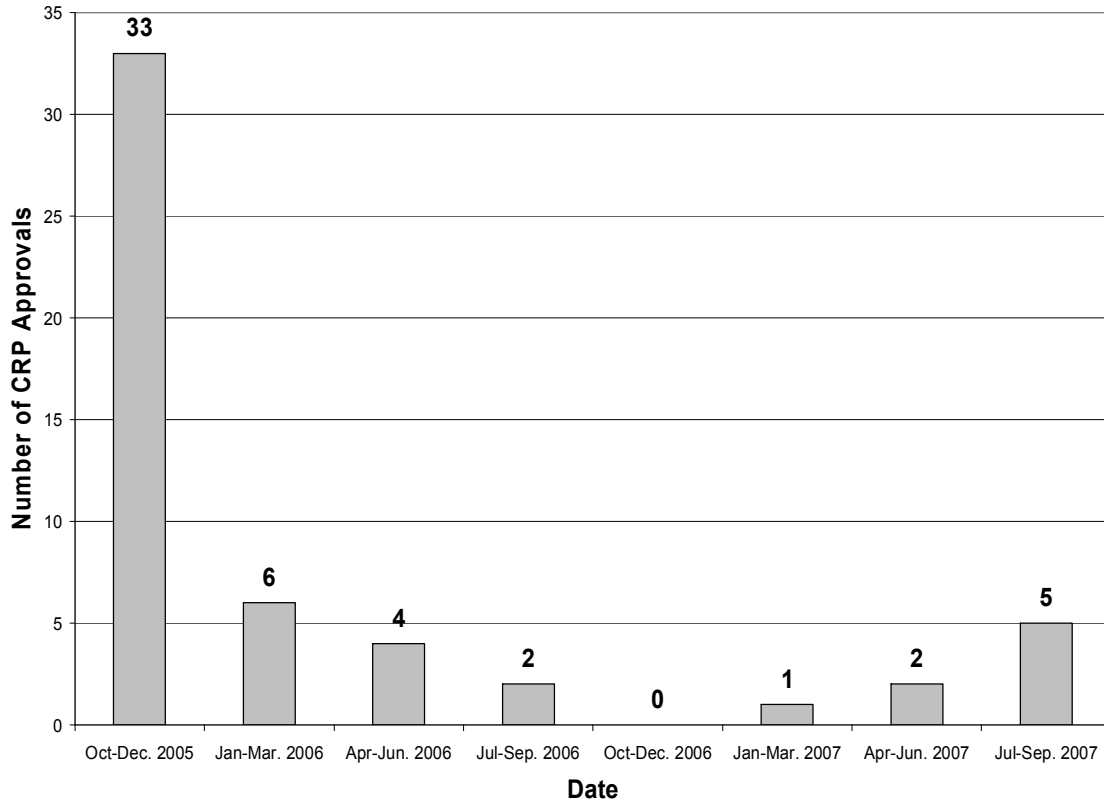
Most of the screening steps have multiple criteria, and the preceding analysis shows that some criteria (e.g., whether the crime involved the sale or distribution of drugs) were considered at more than one step in the screening process. The CCJ report sought another way to summarize why offenders were deemed ineligible for the program, so CCJ staff reviewed each offender's screening records and coded *all* of the reasons why the offender was not selected to participate in CRP. As shown in Figure 2, the majority of offenders screened had multiple reasons for ineligibility. The most common reasons were that the offender was implicated in the sale of drugs, had insufficient time left to serve, or exhibited behavioral problems including institutional disciplinary convictions or classification as a security threat. Many offenders also had other active sentences or detainers or were classified as a violent or predatory offender.

Figure 2: Overall Reasons for Ineligibility



Attrition by gender and race is addressed in the CCJ report as well, and the authors found that most women who failed the screening process did so during Step 2. Further analysis of *all* of the reasons why female inmates were not selected shows that women were less likely than men to be eliminated for behavioral issues (namely disciplinary issues or posing a security threat) but more likely to fail their Behavioral Health Review. In addition, women were more likely to be sentenced for a drug offense not included in the statutory requirements for CRP. Examination of attrition rates by race is complicated by the fact that the population screened was predominantly white. Nonetheless, the data suggest that African-Americans are more likely than others to be deemed ineligible because of behavioral issues, the offense involved the sale of drugs, a current or previous offense classified the offender as a predatory offender, or the offender did not have sufficient time to serve.

