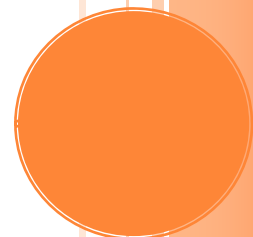


EVALUATION OF  
DELAWARE'S INDIVIDUAL  
ASSESSMENT,  
DISCHARGE, AND  
PLANNING TEAM PROCESS

*Prepared for the Delaware Criminal Justice Council  
by the Center for Drug and Health Studies, University  
of Delaware. September 30, 2016*



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## **Introduction**

This report is the result of an evaluation contract between The Delaware Criminal Justice Council and The Center for Drug and Health Studies (CDHS) at The University of Delaware. The CDHS research team began observing the I-ADAPT process at its inception and has continued observation/participation in the I-ADAPT Steering Committee to the present (September, 2016). The evaluation process has provided feedback to the I-ADAPT Steering Committee on an ongoing basis. This report compiles data from different sources to provide a picture of what I-ADAPT is, what it is intended to do, how the process works in practice, and what the overall impact of I-ADAPT is.

A brief introductory comment is warranted due to perceptions of what exactly I-ADAPT is and is not. I-ADAPT is often referred to as a program. It is not. I-ADAPT is a coordinated assessment and delivery of service process that aligns existing resources in Delaware service agencies to better provide access to services to persons returning to the community from prison. The distinction is important when determining the effectiveness of something like I-ADAPT. A program generally refers to an intervention administered by trained treatment practitioners that follows a series of specific, often manualized, set of procedures. Programs have a set duration of time and dosage, be it of treatment sessions or hours of contact, tied to a progressive set of tasks accomplished by participants. Programs have set definitions of beginning and completion such that it can be clearly articulated that an individual began the program at a certain time and either completed the program or did not. I-ADAPT is a process that informs incarcerated individuals of a set of services for which they may (or may not) be eligible and then assesses them and refers them to services to which they may (or may not) avail themselves.

The misconception that I-ADAPT is a program presents problems for evaluation as well as public perception because few if any of those who participate in the I-ADAPT process are likely to receive the identical set of services, unlike participants in a program who receive the same set and number of treatment doses over the same period of time and either fail or successfully complete the program. Participation in I-ADAPT means only that an individual signed a release allowing agencies to share information (explained below). Beyond this simple step, exactly what an individual receives depends on his or her need and whether or not they access a particular eligible service. Accessing services is entirely dependent on the individual. I-ADAPT assesses needs, makes participants aware of services and points the way.

Another misconception is the direct relationship some have supposed between I-ADAPT participation and recidivism. Because I-ADAPT is a coordinated service delivery process, it should not necessarily be assessed on its relationship to recidivism. A more appropriate measure is whether the process is successful in providing services to those it is designed to assist. We stress this distinction at the outset, because too often we have been asked whether I-ADAPT is “successful,” or whether the I-ADAPT “program” works. The answer to these questions is not as straightforward as it might appear, or as simple as it would be were I-ADAPT actually a program.

Data for this report was assembled from observations of I-ADAPT meetings, conversations and formal interviews with I-ADAPT team members, interviews with I-ADAPT participants and pre and post release surveys of I-ADAPT participants. Recidivism findings are incorporated from an analysis conducted by the Delaware Statistical Analysis Center.

The report is generally organized by service delivery area. Observational information gained from documents and meeting attendance is presented first to provide background and a description of what I-ADAPT is (and is not), and how the process works. Data from information provided to the evaluation team on the number of persons serviced by each agency is then presented by delivery area. This is supplemented by results from a survey of I-ADAPT participants to demonstrate the need of I-ADAPT clients and their opinions of the process. These results are supplemented with qualitative data collected from a series of interviews conducted with I-ADAPT clients. Information from interviews conducted with I-ADAPT team members are then presented for each delivery area. This is followed by conclusions and recommendations for how what began as an Executive Order from the Governor can be made part of a permanent reentry process for Delawareans returning to the community after a period of incarceration.

## **Background**

### **Recidivism in Delaware**

Crime, incarceration, violation of probations, and recidivism rates in the state of Delaware are high when compared to national averages. State prison facilities are routinely over capacity (108%), with facility occupancy populations ranging from 98% to 138%. It costs about \$35,000 per year to incarcerate an inmate, approximately 20 times as much as it costs the state to supervise a probationer in the community. Recidivism in Delaware is high; over 50% of persons released from Delaware prisons are re-arrested within 1 year of release, and between

45%-47% are recommitted to a facility. Re-arrest and re-commitment rates at three years post-release rise to over 75% and approximately 67% respectively.

High recidivism rates are frequently associated with barriers to re-entry to the community, including mental health and substance abuse issues, low educational attainment, unstable or unsuitable housing, poor or non-existent employment histories, criminological thinking patterns, etc. An estimated 80% of offenders in the Delaware system have histories of drug involvement, and 12%-16% have serious mental illness. A large majority of offenders have less than a high school education and over a third do not have long-term housing plans for when they are released from prison, putting them at greater risk for re-arrest and re-incarceration. Re-entry services that target mental health/substance abuse, education, housing, and employment needs are believed to help reduce recidivism rates by providing a continuum of care from prison to the community and reducing barriers to re-entry. In an attempt to address these needs the Governor set in motion the process that became I-ADAPT.

### **I-ADAPT Development**

In 2009, the secretaries of the Department of Labor (DOL), Corrections (DOC), Health & Social Services (DHSS), Education (DOE), and Housing (DSHA) were charged by Governor Jack Markell to develop a re-entry plan to reduce the number of repeat offenders and crime in the state of Delaware. The five agencies collaborated as a workgroup and with members of the Criminal Justice Council and the Division of Youth Rehabilitative Services to develop a re-entry plan for those leaving Delaware prisons. With input from members of the Hope Commission, Delaware Reentry Consortium, University of Delaware and the Center for Drug and Health Studies, community-based organizations, and the public via four public hearings, the workgroup developed and proposed the “Individual Assessment, Discharge, and Planning Team” (I-ADAPT) process.

With Executive Order 7 on May 15, 2009, Governor Markell adopted the proposed I-ADAPT re-entry plan “to assist offenders who are to be released back into society”. According to Executive Order 7, members of I-ADAPT shall:

- a) Increase availability and access to services within five identified re-entry pillars - Housing, Employment, Human Services, Education and Community Integration - through streamlining current processes and utilizing existing resources.
- b) Create a standardized process for documenting offenders' entry to and release from the Department of Correction, identifying gaps in the services provided and opportunities for improvement.

- c) Develop a re-entry Memorandum of Understanding, which may be amended or supplemented from time-to-time, between and among State government agencies to enhance and streamline the delivery of necessary services in a manner that requires clear expectations and accountability.
- d) Implement an accountability system that will annually monitor the plan's successes, detail opportunities for improvement, and assist in the development and implementation of best practices.
- e) Work to equip individuals released from custody with the tools needed to succeed in the community.
- f) Build a continuum of custody, care, and control for all offenders who are under a community-based supervision sentence, and especially those offenders who are discharged from the custody of the Department of Correction.
- g) Identify how state agencies and the community can work together to improve offender accountability and to require personal responsibility for achieving self-sufficiency.
- h) Divide into five teams - Statewide Oversight, City of Wilmington, New Castle County, Kent County and Sussex County - for the purpose of focusing available resources in each of those areas.
- i) Strive to improve public safety by reducing recidivism by 50 percent within a five-year period and decreasing re-victimization in our communities.”

The re-entry plan adopted by Delaware through Executive Order 7 in 2009 resulted in the development of the I-ADAPT re-entry process.

## **I-ADAPT Process Design and Development**

### **Process Structure**

Per the Governor's Executive Order, the I-ADAPT re-entry process was developed through collaborative efforts from DOC, DHSS, DSHA, DOE, DOL, and various community groups. I-ADAPT's mission is to reduce recidivism and improve public safety by providing individualized transition planning for participants as they transition from Delaware prisons to the community. To be responsive to participants' specific needs, I-ADAPT uses a team case management approach that involves redirecting client needs to service providers with knowledge in those areas of expertise.

Five I-ADAPT work groups were originally established, four case management teams and a Statewide Oversight team. The Statewide Oversight committee is made up of senior representatives from DOC, DOE, DHSS, DOL, and DSHA; representatives from community organizations also participate on an as-needed basis. The Oversight workgroup develops policies and procedures and Memorandums of Understanding to address identified barriers and gaps in service (See Process Services section). Monthly Oversight workgroup meetings facilitate maintenance and growth of statewide process operations and serve as a forum for interagency discussions of individual and general client needs in instances the case management workgroups need Oversight assistance. Each of the four case management workgroups (Wilmington, New Castle County, Kent County, and Sussex County) consists of representatives from DOC, DOE, DHSS, DOL, DSHA. The workgroups reached out to community organizations and service providers in order to facilitate communication so that I-ADAPT participants could be referred as needed. Case management team members formally meet each month to discuss participant transition plans and collaborate routinely via shared data systems, email, and at pre-release I-ADAPT workshops at each of the Level V facilities.

Initial I-ADAPT steps focused on developing a process infrastructure that would allow for a team-based case management approach that allows for individualized responsive re-entry planning without adding additional costs to the budget. The I-ADAPT re-entry process is not funded by the legislature; therefore, the majority of I-ADAPT services are provided by existing state personnel housed in and employed by the various collaborating departments and community organizations. Federal Second Chance Acts funds from the U.S. Department of Justice are utilized by the agencies to provide additional services when they are available.

Barriers to re-entry and gaps in services were identified by the Oversight team in areas of employment, education, housing, and human services. Internal policies and Memorandums of Understanding between and among government agencies were established to address the identified barriers to re-entry and improve the delivery of re-entry services (ex. state IDs and birth certificates, SNAP). Informed consents, MOUs, and shared digital data files allow I-ADAPT members to share information about participants for re-entry planning purposes and aids I-ADAPT members' ability to secure requested legal identification documents and other eligible services for participants upon release.

## **I-ADAPT Services**

### **Eligibility and Enrollment**

All Delaware inmates sentenced to one year or more are eligible to participate in the I-ADAPT process, no matter their duration of incarceration. Women are eligible if they are sentenced to six months or more. The I-ADAPT process is designed to be voluntary, and participants must sign a consent form during enrollment to allow the I-ADAPT workgroup to share the participant's information with other team members in order to develop a transition plan and obtain re-entry assistance.

People eligible to participate in the I-ADAPT process are typically identified 6-9 months prior to their release and informed by a Level-V or Level-IV counselor that they are eligible for I-ADAPT services. If the eligible inmate chooses to participate in the process, he/she signs an "Authorization to Release Information for Coordination of Collaborative Care" form to authorize the I-ADAPT members to share information about the participant with other team members for re-entry planning purposes. Authorization allows the team to share the client's DOC, DOE, DHSS, DSHA, and DOL records, including DOC/DHSS medical, mental health, and substance abuse and treatment records.

Enrollment packets are completed for each participant who signs the informed consent/waiver form to authorize I-ADAPT members to share information about the participant with other team members for re-entry planning purposes. Clients typically complete the enrollment packet themselves with some assistance from a Level-V counselor. The process enrollment paperwork includes assessments of participants' needs and application forms for needed services and documentation. Via an "I-ADAPT Document Request Form," clients self-identify as needing 1) a social security card, 2) a birth certificate, 3) a state identification card, and 4) disability assistance. Client also complete an "Application for a Certified Copy of a Delaware Birth Certificate" if they were born in-state and need a copy of their birth certificate and a "Delaware Health and Social Services/Division of Social Services Application for Food Benefits" form. A Department of Labor, Division of Employment and Training "Delaware JobLink Registration" form is also completed by clients upon enrollment.

### **Transition Planning**

Completed process enrollment packets are provided by Level-IV or V DOC staff to the P&P I-ADAPT coordinators who upload the forms to the shared data system so other team members may access participant information and begin following up with participants to meet their transition needs. Information from client enrollment packets is reviewed and supplemented



with additional information from the I-ADAPT workgroup data files in order to complete an individualized Transition Plan. Probation and Parole Staff coordinators complete a “Transition Plan” form for each participant; the “Transition Plan” forms consolidate information about participant’s demographics, criminal profile, risk and needs assessments, and detailed information about participant’s employment history and post-release work plans, educational attainment and needs, transportation limitations, substance abuse and treatment history, medical and mental health conditions, family status, financial situation, and other information.

Workgroups meet monthly and review newly enrolled participants’ and soon-to-be released participants’ needs and discuss potential transition solutions. Each team member is responsible for bringing relevant information from their organization’s data system to the I-ADAPT case management meeting so the workgroup can develop each participant’s individualized transition plan. DOC counseling staff and DOE staff who work within Level-V facilities provide insight to participants’ behavior and progress during incarceration. Team members report past month service provisions and limitations at monthly meetings. Team members also collaborate on participant transition plans via shared data systems, email, and occasionally through interactions at community events and monthly pre-release I-ADAPT workshops at each of the Level V facilities.