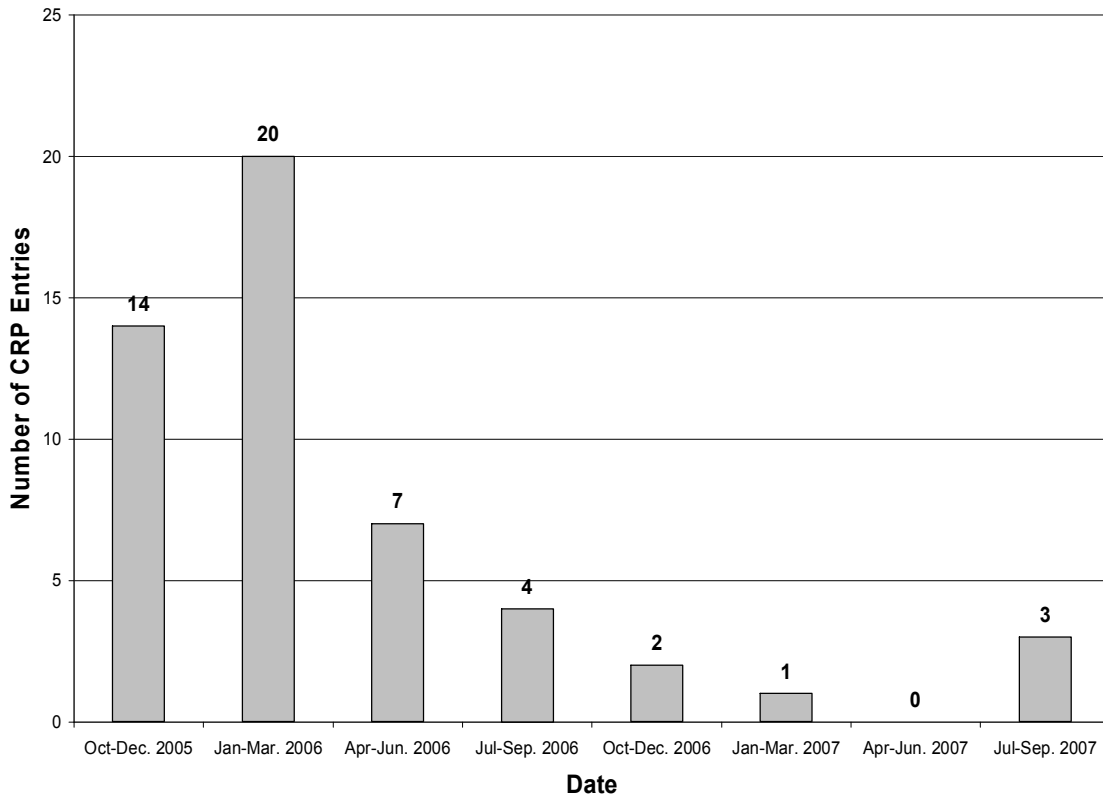
Figure 3: Number of Offenders Approved to Participate in CRP



The CCJ process evaluation also plotted the month in which offenders were approved to participate in CRP. The results show the largest number approved during the initial screening of the base inmate population in late 2005 and far fewer in subsequent months. The CCJ report included monthly approval figures for the time period between October 2005 and January 2007. Additional data were available at the writing of this report, and these months (February 2007 through October 2007) were added to the original chart. Figure 3 shows that most of the approvals for CRP occurred during October-December 2005. Since that time, no more than five offenders were approved for CRP in a month; since October 2006, no new offenders were approved for the program in eight of the thirteen months.

The CCJ report did not plot the dates on which offenders *began* CRP. These data, collected for this report and plotted in Figure 4, mirror the approval data reported above but with a delay of a month or two as it appears that offenders are approved for CRP shortly before they begin the program.