DOC staffed probation officers serve as I-ADAPT Coordinators for each of the four case management teams and serve as the primary contacts for the workgroups and participants; however, client needs are referred to I-ADAPT representatives who are housed in the related assistance departments (Ex. Housing concerns are referred to DSHA). Team members collaborate in enrolling participants, evaluating participants’ needs, providing assistance, and referring clients to agency-specific service providers. Information about participants’ individualized transition plans is primarily communicated with participants via in-person and written correspondence with treatment counselors within Level V facilities and via in-person, telephone, and written correspondence with the DOC I-ADAPT coordinators who are stationed in three of the four Probation and Parole offices throughout the state. Additionally, a DHSS I-ADAPT coordinator and a DSHA case manager communicate with participants and the rest of the I-ADAPT team about client social service and housing needs.

### **Collaborations and Community Partnerships**

Efforts to build infrastructure for the I-ADAPT re-entry plan included organizing and collaborating with existing faith-based and other community organizations in order to help meet the basic re-entry needs of participants. I-ADAPT Oversight committee and case management

workgroups conducted town hall meetings with interested community organizations and individuals to communicate the I-ADAPT process's design and plans for implementation. Community groups were encouraged to maintain collaborative community re-entry coalitions/partnership networks in order to help people transition back into the community from Delaware prisons.

Community partnership efforts were attempted in all Delaware counties, and community partners participate in all of the I-ADAPT workgroups to varying degrees; however, only one community re-entry coalition/partnership network, Kent County Partnership in Re-Entry (KCPR), has continued meeting and developing re-entry service networks since I-ADAPT's inception. While community resources in the north and south ends of the state are no longer formally meeting, partnerships still exist and are utilized more informally by the I-ADAPT managers as client needs dictates.

Active community groups can provide support above and beyond the formal mechanisms provided by I-ADAPT. An example is the one active community partnership group, Kent County Partnership in Re-Entry (KCPR). KCRP is a collaborative group made up of local prisoner advocacy and support groups, emergency and transitional housing providers, veteran's services, faith-based communities, etc. who meet once a month and communicate regularly via email listserv. KCPR has developed a strong and growing network of resource providers and a resource manual for Kent County, serves as a venue for I-ADAPT members to network and refer participants to other organizations that can assist in meeting the participants' needs, and promotes the well-being of people returning to Kent County from prison. The group has collaborated in charity drives, community resource fairs, and donations to needy families. In spite of their efforts, KCPR has faced challenges over the years: the group's monthly meetings are frequently displaced from the local police station's meeting space and the partnership does not have funds for printing or postage to communicate with I-ADAPT participants. KCPR is led by an unpaid volunteer worker. The KCPR's volunteer-leadership provides considerable assets to the I-ADAPT re-entry model by organizing community groups and individuals, and she along with the Kent County DOC I-ADAPT coordinator have served as champions for collaborative and holistic re-entry service efforts.

Community groups in the future could benefit from continued guidance and assistance from the I-ADAPT coordinators and Statewide Oversight committee. Respondents who have been involved in collaborative community re-entry coalitions/partnership networks reported a need for information from I-ADAPT regarding the partnership's role in the team's re-entry efforts; assistance in developing a logic model, goals, objectives, and a strategic, action plan; and help

obtaining small operating funds for direct service provision, paying an intern to assist in operational efforts and case management, and/or a small stipend for the partnership chair to offset the costs associated with leading the group and organizing community resource efforts

Faith based and other community groups thus represent another asset willing to assist in the reentry process. Efforts to continue and build upon these assets should be encouraged in the future.

## **Enrollment**

Delaware inmates sentenced to one year or more are eligible to participate in the I-ADAPT process and are typically identified 6-9 months prior to their release and informed of the process by a Level-V counselor. The process is voluntary, and participants must sign an “Authorization to Release Information for Coordination of Collaborative Care” form in order to be enrolled. The process enrollment paperwork includes assessments of participants’ needs and application forms for needed services and documentation. Level-V counselors report that group enrollment sessions are frequently necessary because of personnel limitations but that group enrollment is difficult because many eligible participants have reading and comprehension problems, have many questions about the available services and what the authorization to release information form will allow, and/or distrust or have negative opinions of I-ADAPT or processing in general. Level-V counselors have reported frustration with the enrollment process because of how time consuming it can be when participants need a lot of individual attention; however, I-ADAPT workgroups have at times helped Level-V counselors with enrollment efforts when personnel shortages influenced new enrollment rates. Many eligible participants do not sign up for I-ADAPT. Some are returning to existing employment and families, while others distrust formal agencies’ pledges of assistance. Efforts to improve eligible participants’ perceptions of the process and knowledge of available resources can aid enrollment efforts.

## **Assistance for Participants**

People returning to the community from incarceration frequently face barriers to re-entry and reintegration, including housing barriers, unemployment and underemployment, substance abuse, mental and/or physical health problems, strained family and community supports, etc. I-ADAPT aims to improve reintegration, reduce recidivism, and improve public safety by providing assistance to people as they transition from Delaware prisons to the community. I-ADAPT provides individualized transition planning for participants and aims to be responsive to

participants' specific needs. Services provided to I-ADAPT participants are dependent on individual participant needs and may include the following forms of assistance:

- a) Legal documentation and identification—A state issued photo ID, a copy of one's birth certificate, and a copy of one's social security card are essential to obtaining housing, employment, and social services upon release from prison and therefore are an important first step in the reintegration process. While anyone can obtain a Social Security Card, MOUs have been established with the I-ADAPT process and Social Security and with Delaware's Department of Motor Vehicles and DHSS in order to facilitate provision of legal identification documentation upon release. Participants are to self-report needing a state issued photo ID, a copy of their birth certificate, and/or a copy of their social security card while completing the process enrollment packet. Participants who report needing legal identification are typically able to obtain legal documentation through I-ADAPT at no cost to the participant. Documentation for eligible participants is applied for by the I-ADAPT coordinators, and participants may pick up the acquired documentation from his/her I-ADAPT coordinator or probation officer (dependent on county of supervision) after release from a Level-V facility. Documentation is sometimes made available for participants while they are at Level-IV work release facilities.
- b) Educational/Vocational training—I-ADAPT clients can receive education and vocational services through the process pre- and post-release. Department of Education provides education and vocational training classes within the Level-V facilities for select students, and students can receive testing and certification assistance through I-ADAPT. Education opportunities are available in all of the Level V facilities, and vocational training in culinary arts, flagging, and fiber optics are available in select facilities. I-ADAPT participants' access to education and vocational training opportunities depends on participant institution/availability of processing, classification and behavioral considerations, and time-to-release. Educational and vocational training opportunities also exist via I-ADAPT in the community, allowing for a continuum of care as participants return to the community. The DOC has stabilized an agreement with Del Tech utilizing Second Chance fund to provide vocational training to I-ADAPT participants.
- c) DOL career counseling and development services—Employment is reported to be one of participants' greatest needs. Post-release career counseling and vocational training opportunities, including tuition assistance, are available in the community through the DOL. I-ADAPT clients who report needing employment post-release complete a DOL pre-registration form during process enrollment and should be provided contact

information on their transition plan for the DOL I-ADAPT employment specialist in their area. Clients are instructed to contact the DOL I-ADAPT employment specialist as soon as possible after release to receive services and told that they will receive prioritized services by the DOL I-ADAPT employment specialist. All I-ADAPT participants are eligible for DOL assistance in the form of one-on-one assistance in developing a resume, posting to and job searching on Delaware JobLink, participating in aptitude and skills assessments, and attending computer skills classes. Participant access to vocational and educational assistance in the form of tuition assistance and/or job referrals is dependent on participants' criminal record, abilities, legal restrictions, and the DOL representatives' assessment of individual responsibility, reliability, and capability to maintain gainful employment.

- d) Housing assistance—Housing is a primary re-entry concern for participants. During enrollment, participants are asked about their re-entry housing plan, and participants who report potential homelessness upon release are referred to DSHA and/or community housing organizations, including sober living houses, transitional housing, and homeless shelters. Participants may receive assistance developing a budget, locating suitable housing, developing short- and long-term housing plans, and/or affording emergency shelter, rental deposits, or other housing related barriers (e.g., affording a phone line for home confinement).
- e) Medical and/or mental health treatment for chronic care cases— DOC policy is that anyone leaving their custody who takes medication for chronic mental or physical health problems are eligible for a 30-day supply of their medications, provided from the DOC dispensary upon release. Medical issues are not specifically under the purview of I-ADAPT, but the case management teams have been able to step in and assist in cases where miscommunication or change of location at release present problems in the seamless delivery of medication.
- f) Social Services Benefits—Participants fill out application forms for food benefits, Medicaid and other services when they complete their I-ADAPT enrollment paperwork and needs assessment. Pre-enrollment enables participants to have benefits turned on within 48-72 hours post-release by calling the DHSS contact included on his/her transition plan.
- g) Transportation assistance—I-ADAPT participants are eligible to receive bus tickets from team members in order to help clients with financial limitations afford transportation to and from employment and treatment services. Clients typically are eligible for two bus

passes, however, additional passes may be made available for participants at the I-ADAPT coordinator's discretion.

- h) Pre-release workshops—Monthly pre-release workshops are implemented in each of the Level-V facilities in order to provide participants with information about community resources and ways to successfully reintegrate into the community. Workshops are regularly attended by I-ADAPT work group members and participants. Team members present information on I-ADAPT and re-entry services to participants, focusing on one of the following topics each month: housing, employment, health and social services, community corrections, education, and community services. Each topic is presented twice a year and is accompanied by a topic-specific workbook. Presenting I-ADAPT members and other representatives in attendance answer general questions that arise during workshops. Participants have the opportunity to talk one-on-one with I-ADAPT representatives at the end of the monthly workshops in order to address case-specific transition concerns; this time allows service providers to build rapport with participants and provide individualized case management services to clients nearing release.
- i) Workbooks—Workbooks are aimed at helping participants identify their re-entry barriers, supports, and transition plans and include open-ended questions to help participants identify their needs and supports, information about common re-entry barriers/concerns, suggestions for potential solutions to barriers, contact information for re-entry services in the state, guidelines/policies, and select assistance applications. Workbooks are periodically modified to update information and include participant-requested information.
- j) Case Management and Access to Service Providers—I-ADAPT's team case management approach allows participants to receive assistance from a variety of specialized team members in identifying potential barriers to re-entry, short- and long-term needs and goals, and available resources to help participants successfully reintegrate into the community. One-on-one sessions between participants and I-ADAPT coordinators and monthly access to I-ADAPT members at monthly pre-release workshops helps build rapport between participants and team members and can facilitate more efficient development and implementation of participants' transition plans. The recent addition of a DSHA I-ADAPT housing coordinator has been credited by team members and clients as greatly reducing participants' housing barriers and re-entry anxieties/fears.

## Monthly Pre-Release Workshops

Monthly pre-release workshops in each of the Level-V institutions facilitates pre-release information dissemination efforts by the I-ADAPT workgroups. Team members present information on I-ADAPT and re-entry services to participants, focusing on one of the following topics each month: housing, employment, health and social services, community corrections, education, and community services. Each topic is presented twice a year and is accompanied by a topic-specific workbook. Participants in attendance may ask questions during large-group information sessions and sometimes one-on-one with I-ADAPT personnel at the end of the monthly workshops. Interactions, especially one-on-one at the end of workshops, allows service providers to build rapport with participants and provide individualized case management services to clients nearing release.

There is great variety in monthly workshops by facility and I-ADAPT workgroup due to physical influences (i.e., available space) and presenter presentation styles and personality. Workshops are held in large spaces to accommodate large groups, but this can sometimes make it hard to hear information, especially when acoustics are bad due to echoing. Engagement between I-ADAPT representatives and participants also varies by facility—some coordinators take a front seat during workshops, providing an overview of the process at each workshop and framing the topic-specific presentations while others allow guest presenters to lead the workshop sessions but are available to answer questions at the end. Additionally, while most representatives use workshops as an opportunity to develop rapport with participants, some appeared less comfortable being in a prison environment. Training or an informational overview on prisons and inmate backgrounds and needs might make those not accustomed to working with the inmate population feel more at ease.

It is important to recognize that monthly pre-release workshops are not equally accessible to all participants. Many participants are not allowed to attend workshops due to security classifications or because of their involvement in conflicting education, work, or drug treatment activities. Additionally, participants with visual or hearing impairments, who do not speak English as a first language, and/or who are not able to read present problems conducting informative workshops. Provisions for those who have difficulty understanding the presentations are made when staff are aware, but the group nature of the workshops make accommodating everyone difficult. One-on-one case management interactions could be made available pre-release for participants who are not allowed to attend sessions due to classification or who have communication impairments. Assistants and translators for those with communication impairments are recommended.

Large group information sessions provide an efficient way of providing information to a large group of participants at a time; however, some participants are not able to attend workshops because of classification or school/work obligations that conflict with workshop times and many participants that can attend the large group sessions have trouble understanding the complexity of the I-ADAPT process design, available services, related laws and policies, etc. and need additional one-on-one consultations in order to understand the provided information and effectively develop a transition plan. Additional time for one-on-one pre-release interactions between participants and I-ADAPT representatives is needed at some of the facility workshops, and efforts need to be made by the county coordinators and other I-ADAPT representatives to conduct one-on-one consultations with participants outside of workshop time if necessary—this is especially true for I-ADAPT participants who are not allowed to attend monthly workshops due to their security classifications.

Consistent, individualized, and positive interactions between I-ADAPT workgroup members and participants is a valuable component of the I-ADAPT re-entry transition model. Pre-release workshops, especially when concluded with ample opportunity for participants to meet one-on-one with I-ADAPT workgroup representatives, considerably contributed to clarifying information for participants, addressing barriers unique to an individual participant, and building rapport between staff and participants. Many participants are able to arrange housing, address child support issues, with I-ADAPT assistance during the pre-release workshop one-on-one check-in periods. Positive interactions with I-ADAPT representatives during the pre-release workshop improves communication, reducing barriers to re-entry and helping to build trust between the team and participants.

### Workbooks

Workbooks aimed at helping participants identify their re-entry barriers, supports, and transition plans through provision of general information and inclusion of open-ended questions to help participants identify their needs, supports, and available services have been developed and are regularly updated. The workbook consists of six sections, with one section corresponding with each of the bi-annual pre-release I-ADAPT workshops (i.e., housing, employment, health and social services, community corrections, educations, and community services). Workbooks are distributed to participants during monthly pre-release workshops and are discussed as a large group to varying degrees during the month's speaker's presentation on the subject. Although workbooks include questions and sections for participants to write responses, participants and I-ADAPT representatives typically do not discuss participant



responses, reactions to the materials, or how the workbook influences his/her transition plans. There is uncertainty regarding if participants typically read and utilize the workbooks; however, the workbooks do provide a great deal of relevant information for participants who do read and engage with the materials. Follow-up with participants to discuss the workbooks in greater detail may be beneficial to some participants, especially for participants who have difficulty reading and comprehending the materials.

In sum, I-ADAPT has created a cost neutral streamlined delivery of service process utilizing existing resources in order to educate reentering persons on available services and attempting to link them to services upon release.

### **Process Evaluation**

This evaluation is based on information received by the participating agencies, pre and post release surveys of I-ADAPT participants and qualitative interviews with I-ADAPT team members and participants.

### **Participants' Perspectives of I-ADAPT**

Input from I-ADAPT participants was collected via participant interviews and pre- and post-release surveys. CDHS collected survey data from 771 I-ADAPT participants during informational sessions conducted at Level 5 facilities. CDHS also collected data from 144 post release surveys. Post release surveys were left with I-ADAPT probation officers and distributed to participants with instructions indicating the voluntary nature of the survey. Empty envelopes were left with the survey, and those electing to participate filled the surveys out and placed them in the envelopes, which were then sealed. Surveys were analyzed by CDHS research staff. Results are presented with other data for each service delivery area below. It should be noted at the outset that survey respondents considered the process helpful (70%) and 76% would recommend participation in I-ADAPT to a friend.

Qualitative interviews were conducted with 30 I-ADAPT participants in order to provide context to the survey data and to identify what participants found as useful or problematic. Participants were asked what additional services they would find useful and what might make the process work better. Results are presented below grouped by area of need.

Two caveats, one on definitional issues and one on selection bias, are warranted regarding the survey data. The survey asked respondents about their need and experience in certain areas. What respondents define as "an appointment," or "received assistance" cannot be ascertained from the survey. For example in the first need area, education, 22% of

respondents said they were given an appointment for educational assistance and 50% of those attended the appointment. That appointment could have been with Groves Adult Education program, or another program. The survey also does not identify the type of assistance provided, only that they received some type of assistance. Readers are cautioned not to insert their own interpretations of where and in what fashion appointments and assistance were provided. The survey is designed to investigate only whether I-ADAPT participants felt they were provided services in needed areas and whether they found those services useful.

It should also be noted that the I-ADAPT process is completely voluntary. That is, I-ADAPT team members may identify a need for a particular individual, but it is up to that individual to keep any appointments and sometimes to make them themselves, as well as to avail themselves of any services that may be provided. Given what is known about the population, as well as transportation and timing issues faced by I-ADAPT participants, readers should not be surprised that appointments are often not set, kept, or services utilized. The following sections provide information on each area of service delivery.

### **Department of Correction (Including Probation and Parole)**

In many ways I-ADAPT reflects changes in correctional practice in what has come to be known as “prisoner reentry.” With the growing acknowledgement that the vast majority of those housed in America’s prisons return to our communities, the field of corrections is moving from an approach in which what happened to people when they left prison was not the concern or responsibility of the Department of Correction to one in which preparing people in correctional care for life after prison is a necessary part of incarceration. While security and safety will always remain the primary focus of any correctional department, Delaware DOC’s embrace of I-ADAPT reflects, especially when examined from the long view of what prisons do, a fundamental shift in philosophy and practice regarding prisoner reentry.

The DOC presents issues unlike other State Agencies in I-ADAPT in term of evaluation. It is difficult to assess how many I-ADAPT participants have been referred to services at DOC (unlike other agencies), because *all* I-ADAPT participants originate in DOC by virtue of their sentence. As of July 2016, 3,680 participants have engaged in the I-ADAPT process. Level-V and IV counselors determine eligibility based on time left to serve on a sentence, inform people they are eligible and coordinate workshop attendance. Probation and Parole staff prepare transition plans and serve on case management teams who reach out to community providers on a case by case basis according to the needs of the individual. While it is thus difficult to

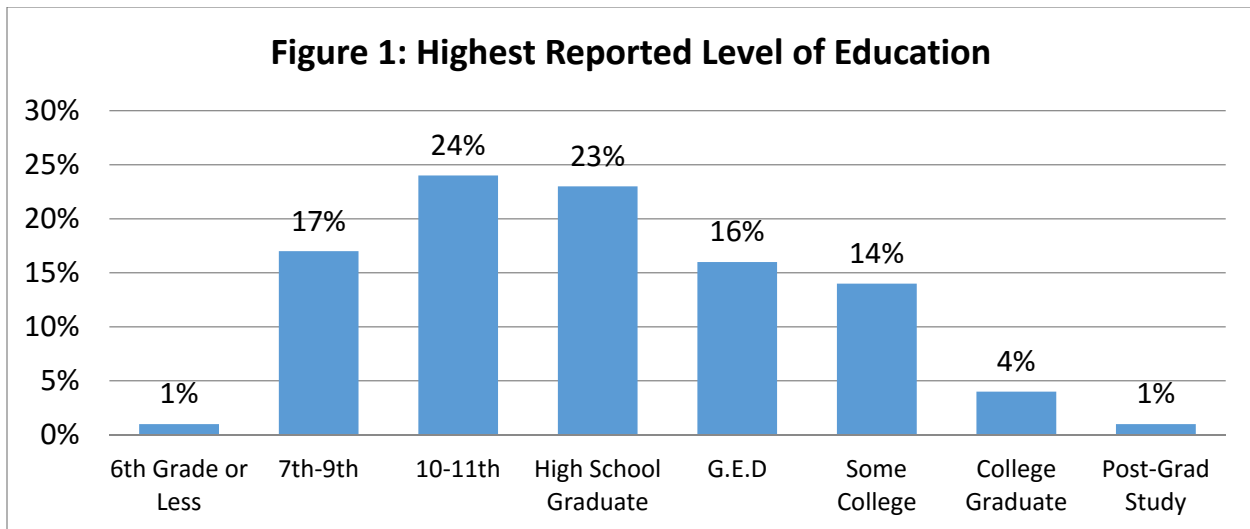
quantify DOC's impact, it has essentially re-crafted the release process around I-ADAPT assessment and preparation for release.

## Education

I-ADAPT clients can receive education and vocational services through the Department of Education pre- and post-release, including special education ABE, GED, high school education. Vocational training classes are also available pre-release in areas including culinary arts, flagging, and fiber optics, depending on institution, and recent efforts have been made to increase available services. Waiting lists exist for educational and vocational services within the Level V facilities, and inmates may not be eligible for educational/vocational services until near the end of their sentences—in part so that obtained certifications will be current after release. I-ADAPT participants are not identified for enrollment until 6-9 months before release, limiting the possibility of in-prison completion of educational/vocational processing.

Although education and vocational training services are available for participants in the community post-release, community educators have indicated that participants are frequently pre-occupied with housing, employment, and family issues once they are in the community and unable to focus on completing educational or vocational programs. Educators and other I-ADAPT workgroup members indicated education and vocational services need to be expanded within Level V facilities so that more inmates can complete ABE/GED/HS and vocational training before they transfer to a Level IV facility or are released to the community. There are currently no formal education or vocational training programs in the Level IV facilities in conjunction with I-ADAPT; however, some clients are able to access programs in the community while at work release.

The survey conducted as part of the evaluation asked the highest level of education prior to entering prison. As shown in Figure 1, 58% of I-ADAPT participants did not complete high school, and 18% have less than a 9<sup>th</sup> grade education. Part of DOC's efforts at Level V has focused on Adult Basic Education, and that is reflected in I-ADAPT reporting. Sixteen percent of I-ADAPT participants have earned a G.E.D., and 19% have some collegiate experience.



Clearly, one of the things that can help an individual prepare for life after incarceration is to improve their level of education. The Department of Education tracks the number of persons who access their services while under DOC care. From 2010 to May 2016, the following services were provided to I-ADAPT participants:

- 1,522 offenders have participated in Prison Education services (at least one component, either academics, life skills and/or vocational classes)
  - o 890 enrolled in Adult Basic Education classes (0.0 grade level equivalent up to 8.9 grade level equivalent)
  - o 549 enrolled in GED and/or Groves Adult High School. An offender can attain a GED and then go on to complete high school requirements.
    - 327 received a GED
    - 142 received a Groves Adult High School Diploma
  - o 149 participated in Prison College courses (this federal funding is no longer available so numbers in this category will remain static as of this update)
    - 261 courses were successfully completed by the 149 participants
 Funding for this program has been eliminated by USDOE resulting in no more classes being offered through the Prison Education Program.
  - o 511 participated in vocational classes (Culinary Arts, Computer and Flagging training are available at Baylor; Network Wiring, ServSafe and Flagging are offered at Young; HVAC, Auto Tech, Flagging, ServSafe and Computers courses

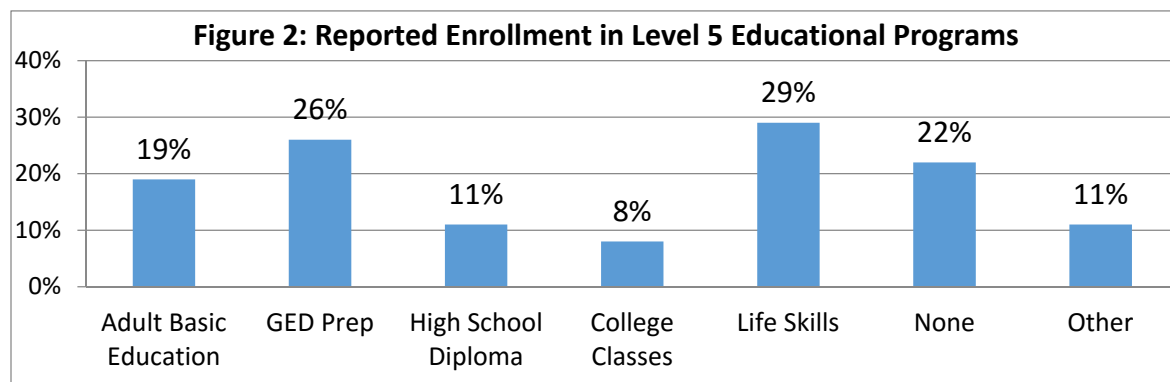
are taught at Vaughn; Computers, ServSafe, Flagging, HVAC and Masonry courses are taught at SCI)

- 842 courses were successfully completed by the offenders (the computer curriculum includes classes in Word, Excel, PP, etc. so a student can complete each component as a course.)
  - Additional vocational trainings have been added to support offenders who are preparing to reenter their communities: Young – Flagger and ServSafe; Baylor – Flagger; Vaughn – ServSafe and Flagger; SCI – Flagger, ServSafe and HVAC.
  - An auto tech employer advisory committee was established to share expertise on what skills employers are looking for in new hires.
- 752 participated in Life Skills classes including cognitive behavioral therapy and community resources
  - 646 successfully completed the course
- 111 offenders, up to the age of 21, received special education services prior to incarceration. Since most of these offenders are over 18, they are provided with three choices: continue education with special education services; continue education without special education services; not to continue education. The vast majority of offenders choose to enroll in education either with or without special education services. Some will opt not to enroll in education because they are to be incarcerated at Level 5 for a short time.
  - 62 consented to continue to receive special education services while incarcerated. Since most offenders are over 18, they are provided with a choice of continuing services or not.
    - Additional contracts were awarded for evening and weekend classes to support students with special needs who cannot access instruction during the weekday classes.
- 737 other offenders identified themselves as “reentry” upon registering for community Adult Education Programs.