Figure 4: Number of Offenders Admitted to CRP

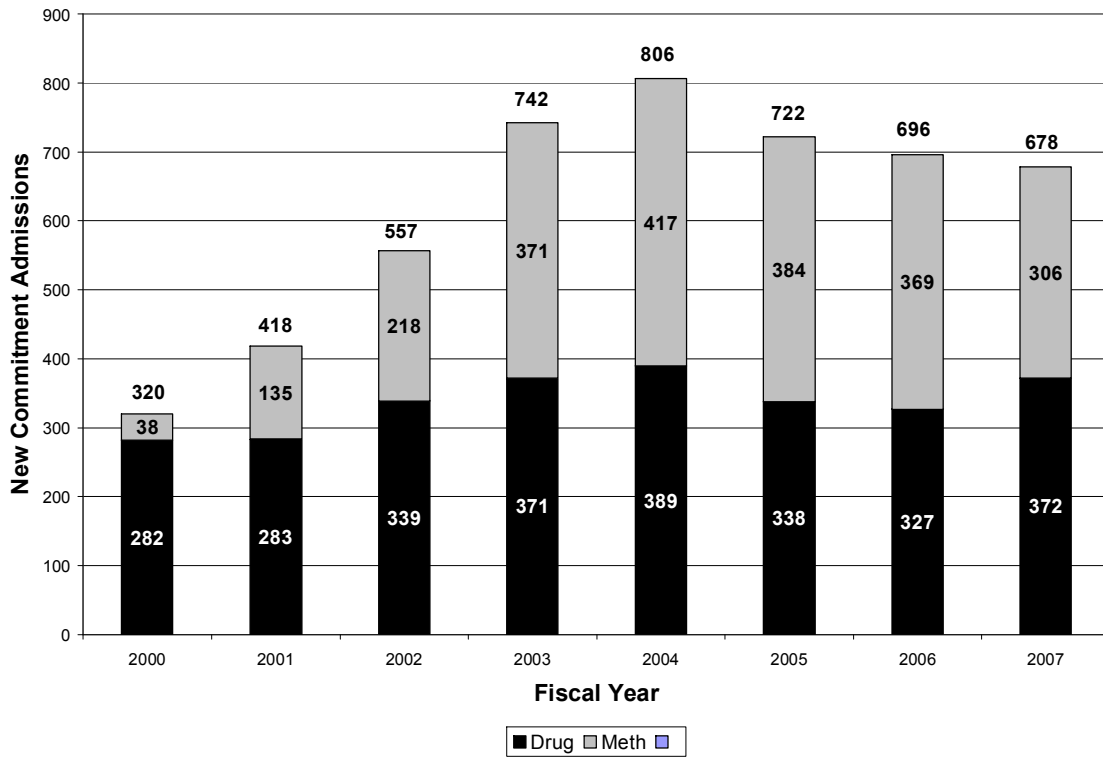


The small number of offenders approved for and admitted to CRP, particularly after the initial screening of the incarcerated population in 2005, is concerning as the reduction in approval and admission rates results in a decline in the CRP population. Part of the decrease in recent months is due to a decline in the number of drug offenders – the type of offender targeted for CRP – admitted to prison for a new commitment. As shown in Figure 5, which depicts the annual number of meth and other drug offenders admitted during FY 2000-2007, the total number of drug offender new commitments increased dramatically between FY 2000 and FY 2004, particularly for meth offenses. After peaking in FY 2004, however, the total number of drug offender new commitments has declined. For example, the total number of drug offense new commitments dropped from 806 in FY 2004 to 678 in FY 2007, a 16 percent reduction. With a decrease of 111 new commitments from FY 2004-2007, meth offenses accounted for 87 percent of the reduction during this period. It is difficult to predict whether this decline in admissions will continue. If it does, however, the result will be a continued reduction in the pool of offenders eligible for CRP.

Also concerning is the number of offenders opting out during the screening process. Findings from the CCJ screening data analysis show that 267 offenders declined to participate in CRP at some point in the screening process. Undoubtedly not all of these offenders would have been deemed eligible for CRP, but it is certain that some would. Even if only 50 of these offenders (representing less than 20 percent of the 267 decliners)

had elected to continue the screening process and ultimately were chosen to participate in CRP, the number of CRP participants would have nearly doubled. Unfortunately, it is not known why such a large number of offenders opted out of the screening process. In their report, CCJ staff surmise that some inmates did not fully understand CRP and the benefits of the program, others may have been deterred from participation due to the risks associated with failing CRP (namely, completion of the entire term of imprisonment with no credit for time served in CRP), or perhaps some simply chose CIP as it is a more established DOC program.