These numbers provided by DOE indicate that I-ADAPT is reaching incarcerated individuals by providing a host of educational and vocational services. The figures below report on surveys results of I-ADAPT participants as to what services they accessed while

incarcerated, what they continue with upon release and whether they found those services helpful.

Figure 2 shows survey results of reported educational services participated in by I-ADAPT participants at Level V. Only 22% of respondents participated in no educational services while incarcerated; a figure that should be interpreted with the knowledge that 19% of respondents have collegiate experience and thus may not prioritize educational needs. Twenty-six percent of respondents participated in G.E.D. prep and 19% were enrolled in Adult Basic Education. Eleven percent reported obtaining their high school diploma and another 8% took some form of college course while incarcerated at level V.



I-ADAPT participants are also eligible for vocational programs while at Level V. As can be seen in Figure 3, 33% reported participating in some type of vocational training. Fifteen percent reported computer training, while 5% reported culinary arts training. The survey did not ask about flagger training which has been provided by the Dept. of Ed., so the overall 33% figure is likely an underestimate.

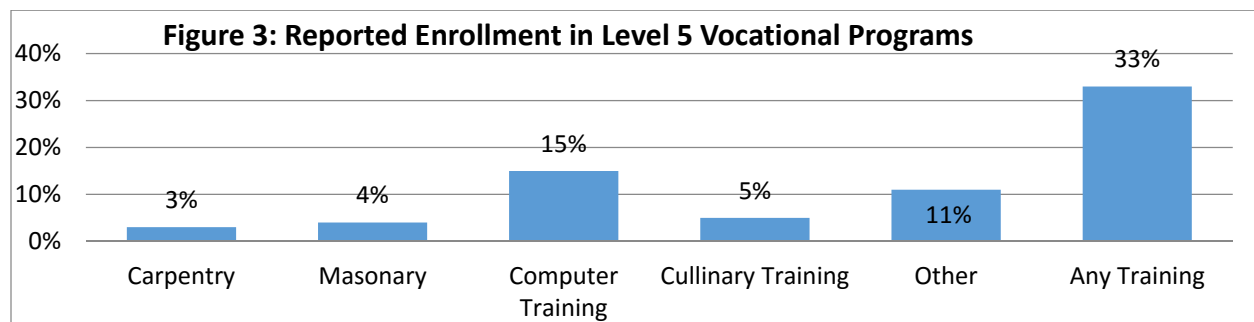
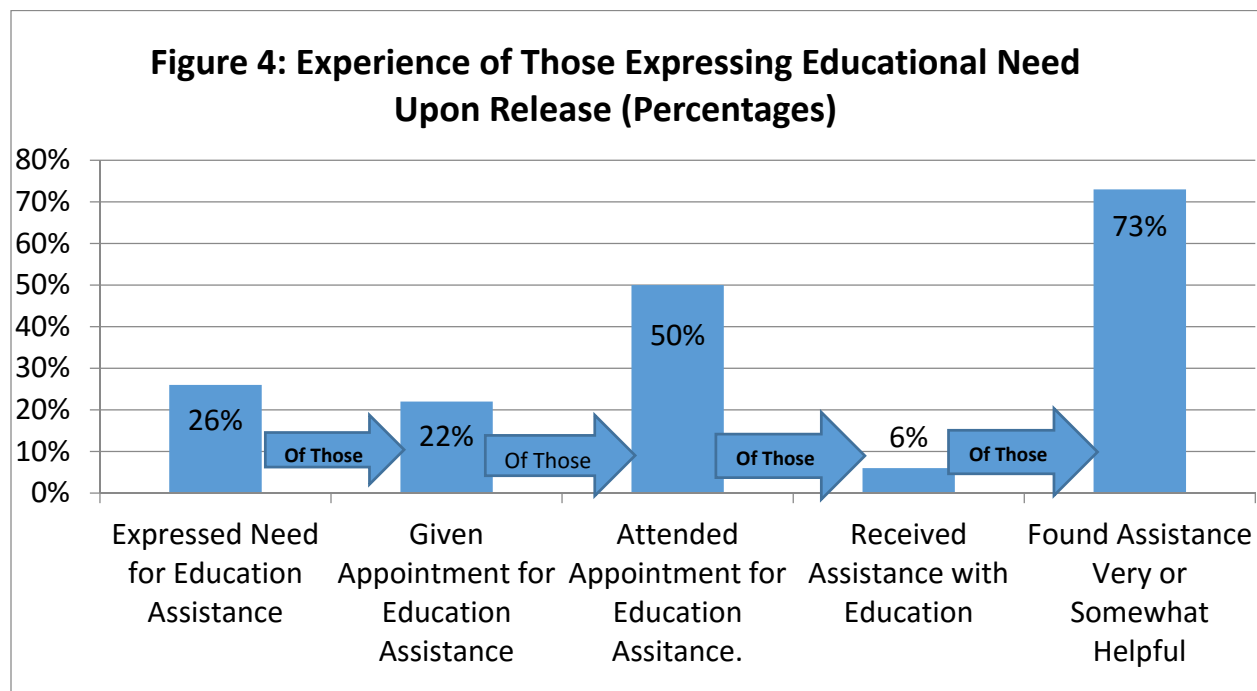


Figure 4 reports results from the post release survey on the educational experience of I-ADAPT participants. The structure of all post release tables warrants a brief explanation. The tables are constructed from the results of five questions and utilize selection criteria. Thus, as

demonstrated in Figure 4 below, 26% of I-ADAPT participants expressed a need to educational assistance after release. Of those 26%, 22% were given an appointment. Of those 22%, 50% actually attended the appointment. Of those who attended an appointment, 6% reported receiving services. Of the 6% who received services, 73% found the services somewhat or very helpful.



Educational opportunities outside of DOC present issues of time, transportation and commitment. Although the survey did not specify what type of post release assistance was attended the most common referral was likely The Groves Adult High School, which offers adult basic education and G.E.D. prep. Because of the time commitments and logistical issues of attending these services, many I-ADAPT participants may have found the commitment difficult. This is evidenced by the report that only 6% of those who reported they attended an educational appointment in the community actually utilized the services.

In qualitative interviews, clients also generally expressed a desire to receive more information about education, specifically referencing trade schools. Some clients reported pursuing GED and community college/vocational process on their own, and were frustrated by the lack of financial aid available.

When asked what types of services would be most beneficial and how they might work, participants recommended classes at Level 5 to help prepare inmates for release and to help

them start setting up plans for post-release education and trade school. This could be very beneficial as there are waiting periods and deadlines for program applications. Partnerships with local technical schools and colleges were encouraged. Respondents indicated that schooling opportunities at Level V, paired with apprenticeships, trade school recommendations, or entry-level jobs in career fields people with felony records can obtain after release would be most beneficial to them upon release.

## Employment

Employment is reported to be one of participants' greatest needs. Post-release career counseling and vocational training opportunities, including tuition assistance, are available in the community through the Department of Labor's four service centers. DOL I-ADAPT representatives can provide one-on-one services that typically are not available to the general public; however, DOL I-ADAPT employment specialists report few participant contacts per month. Initially I-ADAPT coordinators scheduled meetings between the DOL representatives and participants, but this practice stopped due to frequent no-shows by participants for the scheduled meetings.

Participants must self-identify as I-ADAPT participants when they report to a DOL office in order to be paired with the I-ADAPT representative and receive the specialized assistance that is available for participants; DOL representatives indicate that clients frequently do not initially self-identify as I-ADAPT participants, resulting in delayed assistance from the I-ADAPT representative, duplication of efforts and paperwork, and client frustration. Because DOL I-ADAPT representatives have additional work responsibilities outside of managing I-ADAPT clients' cases and needs, they are not always available to assist walk-ins. Many of the few participants who report to DOL for assistance only have one or two contacts with the I-ADAPT representative, but those who maintain engagement with the DOL services are reported to have higher employment rates.

Although some participants report positive outcomes from working with DOL I-ADAPT representatives, the majority of feedback reflects little to no engagement with the DOL I-ADAPT representative post-release. Participants expressed a desire for more engagement with DOL pre-release. DOL I-ADAPT representatives typically only engage with participants at bi-annual pre-release workshops at the Level-V facilities but have little to no contact with participants at the Level-IV work-release centers; DOL representatives have little in-reach to inmates at the Level-IV or Level-V facilities, and inmates are typically unable to reach out for services, even while at work-release facilities.



Participants frequently report confusion regarding what services are available through DOL and misunderstand the type of services that are available through DOL (ex. many participants thought jobs would be arranged by DOL for I-ADAPT participants, despite the efforts of I-ADAPT representative to inform participants that DOL does not provide jobs) or do not understand the process for obtaining services (ex. Many I-ADAPT participants and non-DOL service providers did not understand that bonding is available once an employer makes a job offer, not upon release to assist with the job search process). Many of the services that are available to participants depend on the individual's criminal record, legal restrictions, abilities, and the DOL representatives' assessment of individual responsibility, reliability, and capability to maintain gainful employment; therefore, much of the information clients request during large-group pre-release information sessions is necessarily answered with "it depends". General pre-release DOL information sessions are useful for disseminating general information but should be supplemented with pre-release one-on-one consultations as well. Pre-release interactions between participants and I-ADAPT DOL representative may improve rapport and participant understandings of DOL services and may increase the likelihood of participants initiating and maintaining engagement with post-release community-based DOL services.

The most frequently reported need by interview respondents was employment assistance. Direct service acquisition figures were difficult to obtain for DOL, in part because not all I-ADAPT participants identified as such when presenting to DOL. Still, as shown in Table 1, 1,604 persons accessed some form of pre-release services while incarcerated. Of those 37% were employed in the first quarter following release, the same percent in the second quarter, and 26% reported working in both quarters. These figures, when compared to the overall reported earnings of 39% (1<sup>st</sup> quarter), 39% (2<sup>nd</sup> quarter) and 28% (both) indicates no relationship between pre-release services and post release employment. It is unclear what pre-release services entail, however, and it should be noted that these do not include those who received employment training through DOE. It should also be noted that those not accessing services likely includes those who have employment waiting upon release.

What is also clear from Table 1 is that those accessing both pre and post release employment services are more likely to report 1<sup>st</sup> and 2<sup>nd</sup> quarter earnings post release than those who only accessed pre-release services or those who accessed no services. Forty-eight percent of those accessing both pre and post services reported 1<sup>st</sup> quarter earnings, 46% reported 2<sup>nd</sup> quarter earnings and 35% reported earnings in both. The DOL data do not allow for a determination of the type of work I-ADAPT participants are involved in but Figure 7 below

indicates that most of those who reported that they anticipated post release employment on the I-ADAPT survey expected to work in the service or constructions fields.

Table 1: Cumulative DOL Service Provision & Reported Earnings Through Nov 11, 2016

	Total	Reported 1 <sup>st</sup> Qtr Earnings	Reported 2 <sup>nd</sup> Qtr Earnings	1&2 <sup>nd</sup> Qtr Earnings	% 1 <sup>st</sup> Qtr	%2 <sup>nd</sup> Qtr	%1&2 <sup>nd</sup> Qtr
Released	2012	784	782	568	39%	39%	28%
Pre Release Services	1604	588	595	424	37%	37%	26%
Pre & Post Services	408	196	187	144	48%	46%	35%

Results from the I-ADAPT participant surveys are presented below. Figure 5 below shows the reported pre-incarceration employment status of I-ADAPT participants. As indicated, less than half were employed prior to being incarcerated and only 30% reported full time employment. Thirty-five percent of respondents reported being unemployed and not looking for employment. Whether this figure represents person who have given up trying to find employment or those potentially involved in criminal or addictive lifestyles cannot be discerned from the survey data. Given what it known about the relationship between employment and crime however, 35% of persons not attempting to find work prior to being incarcerated is disconcerting.

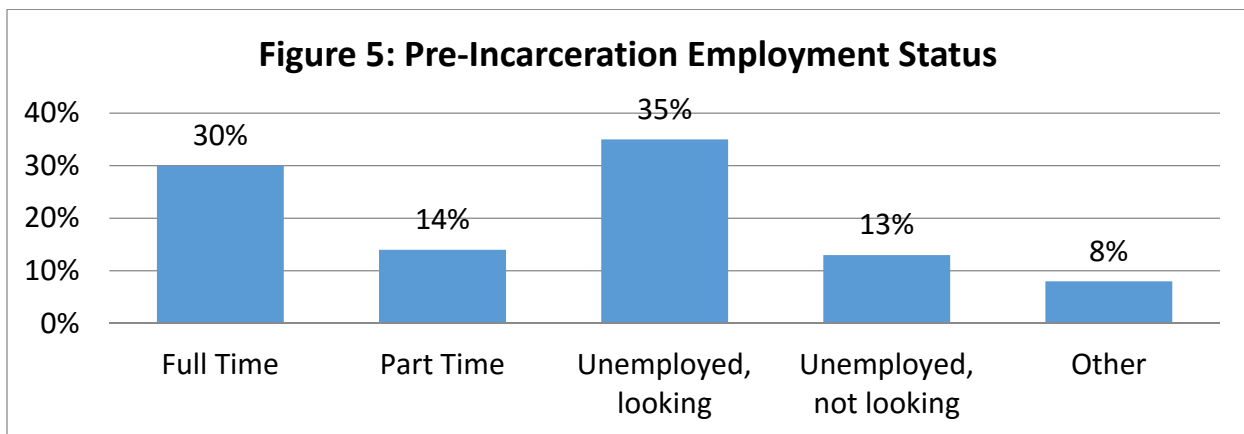


Figure 6 reports on the expected likelihood of finding employment upon release. Sixty-five percent of respondents either agreed or strongly agreed with the statement “You will be able to find employment when you get out,” while 25% were uncertain and 10% disagreed. While this may be an expression of optimism it does demonstrate that 65% of releases at least

intend to be working when they return to the community. Another survey question (not presented in figures) asked whether respondents actually had a job lined up when they are released and only 26% responded in the affirmative. Among those who do have a job waiting for them at release, 82% said it was full time. Examined by gender, 13% of females and 29% of males had a job waiting upon release.

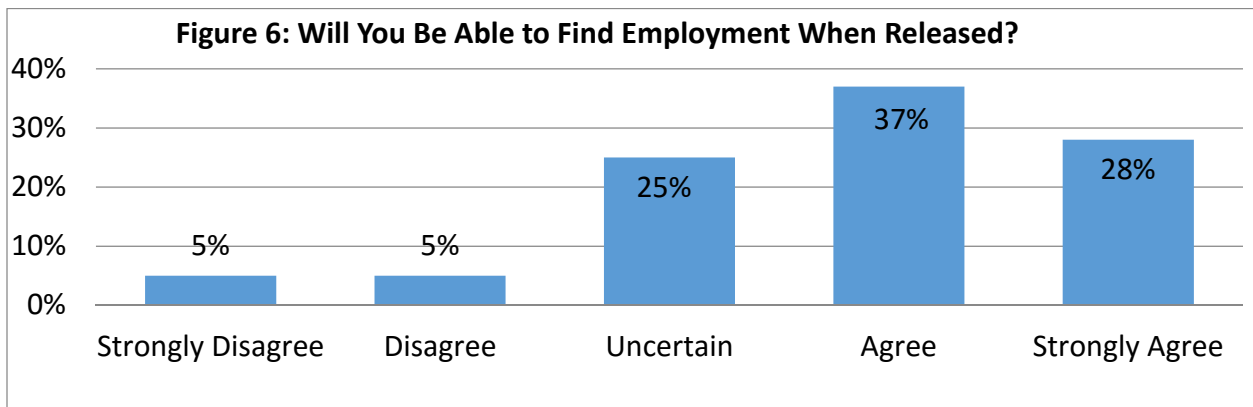


Figure 7 reports on the type of employment expected upon release. As can be seen most expect to be employed in the service sector, with 44% expecting to work in construction or other labor and 24% anticipating working in the food service or retail industry. Among female respondents (not shown in figure form), 34% expected to work in food service (27%) or retail (7%), while 14% anticipated employment in either medical services (7%) or clerical areas (7%).

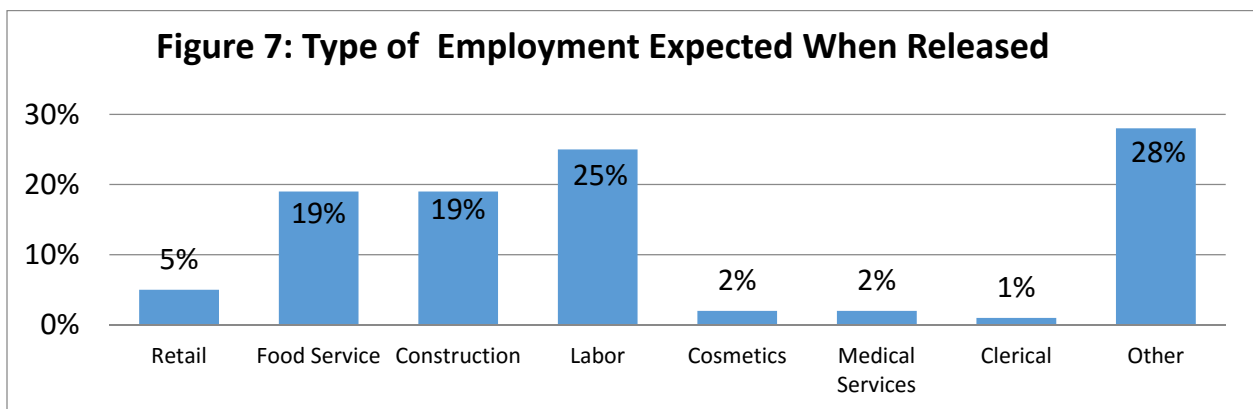
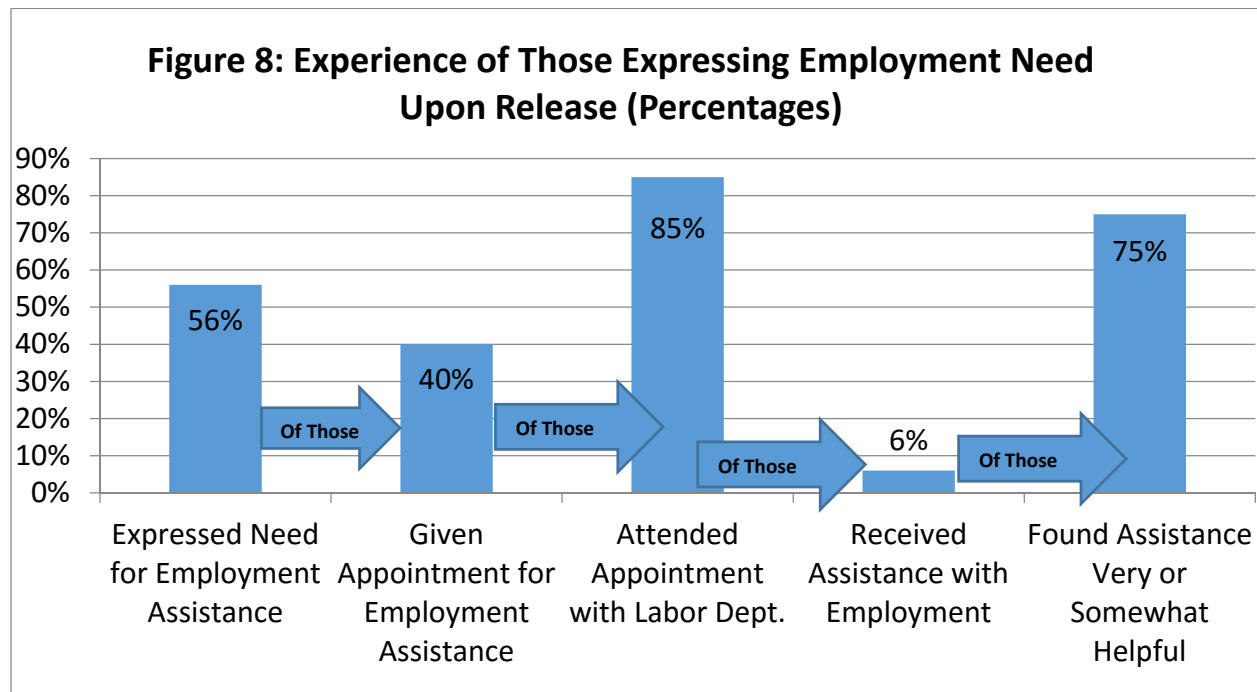


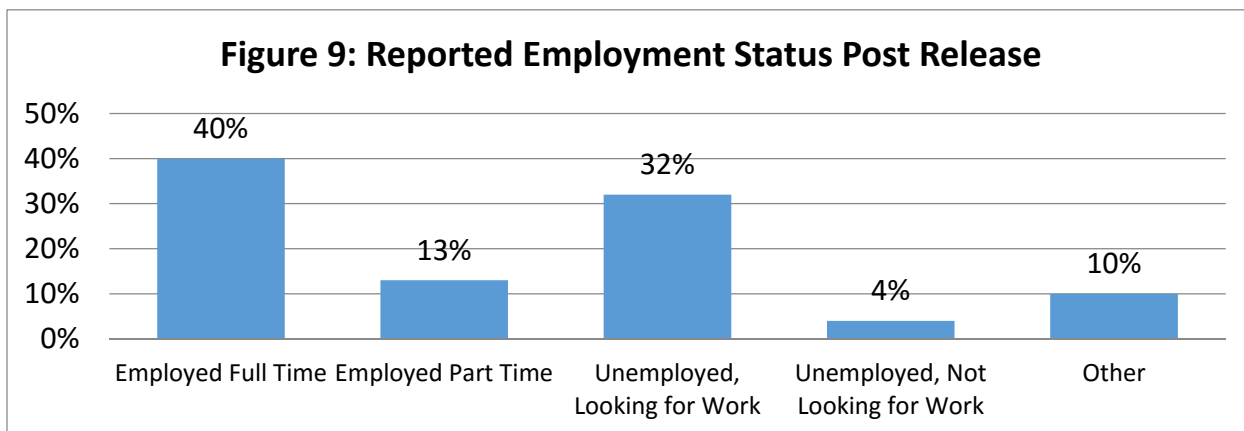
Figure 8 reports on the survey questions relating to post release experience with I-ADAPT assistance. Fifty-six percent of respondents expressed need for employment assistance, and of those 40% percent received an appointment. Eighty-five percent of

individuals who had an appointment presented at DOL. Of those, only 6% reported receiving employment assistance. This gap may represent more of an anticipation gap than a service gap. In interviews and in casual conversations with I-ADAPT participants, many felt they would receive a job if they went to DOL. The Dept. does not provide jobs however, but rather links people to training and to Job Link, which can be used to link employers to persons seeking employment. In spite of repeated and continuing efforts in the informational sessions, the perception among I-ADAPT participants that DOL will provide them with jobs remains, as evidenced by the survey results. It should be noted that among those who stated they received assistance with employment, 75% reported the assistance was helpful.



While Figure 8 reported on the service experience of I-ADAPT participants, Figure 9 shows their reported employment status upon release. Fifty-three percent of respondents reported being employed post release, with 40% reporting full time work. Prior to being incarcerated, 13% reported being unemployed and not looking for work (see figure 5), but post release only 4% indicated they were not working and not looking for work. The increase in percent employed post release versus the percent pre-incarceration coupled with the decrease in those not even looking for work indicates that people exiting prison are making efforts to improve their life chances upon returning to the community. Still, the percent who are unemployed both prior to and after a period of incarceration is troublingly high. An unemployment rate above 30% among a group of people in an area in which unemployment is

typically in the 4-6% range speaks volumes in terms of both why people end up in prison in the first place, and why they come back.



Qualitative interviews with respondents echoed what is shown in the survey data. All expressed the need for employment upon release and expressed an eagerness for training and employment assistance. Respondents reported needing employment training and assistance from employment specialists for help in obtaining jobs. Many interviewed clients clearly stated they felt I-ADAPT should provide or have jobs available for people with records. Others requested bonding and direct contacts/formal introductions to employers willing to hire previously incarcerated persons to prevent interviewing with employers who do not hire ex-felons and then feeling set up to fail. Interview respondents noted that DOL appointments were particularly problematic for people on house arrest, suggesting a need for better communication with POs. Those who had participated in Level V work programs felt the experience would help them find jobs upon release. Regarding direct I-ADAPT related DOL services some clients reported feeling as though I-ADAPT helped keep them on track and motivated to look for a job; however, these comments were typically followed by a desire for more assistance and for jobs upon release. Indeed, one of the most common requested services by respondents was for direct employment assistance. As one client emphasized “People who come out have nothing. If given nothing, they will return to what they did before they were locked up.”