Figure 5: Number of Drug Offenders Admitted² to an Adult Facility



Finally, the CCJ report compared those who were selected to participate in CRP with those who were not. The researchers found that CRP participants had less extensive criminal backgrounds and fewer prior incarcerations. None of the 51 CRP participants had more than two prior felony convictions, and 90 percent had not been incarcerated prior to the current incarceration. The age distribution for those selected to participate in CRP versus those who were not is different, with fewer of those selected to participate being 39 or younger but more being between the ages of 40 and 49.

² Includes offenders sentenced to prison for a drug offense. Probation and supervised release violators are excluded.

Interview Data

The CCJ process evaluation included a lengthy summary of the interview findings, grouped by the type of individual interviewed (e.g., CRP staff, CRP participant, etc.). The CCJ format allowed for a detailed description of the interview data but rendered it difficult to examine responses on specific topics across groups. For the present report, the interview data from the CCJ report were reviewed to identify common themes in the data and compare responses on similar questions.

Conception of CRP

Both state senators mentioned that meetings with key stakeholders, including DOC staff, were held to garner support for CRP as well as assist in developing the program components. However, findings from interviews with CRP staff suggest that they had little specific knowledge of CRP programming before they were to begin implementation, due in part to the short period of time between enactment of the legislation and start of the program. Similarly, a number of the first CRP participants stated that they learned of CRP from the media or other inmates; after implementation, a few participants learned of CRP from speaking with their attorney prior to incarceration.

Design committee members commented on the advantages and disadvantages of correctional programming emanating from legislation. Some interviewees noted that programs originating from legislation may reflect a political agenda rather than effective correctional programming.

CRP Program Goals and Selection Criteria

Interviews with the two state senators show that each independently conceived of CRP as a means to provide chemical dependency treatment to low-risk drug offenders, particularly methamphetamine users who committed crimes due to drug addiction, while saving bed space within the correctional facilities. At the time of the CCJ interviews, neither senator had much knowledge about the actual implementation or current operation of CRP, but both said they would consider modifying the selection criteria to allow additional offenders to participate. However, both felt modification of the selection criteria should occur only after the program had operated for some time.

While some of the selection criteria were stipulated in the enabling legislation, interviews with the DOC staff involved in the design of CRP reveal that a primary task undertaken by the committee was to develop a full set of selection criteria for CRP participation. The final set integrated the statutorily-mandated criteria with criteria established by the DOC. Notably, almost all those involved with development of the criteria commented on the final set of selection criteria. Some committee members felt the selection criteria were too stringent, while others felt the strict criteria were necessary given that CRP participants are released early from prison. A few felt the selection criteria resulted in

participants who were motivated to succeed. Finally, a number of committee members commented that the criteria resulted in the selection of a certain type of offender to the program, namely white offenders from rural Minnesota who comprise the majority of the methamphetamine inmate population. While neither senator mentioned that they sought to target offenders from rural areas, both stated they hoped to target methamphetamine users.

The 20 CRP staff interviewed, like those from the design committee interviewed, were split on their opinion of the selection criteria. Roughly half felt the selection criteria were appropriate, and the other half felt the criteria were too strict. However, CRP staff felt that a primary weakness with the selection criteria is that it limited the number of offenders selected to participate in CRP. Some of the staff interviewed also participated in the screening process, and a few of these staff mentioned the caution they used when approving an offender for the program. Most CRP staff understood and agreed with the goals of the program.

Most of the 34 CRP participants interviewed seemed to understand the goals of the program initially. About half of those interviewed said that at first they were concerned about the terms of release and the possibility of repeating time served if they failed CRP. Four offenders who declined to participate in CRP were interviewed, and none of these offenders understood the goals of the program. All four felt the purpose of CRP was to get out of prison early. Three of the four had concerns about the program because they believed the rules were not outlined clearly and they had a lot to lose, given the impact failure could have on their incarceration term.

Nine people were identified by CRP participants as having been involved with his or her reentry process to a degree sufficient to provide some constructive feedback. Most (78%) of these social support people interviewed understood CRP goals well.