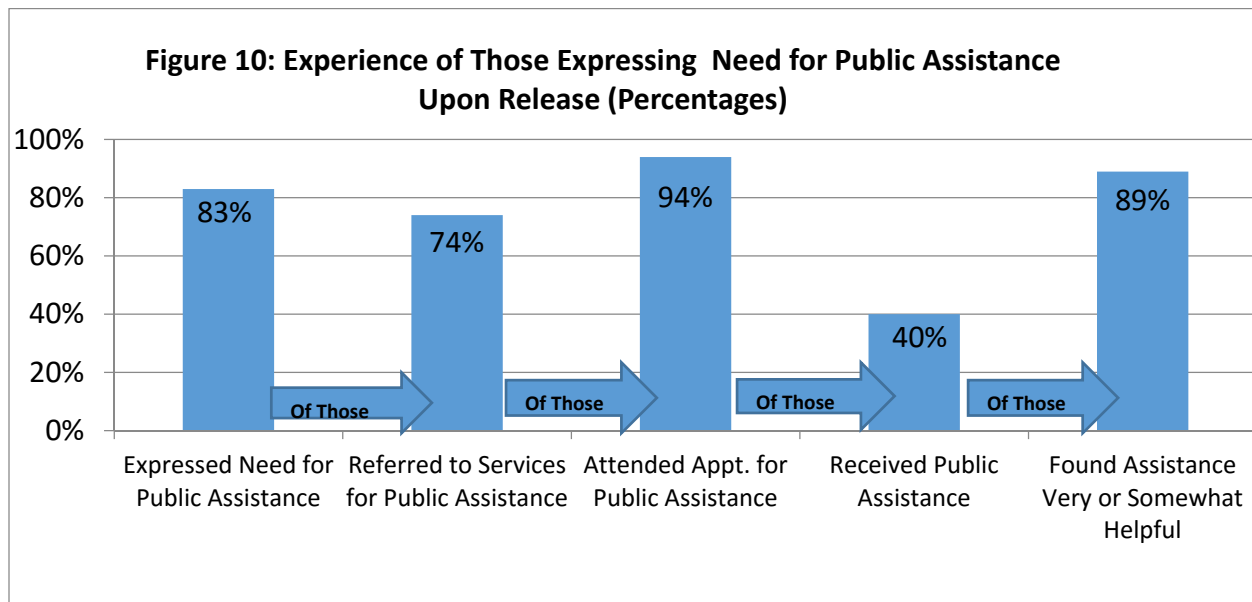
The overall picture presented from the combined data sources is that people exiting prison want to work. I-ADAPT is fulfilling its mission of making people aware of available services. Level V services are being accessed, although there is clearly a need for more training while at Level V. Post release linkage to employment suffers from a communication gap as people still hold the impression that DOL will “get” them a job. The multiple barriers resulting

from lack of skills and employment history, possession of felony records, and transportation, coupled with the fact that many of those returning from prison are returning to areas with depressed job opportunities indicates that employment will remain a significant barrier to successful reintegration for some time. Still, I-ADAPT's ability to raise awareness, provide training and link those who make the effort to access available services indicates that it is fulfilling its mission to increase available services.

### **Social Services (Food Stamps and Medicaid)**

I-ADAPT has made substantial progress in linking returning individuals to eligible services upon release. Currently, Medicaid and food stamp benefits are terminated when someone is incarcerated. The I-ADAPT team has put in place a process in which participants fill out application forms for food stamp benefits and Medicaid when they complete their I-ADAPT enrollment paperwork and needs assessment. The pre-enrollment enables participants to have benefits turned on 24 to 72 hours post-release by calling the DHSS contact included on his/her transition plan. While specific counts are unavailable, DHHS reported that 98% of those that apply for Medicaid are approved and 80% of those who apply for food benefits are approved. Approximately 20% of those who filled out the prerelease applications never called to have the benefits turned on after release.

Turning to the survey data, most clients who commented on receiving social services including food stamps and Medicaid reported being impressed with the smooth and swift process. As Figure 10 depicts, 83% of respondents expressed the need for some form of public assistance upon release. Of those 74% reported receiving an appointment and 94% of those presented for the appointment. Forty percent of those presenting received some form of services and 89% of those found the services somewhat or very helpful. Part of the high number needing benefits is a result of the employment situation shown above. Those needing public assistance were more likely to receive services than other need areas such as employment or educational services. This is in part due to the nature of the service. Those eligible for food stamps or TANF need only present and sign up and they receive benefits, whereas other types of assistance are more involved and ongoing. It is unclear from the data why 40% of those attending appointments received assistance, but most likely they were found to be ineligible. It was also reported by DHHS that approximately 20% of released I-ADAPT individuals never called to turn their benefits on. This indicates a possible domain in which more hands-on case management may benefit the transition process.



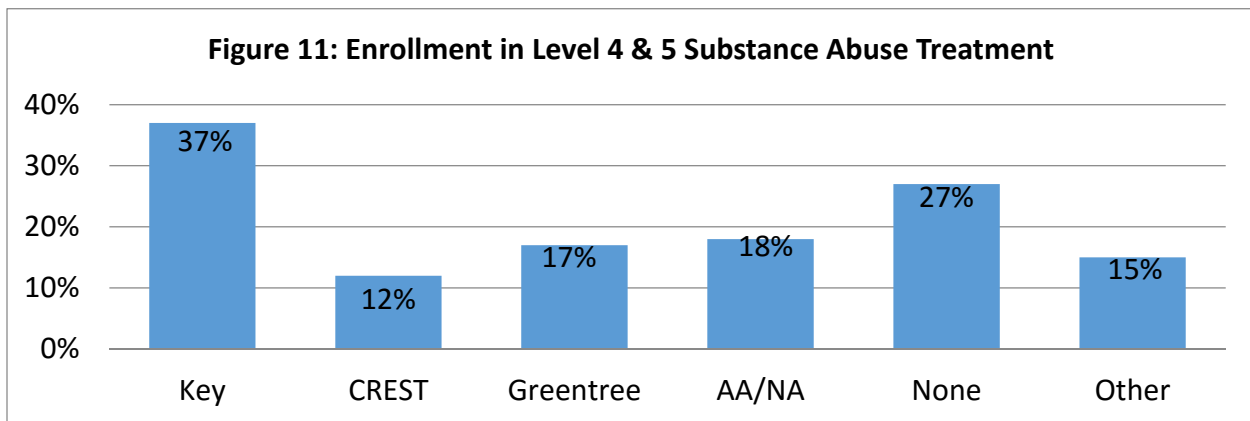
While the survey data indicate overall satisfaction with the public assistance process, qualitative interviews found that some clients reported not knowing how to go about turning on their food stamps, and a few clients reported going to the social service office to start the application process and were frustrated because personnel at the social services office gave applications to fill out with little assistance; in these cases, clients seemed unaware that benefits were supposed to be turned on via a phone interview with the contact person designated on the client's I-ADAPT transition plan. Clients who did not have a telephone with voicemail in order to receive a return phone call from social services also reported difficulties in activating their benefits.

I-ADAPT's efforts at informing participants about how to activate services is having an impact on the ability of those returning from prison to access eligible services quickly upon release. The process will benefit from proposed regulation changes that will suspend, rather than terminate, benefits when a person becomes incarcerated.

### Drug Treatment

The relationship between substance abuse and incarceration is well known, and Delaware inmates report high rates of abuse and addiction. DOC has attempted to respond to the needs of those in their care by offering a variety of drug rehabilitation programs, ranging from the flagship KEY and CREST programs to Greentree and twelve step support groups. A full 73% of survey respondents reported accessing some form of substance abuse treatment

while incarcerated at Level IV or Level V. Eighteen percent indicated they had attended more than one type of program. KEY had the highest reported attendance. Survey respondents may have been involved in the KEY earlier in their sentence, or may be reporting involvement from another sentence (the questions specified treatment attended during the current sentence). Regardless, many I-ADAPT participants are accessing substance abuse treatment during their incarceration. Ongoing efforts by DOC to incorporate the Risk Needs Responsivity tool into program and individual assessment will continue to increase DOC’s ability to properly match persons to the appropriate treatment while incarcerated and eventually during the reentry process.

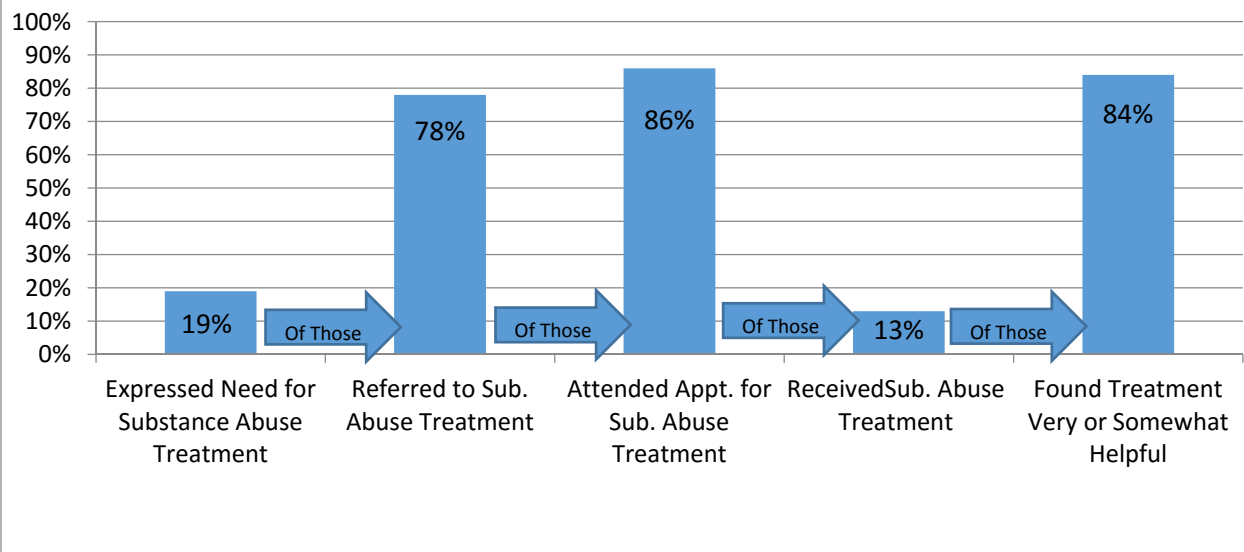


No figures were provided on substance abuse treatment received after release, due to community substance abuse treatment being largely administered by privately run programs. Nineteen percent of survey respondents indicated a need for post release substance abuse treatment, and of those 78% were referred to services. Of those referred, 86% attended the referral appointment and 13% of those received treatment. As with other service provisions, the survey was unable to determine what services were received, or why only 13% reported receiving services. Still, 84% reported the treatment as being helpful.

Drug treatment was only discussed in one respondent’s qualitative interview. He reported seeking AA out on his own without prompting or assistance from I-ADAPT.



**Figure 12: Experience of Those Expressing Need for Substance Abuse Treatment Upon Release (Percentages)**



## Housing

Homelessness or housing instability is a common challenge individuals face when released from DOC custody. Financial limitations, public housing bans, discrimination by landlords, and occasionally legal restrictions greatly limit housing options for convicted felons. Participants, especially sex offenders and those who hoped to live with their children, reported difficulty finding housing and feeling I-ADAPT needed more comprehensive housing services available for participants. Participants frequently are unaware of public housing restrictions against convicted felons or think that such bans mean they are never eligible for housing assistance through state agencies; few are aware of public housing policy, waiting lists, or how to petition for a negative housing decision to be reconsidered.

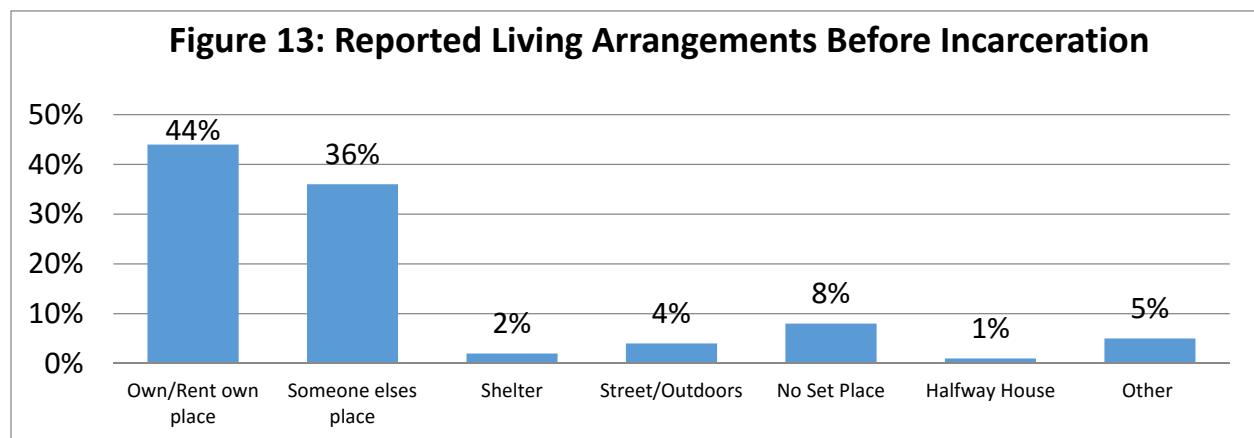
The addition of a DSHA I-ADAPT housing coordinator/case manager via a Second Chance Act grant award has greatly increased housing-specific case management, and I-ADAPT workgroup members report the DSHA I-ADAPT housing coordinator/case manager has greatly improved the housing circumstances of I-ADAPT clients. The I-ADAPT housing coordinator meets with participants with housing needs, discusses their potential housing options and barriers to re-entry, and collaboratively develops a housing plan including budget pre-release with the participant, community-based housing providers, and DOC if the client is under supervised release. Financial assistance made available recently via the SCA grant helped some participants access housing. The personalized one-on-one housing case

management and development of a housing transition plan pre-release coupled with financial assistance to reduce housing barriers is one of the strongest components of the I-ADAPT process. Despite the positive impact I-ADAPT services have made on participant housing needs, many participants continue to face homelessness and unstable housing. Additional housing resources, both within the I-ADAPT process and in the community in general are greatly needed.