CRP Components and Policies

CRP staff interviewed commented on the placement of CRP participants in the facilities. The number of CRP participants initially was large enough to allow them to be housed together, which is consistent with the concept of a therapeutic community. Over time, the decrease in the number of admissions required the housing of CRP participants with the general inmate population. Some staff felt this caused problems for the CRP participants, while others felt it was beneficial to the non-CRP participants as those in CRP tended to be more motivated to behave and do well in treatment. CRP participants appear to agree with the former, as housing all CRP participants together was one of a small number of suggested improvements made by CRP participants.

Most staff found CRP components to be helpful but felt that the 18-page release plan required of the male participants was the most helpful. Other strengths noted by the staff interviewed include the incentive provided by early release, the support provided participants, and the added accountability. Like CRP staff, the majority (90%) of male CRP

participants found the process of writing the release plan to be helpful. Many, however, also said it was stressful. When asked about other specific components of CRP, all participants reported that the victim impact class was helpful. The majority (80% or more) found the other components helpful with the exception of the pre-release planning class. Approximately 67 percent of offenders felt this class was helpful. A number of participants stated that the class should have a greater focus on parenting and family reintegration.

Notably, a number of participants said they were not well informed about the specific components and requirements of CRP when they first began the program. In contrast, social support interviewees understood CRP programming remarkably well, particularly ISR supervision and participant conditions of release. However, the difference between participant and social support person understanding of CRP programming may be due to the time at which the question was posed: CRP participants clearly were asked about their understanding of CRP programming when they first began the program, but it appears the question posed to social support persons did not include a reference to a particular point in time.

Five of the seven offenders in CRP who did not have their GED prior to enrollment in CRP did receive their GED; two other offenders reported receiving additional educational support. Educational programming was one area that appears to have not been fully implemented, mainly because it proved difficult to incorporate into inmate schedules. Participants and CRP staff both noted more educational and/or vocational programming for CRP participants would be helpful.

Nearly all of the participants (97%) found CRP as a whole to be helpful. The aspects rated as most helpful by participants include the highly structured daily schedule, helping participants take responsibility for their illegal behavior, preparing participants for reentry, and assisting participants in avoiding illegal activities. Responses obtained from social support persons were similar in nature, as all mentioned support, accountability, and responsibility. Suggestions for improvement obtained from participants were to allow participants to work on their vocational skills, allow for more individualization of ISR, and place greater emphasis on family reunification. The only social support interviewee who mentioned a weakness of the program stated that more ISR agents are needed.

Chemical Dependency

Many CRP participants felt they neither needed treatment nor had an addiction problem prior to entering treatment. It appears this sentiment changed for at least some participants, as most felt that the chemical dependency treatment they received was helpful and some cited the need to take advantage of treatment services to better prepare for release and hopefully prevent reincarceration. In addition, almost half (44%) stated that the critical thinking classes were most helpful in addressing their chemical dependency

issues. A number of offenders (29%) also stated that the “pull-up” system detracted from treatment and formed negative relationships between inmates.

Eight of the nine social support interviewees felt the CRP participant they knew needed chemical dependency treatment during his or her incarceration; six of the eight who made this statement said that CRP was very helpful to the participant in addressing his or her treatment needs. When asked what could have been more helpful about the treatment provided, the two people who responded mentioned communication issues.

Reentry

The 23 participants who had been released to the community at the time of the survey were asked a series of questions about their reentry and the transitioning process. Nearly three-fourths (74%) reported that finding housing was very easy; a much smaller percent (35%) felt that finding employment was very easy. However, when interviewed, 83 percent of the participants had a full-time job. All of these offenders held a job best described as manual labor. The majority (83%) of offenders said that ISR was helpful to some degree in their reentry process, although a few commented on the contradiction between the importance of not isolating oneself in the community, as expressed by treatment providers, and the fact that ISR initially involves house arrest. Overall, 57 percent of the offenders rated their transition as very or somewhat easy.

All of the social support interviewees who knew other people who had been incarcerated (n=6) felt that CRP participants were better equipped to transition smoothly into the community. Many of those interviewed reported that participants improved, either a lot or a little, in all areas addressed in the survey including abstaining from alcohol or drug use, staying out of trouble, handling personal relationships, making appropriate decisions, meeting basic needs, handling anger, and employment. Notably, eight of the nine people interviewed stated they were not concerned about the participant in any way.