Stable housing is a known national barrier to people returning to communities after periods of incarceration, and Delaware is no exception to this problem. Along with employment assistance and case management, housing was a frequently referenced need among respondents in interviews.

Data from the Delaware State Housing Authority are not available for the entire period I-ADAPT has been in effect. A Second Chance Act grant allowed DSHA to hire a person who was able to track efforts implemented through the grant. DSHA provided 174 financial aid grants in 2015-16. These were made throughout the state, with 47 being made in Sussex County, 42 in Kent, 57 in the City of Wilmington and 27 made in New Castle County outside of the city. Forty-seven awards were for crisis housing, usual for a brief hotel stay in a crisis situation. The largest category of assistance was for rental assistance, with 111 rental awards being made. Most of these were for rental stays at sobriety houses such as Oxford Houses. A total of \$125,565 in awards were made.

Turning to the survey data, Figure 13 shows that 44% of respondents reported living on their own prior to incarceration. Figure 14 shows that this figure is cut in half to 22% post release. Most of that difference is made up by reportedly living at “someone else’s place”, which increased from 36% prior to incarceration to 59% after incarceration. Incarceration is clearly destabilizing many of those who go to prison.



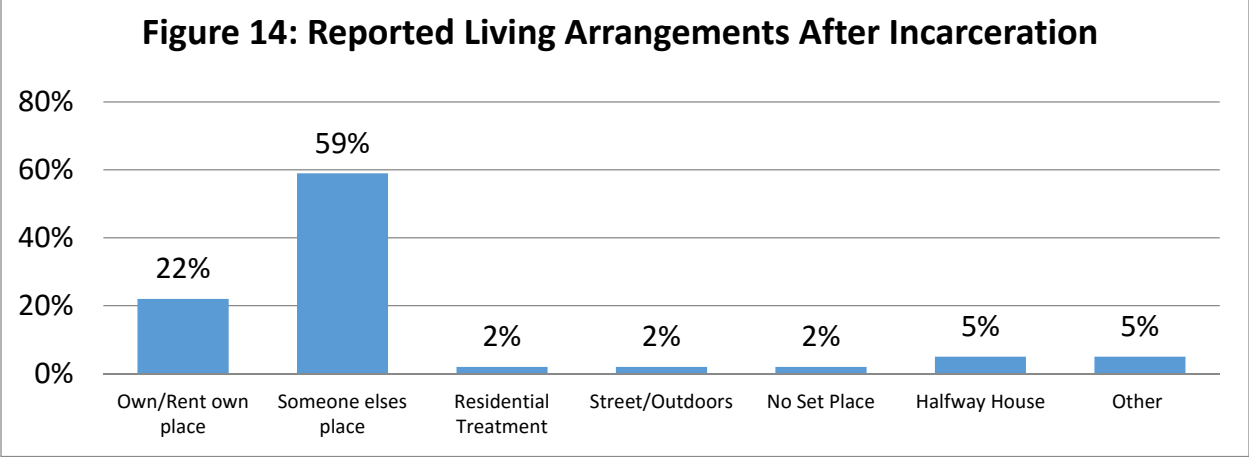


Figure 15 shows who respondents were living with post release. Twenty-six percent of respondents reported living with a parent. When other family members are included, 50% of those released were relying on family members for housing upon return from prison. Twelve percent reported living by themselves, with another 16% reporting living with a spouse or girl/boyfriend. Ten percent responded “other,” which likely represent those who reported living in a halfway house, treatment or being homeless in Figure 14. Figures 13 through 15 in combination indicate that the housing situation of formerly incarcerated persons is unstable and has likely gotten worse post incarceration compared to prior to incarceration. (It should however be noted that their pre-incarceration living situation did not prevent them from becoming incarcerated).

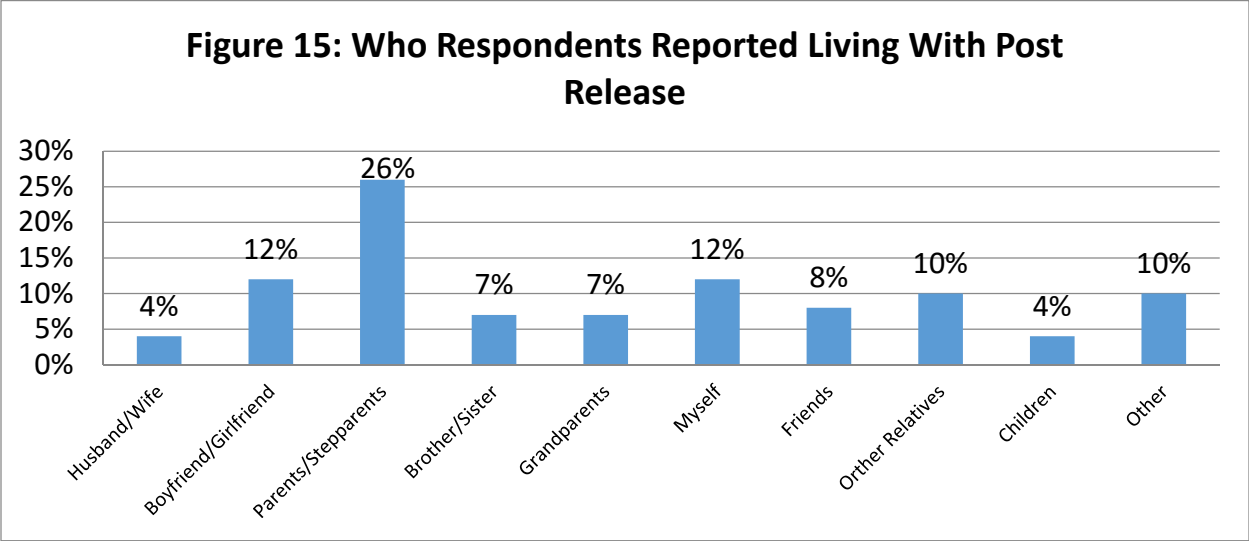
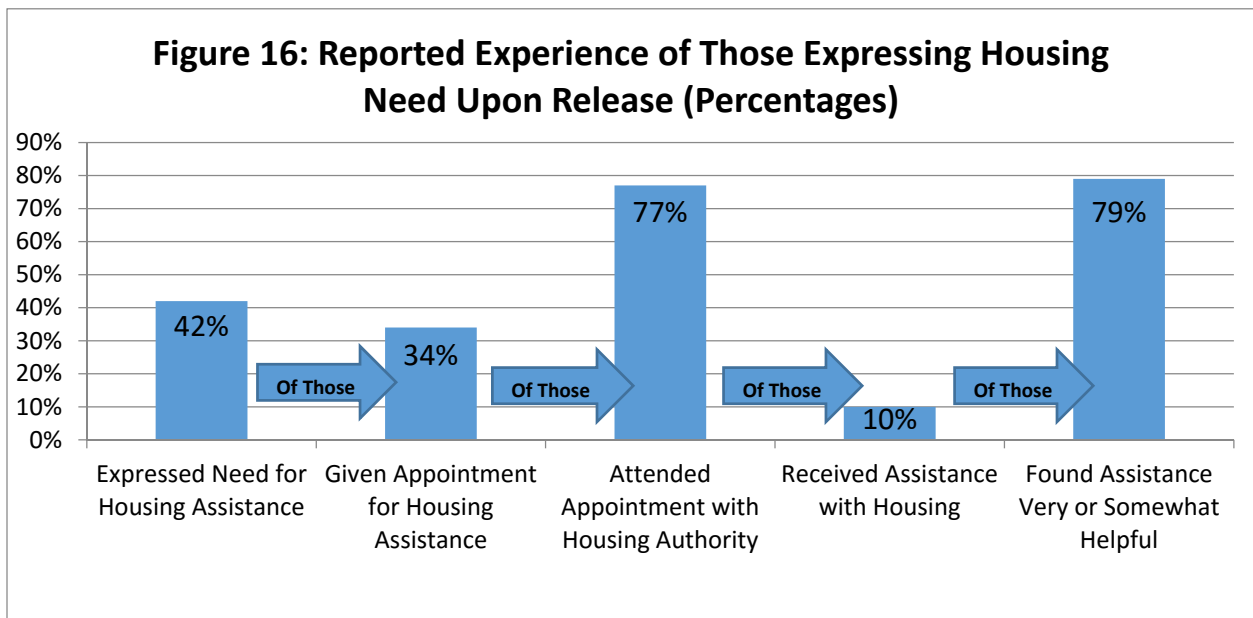


Figure 16 show the reported experience of those who expressed a need for housing on the post release survey. Forty-two percent of respondents expressed a need for housing assistance. Thirty-four percent of those were given an appointment and 77% of those reported they kept the appointment. As with other domains, only 10% reported receiving assistance. As also noted in other domains, this likely results from expectations and eligibility concerns. Seventy-nine percent of those who received assistance reported that it was helpful.



In the qualitative interviews, some returning persons reported being homeless, living in shelters, or not receiving housing assistance. Some sought housing independently and received services from Sojourners, Harriet Tubman Safe House, St. Vincent DePaul, and Oxford House. Some clients requested housing assistance via halfway houses or residential re-entry centers. Male clients with families reported particular difficulty in finding emergency housing since shelters for men often do not allow children and family shelters often do not accept men. Sex offenders reported great difficulty finding housing. Many housed clients reported instability in their housing situations, that their residence was overcrowded or toxic, and/or that available shelter was in high crime and drug areas, which they felt negatively impacted their chances of staying out of prison. While commenting on lack of housing assistance, one client indicated that people are afraid to go to transitional housing options because they are afraid of crime, stating that some would rather live on the streets. As in other domains, housing transition is an area in

which more hands-on case management would likely benefit people attempting to navigate the transition from prison to the community.

## Official Documents

Law and policy changes since the beginning of I-ADAPT development have resulted in participants being eligible for forms of public assistance that they were previously banned from receiving. I-ADAPT participants now are able to pre-register for food stamps and Medicaid assistance when they fill out the process enrollment packet; although benefits cannot be activated for a participant pre-release, I-ADAPT participants are pre-registered before release, given the contact information of the person who turns benefits on for participants post-release, and instructed to call the provided contact as soon as possible after release for a phone interview required to turn on benefits. This process greatly speeds up activation of food stamp and Medicaid benefits for I-ADAPT participants who contact DHSS's representative in charge of turning benefits on. However, some participants report delays in benefit activation.

Some participants reported they were not provided the benefit activation information because they were not given their transition plan upon release; these participants sometimes attempted to activate benefits by going to a local social service office but report frustration because the DHSS representatives at the service centers were not familiar with the I-ADAPT process and who they were supposed to contact. Participants who went to local social service centers instead of calling the designated DHSS contact were often given new enrollment packets resulting in participants giving up on trying to activate benefits or in a new non-I-ADAPT related case being opened in the DHSS system. Some participants report calling the DHSS representative designated to turn on benefits but that they had to leave a message but did not have their own phone number or a phone with voicemail to receive return calls and information.

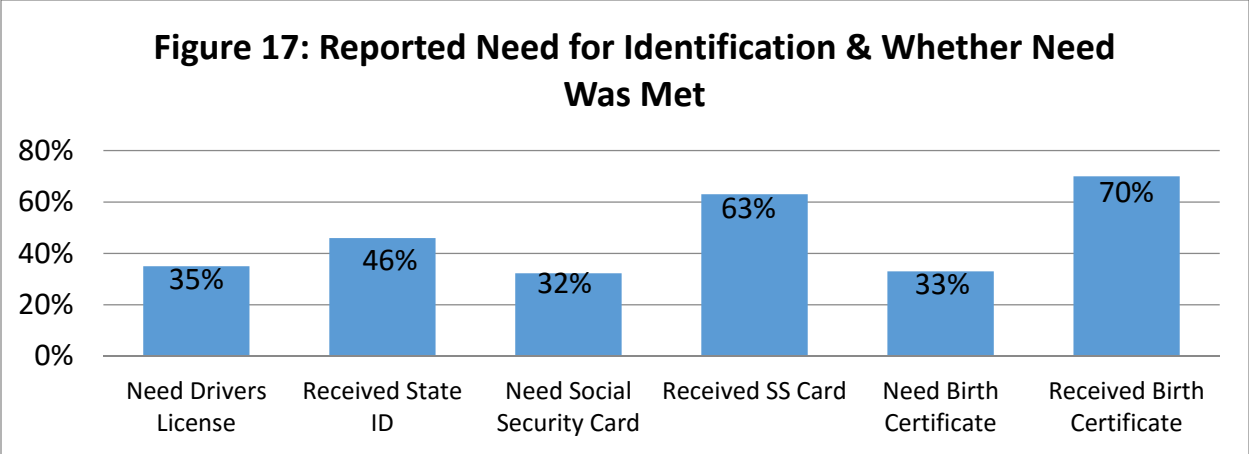
Problems with food stamp and Medicaid benefit activation seem to stem from unclear communication of post-release processes for obtaining benefits through I-ADAPT channels, failure of some participants to receive a transition plan post-release with the proper contact information, and/or participants not calling DHSS's designated benefits coordinator, not leaving the required information on DHSS's voicemail, and/or not having a telephone to receive return calls and voice messages. Some I-ADAPT coordinators have attempted to mitigate these issues by scheduling a set time for participants to call the DHSS's designated benefits coordinator to avoid the need for leaving voicemails, calling the DHSS contact with the participant in order to provide moral support and ensure the application process is completed.