Interviewees then were asked what was most helpful to participants when returning to the community. The three common responses included familial support, some prison time prior to release, and ISR. However, like the CRP participants, some interviewees noted that ISR regulations can isolate participants and create barriers as they try to integrate into the community.

Community Supervision Expenditures

(M.S. § 2007, Chapter 54, Section 14, Subdivision 3)

The Minnesota State Legislature appropriated monies totaling \$1.2 million for the FY 2006-2007 Biennium for community supervision of offenders participating in CRP. No monies were expended, however, until the first offenders were released to the community in May 2006. Spending for the FY 2006-2007 Biennium is enumerated below:

Salary and fringe	\$246,861
Technology	120,134
Transportation	116,675
Office and field supplies/equipment	120,969
Rent and maintenance	19,504
Communication/computer wireless	7,282
Travel and subsistence-instate	34,430
Contracted services	4,340
Other operating costs	<u>8,255</u>
Total FY 2006-2007 spending	\$678,450

CCJ Recommendations

Based on the findings from their evaluation, CCJ put forth the following recommendations:

- Conduct a comprehensive review of selection criteria: One implication of having such a small number of program participants is a decrease in the cost-effectiveness of the program. Selection criteria should be reviewed to ensure the program is available to enough inmates. Steps involving a high level of discretion should be reviewed to ensure adequate staff training and proper definition of screening criteria.
- Improve the tracking of all information pertaining to the CRP screening process: Without a comprehensive tracking process, data on CRP screening are limited.
- Standardize CRP programming at both correctional facilities: The limited number of CRP participants at Shakopee made it impossible to offer similar classes as offered at Lino Lakes. However, Shakopee could incorporate the 18-page relapse/reentry plan.
- Promote team building and camaraderie between CRP participants by increasing CRP enrollment and housing all participants in the same unit: Housing CRP participants together could increase support among participants and minimize problems reported when participants and non-participants were housed together. Some CRP participants reported they found support from other CRP participants. Perhaps the DOC should consider creating “cohorts” as they do in CIP.
- Emphasize family reintegration and educational programming: Several participants and staff felt that family reintegration is an aspect of CRP program-

ming which is lacking. Many CRP participants live with their family upon release, so many likely would benefit from such programming.

- Include ISR agents when reviewing participant release plans to provide continuity in services.
- Increase communication within the DOC: The CCJ report suggests longer periods of consultation with the legislature and increased time for implementation will greatly enhance communication within the DOC. The DOC thus would have more time to prepare and communicate new policies and practices, which in turn may improve institutional buy-in and overall implementation of a new program.

Summary of Outcome Data

Bed Days and Cost Savings

The CCJ process evaluation also includes a calculation of prison bed days saved and associated cost savings using the 43 offenders involved in CRP as of the writing of that report. The report states that, as of January 1, 2007, CRP saved 5,427 days of prison bed space since the start of the program in 2005. Given a marginal per diem of \$61.34 during FY 2007, this results in a savings of over \$332,892. This figure is reduced to \$218,925, however, once the cost of ISR supervision for the CRP participants is deducted. The CCJ report suggests the cost savings could be as high as \$1,054,764 if none of the program graduates return to prison (either for a new offense or a technical violation) prior to the end of their sentence, as a total of 15,647 days of prison bed space could be saved. The total savings would be reduced to \$726,177, however, after accounting for the cost of ISR supervision. Moreover, these savings would not be fully realized until the end of 2010.

Although substantial, the total costs saved by CRP are considerably lower than originally projected primarily due to low participation rates. When the enabling legislation was enacted in 2005, it was estimated that CRP would reduce costs by \$1.7 million by June 30, 2006. However, six months after the end of FY2006, the total savings as of January 1, 2007, was approximately \$1.45 million less than anticipated.

Recidivism Rates

By the end of October 2007, 51 offenders had entered CRP. Six of these offenders (11.8%) dropped out, three (5.9%) currently are participating in the incarcerated phase of CRP, and the remaining 42 (82.4%) completed programming and were released from prison. Of the 42 offenders released, only one was returned to prison for violating conditions of supervised release. None of the offenders has returned to prison for a new offense.

A full recidivism study, which would include a comparison group and data collection on variables that may affect recidivism rates, was considered by the DOC but ultimately not

pursued due to an insufficient amount of time elapsed since release. This decision is supported by the early recommendations of Tewksbury and Smith reported in a previous section of this report. The primary reason the recidivism study was not performed is that the longest any of the CRP participants have been in the community (i.e., at risk to reoffend or be reincarcerated) is less than two years. Most CRP participants were released from prison in the spring of 2006, and these participants have been in the community for only 18 months. Best practices dictate, however, that the minimum follow-up period used in recidivism studies should be 36 months. A second reason a more detailed recidivism analysis is not constructive at this time is that only a small number of CRP participants have been released from prison. The small sample size (N=42) likely would make it difficult to identify if differences between the CRP group and the comparison group were statistically significant. Typically, the smaller the sample size, the larger the difference between the groups must be in order to achieve statistical significance.

Conclusion

CRP was created in response to the growing number of drug offenders—namely, those incarcerated for meth offenses—entering Minnesota prisons. The program, moreover, was based on the assumption that many of these offenders are addicts who would not pose a serious threat to public safety if their drug addiction was treated successfully. The preliminary outcome results presented in this report are promising, as only one program graduate has returned to prison. However, the actual costs reduced by CRP are substantially less than anticipated, which is largely attributable to low rates of program participation. Indeed, only 51 offenders entered CRP during the first two years of its operation.

The relatively low participant numbers are likely due to several factors. First, the number of drug offenders entering prison as new commitments (as opposed to probation or supervised release violators) has been on the decline since FY 2004; i.e., prior to the inception of CRP. Second, the creation of CRP coincided with the legislative decision to increase the operating capacity of CIP at the MCF-Willow River from 90 to 120 beds with a potential capacity of 180 beds. CRP and CIP both offer reductions in prison time served for program graduates but, perhaps more importantly, they also tend to draw participants from the same pool of inmates—non-violent drug offenders. Finally, the program eligibility requirements have limited the number of participants.

The legislative sunset for CRP is June 2009. If the program was extended beyond this date, the number of offenders entering CRP would need to increase in order for it to be an effective correctional program that reaches its anticipated cost-reduction potential. Of the three aforementioned reasons that are likely responsible for the low rates of program participation, the one most amenable to modification is the eligibility criteria.

In light of the evidence presented on the reasons for ineligibility, it appears as though there are several areas where selection criteria modifications would need to be considered in order to increase the number of CRP participants. For example, as shown earlier in Figure 2, the statutory provision excluding offenders whose drug offenses appeared to be motivated by profit was the most common reason for ineligibility. This finding chal-

lenges the notion that many drug offenders are incarcerated solely because they are addicted to drugs. Basing program eligibility on a chemical dependency assessment performed by the DOC at intake, as opposed to the crime for which the offender was convicted, would likely provide a more valid measure as to whether an offender is suffering primarily from an addiction to drugs.

Because CRP offers a reduction in time served for program graduates, accurately identifying the offenders who pose less of a risk to public safety—and, thus, are better candidates for early release—is paramount. It is worth emphasizing that Minnesota relies on imprisonment far less than most other states, which is why it has the second lowest incarceration rate in the country. Offenders sentenced to prison tend to represent the most serious criminals (including those incarcerated for drugs) with respect to severity of offense and criminal history. Nevertheless, incorporating validated risk assessment tools such as the Level of Service Inventory-Revised into the selection criteria would likely help better identify the lower-risk offenders.

Finally, the enabling legislation requires eligible participants to be incarcerated for a controlled substance offense. In an effort to increase the number of offenders entering CRP, consideration would need to be given as to whether chemically dependent offenders incarcerated for non-drug offenses should be admitted to the program provided they meet all other eligibility criteria.

It is important to point out, however, that two of the three proposed revisions to help determine program eligibility—reliance on a chemical dependency assessment and the possible inclusion of chemically dependent non-drug offenders—would require a modification to the enabling legislation. Furthermore, it is currently unclear whether the proposed changes to the selection criteria would sufficiently increase the size of the CRP population. What is clear, however, is that the eligibility criteria need to be carefully examined to determine how, or whether, CRP can be a viable correctional program.