Obtaining a state issued photo ID, a copy of one's birth certificate, and a copy of one's social security card are essential first steps in the reintegration process and are a primary focus of the I-ADAPT re-entry process. Interagency collaborations and MOUs have made obtaining pre-release documentation possible for I-ADAPT participants. Many participants receive legal documentation upon release at no cost, which reduces barriers to obtaining housing, employment, and/or social services; however, some participants (particularly those who have many aliases, inconsistent names or birth dates on their documentation, or who were born out of state) may be denied documentation by the issuing agencies and required to apply in person after release. Receipt of a state ID requires that a recent (within 7 years) photo of the participant be on file with the DMV. I-ADAPT has arranged for a mobile service center to visit Level-V institutions throughout the state in order to update participant photos in the DMV system; however, the mobile service center does not service two of the four prisons, due to parking and access issues. At Level IV facilities, the mobile service center is able to access the Morris Community Corrections Center on an as-needed basis and plans are under way to begin accessing the Plummer Correctional Center in the Spring of 2017. Birth certificates are only available via the I-ADAPT process if the participant was born in the state of Delaware.

I-ADAPT coordinators reported that documentation procured by I-ADAPT were frequently not picked up by participants. Clients frequently expressed confusion about what documentation they were eligible for and where and when to get documentation from I-ADAPT. Improved communication of process capabilities and processes (including those for pick-up of documentation) is needed.

As of August 2016, 271 persons had received social security cards, 1,848 had received state ID cards and 1,389 received birth certificates.

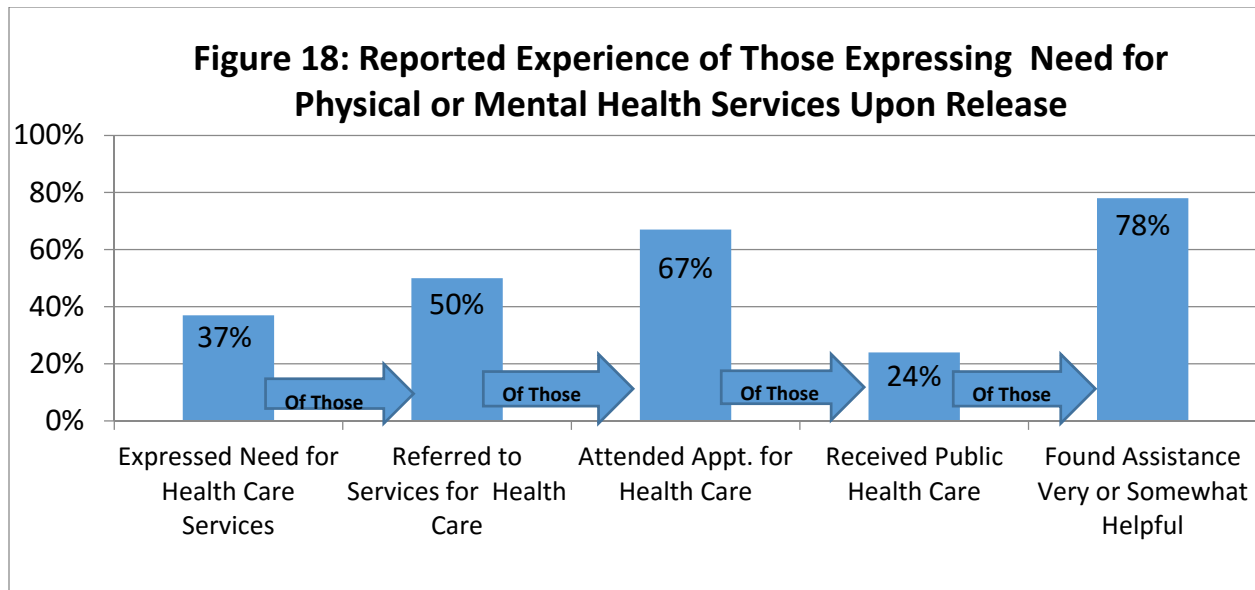
Approximately one-third of survey respondents reported they needed some form of Identification. Of those, 46% reported receiving their State ID, 63% reported receiving a Social Security card and 70% of those reporting a need stated they received their birth certificate.



In qualitative interviews, a large portion of respondents reported receiving assistance in obtaining official documentation such as state IDs, social security cards, and birth certificates. Most reported receiving needed applications and documents without issue; however, there was some confusion of *how* and *when* clients were to receive identification documents, and some people reported having their IDs or applications lost or receipt delayed during transfers or release.

**Health/Mental Health**

While I-ADAPT was not designed specifically to deal with medical issues during transition, many of those returning from prison present a host of physical and mental health issues. The survey asked about health issues and the results are presented in Figure 18. Thirty-seven percent of respondents expressed a need for some form of health services upon release. Of those, 50% were given an appointment and 67% of those attended the appointment. Of those who attended an appointment, 24% reported receiving care, and 78% of those who received care found it helpful.



Interview data revealed that returning persons face considerable stress and many are also dealing with psychological trauma from victimization, losing loved ones, etc. Although clients reported receiving Medicaid, counseling, and other social services, many clients expressed the need for more adequate mental health services. Clients reported seeking help for conditions on their own and feeling that additional screening and services are needed during their transition period. Additional assistance from case managers to help coordinate treatment and services were requested to help manage stress. Women reported needing women’s health care services during the transition period before Medicaid benefits start.

### General Commentary from Qualitative Interviews I-ADAPT Participants

Although some respondents reported finding resources and references from I-ADAPT to be helpful, others reported that they only received phone numbers but needed help setting up appointments, knowing what to expect and what to ask, following-up, and understanding the process of receiving assistance from various agencies. Clients requested case managers, in addition to referral phone numbers, to help guide them as they navigate the various available services and partnered agencies. Some respondents indicated not understanding what services I-ADAPT can assist with while others reported not receiving clear guidance on *how* to receive assistance (“Seems they are only concerned with telling you what is available, and not telling you how you can utilize the services”). For instance, some respondents stated they knew I-ADAPT would assist them with obtaining an identification card and social security card, but reported they were not told when and where they would receive them. Responses from clients



indicate that they at times received conflicting information from different sources. Respondents report wanting more information earlier in the release process and indicated a desire to work on education, employment, and housing issues *while incarcerated* as much as possible to reduce the urgency and uncertainty upon release.

Suggestions to improve communication of information include more frequent pre-release visits from I-ADAPT personnel, clearer written and oral explanations of what services I-ADAPT can assist with (including eligibility requirements and exclusionary policies) and what forms of assistance one should expect from I-ADAPT, and earlier and continued communication of information and referrals to partnered agencies. Many respondents requested face-to-face, one-on-one meetings pre-release with assigned case managers to discuss their re-entry needs, concerns, and plans. Requests for personalized help backed by resources was the most commonly requested resource.

Many clients reported difficulties making it to all of their re-entry related appointments because they did not have adequate transportation and the appointments are located at multiple locations. Participants suggested that 1-stop I-ADAPT offices located in each county to provide centralized appointments and services, including probation, I-ADAPT coordination, treatment services, and peer mentoring and support groups would greatly benefit them. Clients who had access to centralized services stated that having services in one location made receiving assistance convenient and less stressful.

### ***Compliments/What Works***

Many respondents reported feeling happy and impressed overall with services received from I-ADAPT: “feels process keeps a person on track,” “keeps you motivated to keep looking for jobs,” “did not leave you stranded,” “process is solid,” “the plan is simple; if you follow it, everything can fall into place”. Respondents frequently provided positive feedback in reference to obtaining birth certificates, ID’s, and bus passes. DHSS was identified for being very helpful to clients.

Additional resources are needed to assist I-ADAPT personnel in providing effective re-entry services. Clients requested to be involved in developing and executing their transition plans collaboratively with case managers through one-on-one interactions pre- and post-release, that greater emphasis be placed on communicating *when* and *how* services can be accessed and what to expect, and that information and referrals be paired with services such as felon-friendly housing and workforce development services.

## Participant Respondent Recommendations

Listed below are frequent participant recommendations for improvement of I-ADAPT services:

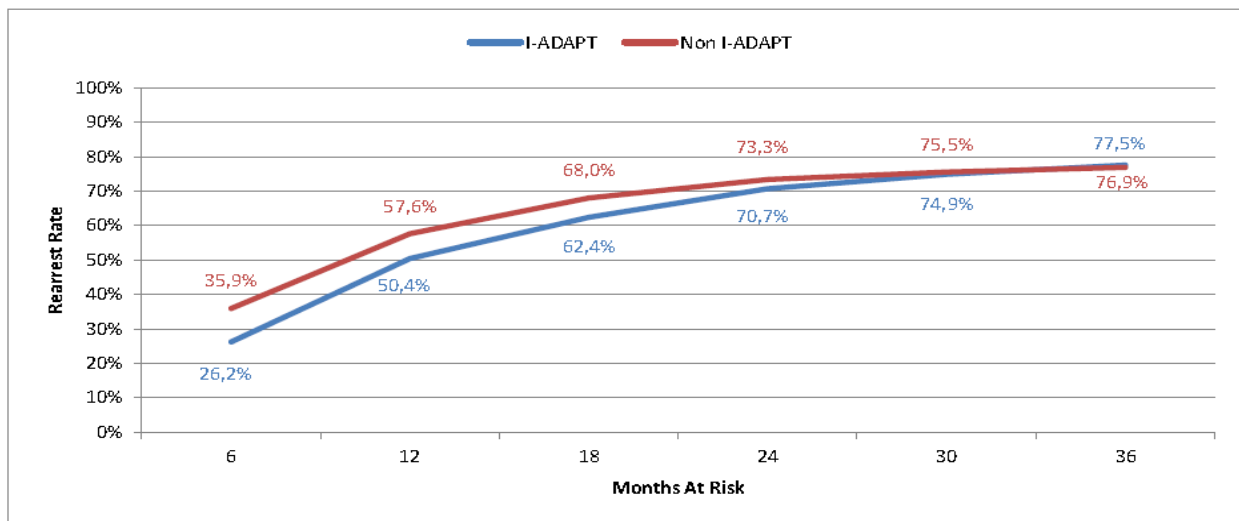
- Employment assistance
  - Connect clients with an employment specialist to assist with obtaining jobs
  - Bond I-ADAPT participant
  - Provide participants with job training, education, and trade school opportunities
  - Provide work-appropriate clothing allotment
  - Provide participants with jobs, referrals to 'felon friendly' employers, and formal introductions to hiring managers
  - Establish partnerships with temp agencies and trade schools to provide participants with training and employment opportunities
- Communication and Rapport
  - Increase resources and personnel; provide additional case management
  - More clearly communicate what I-ADAPT can and cannot do to help
  - More clearly explain when and how participants will receive identification, referrals, and assistance
  - Increase pre-release interactions and rapport between participants and I-ADAPT staff/a case manager
  - Increase post-release follow-up check-ins from I-ADAPT personnel
  - Improve collaborations and communication between probation and other agencies
  - Educate partnered agencies of ex-felons', particularly sex offenders', needs and limitations/restrictions
  - Increase frequency and quality of communications between participants and I-ADAPT staff; provide case managers
  - Initiate more frequent, hands-on and personal interactions
  - Provide reminders of appointments
- Housing
  - Provide transitional housing assistance in the form of residential reentry centers and family transitional housing units
  - Assist in receiving public housing in a timely manner
  - Provide assistance in obtaining sufficient deposits
  - Provide additional assistance to place sex offenders in stable housing

- Provide regular pre- and post-release reentry workshops
  - Establish peer mentor process and/or life coach process
  - Set up computer labs and training workshops
  - Provide money management workshops
- Centralize services in one-stop service centers or provide transportation assistance between interviews and social service, health, and treatment appointments
- Provide comprehensive, holistic care, including counseling
- Arrange for post-release medical, mental health, and dental care during the transition period before Medicaid or other insurance coverage begins
- Assist participants in obtaining a driver's license

### Recidivism

No randomized controlled trial of I-ADPT has been conducted, nor could one be due to the varied nature of services received by I-ADAPT participants. As noted in the beginning of this report, I-ADAPT is not and should not be considered a “program.” Nor should it be assessed as such. However, the Delaware Statistical Analysis conducted an evaluative assessment of 336 I-ADAPT participants’ rates of recidivism compared to a group of 675 non I-ADAPT individuals released in 2011. It should be noted that I-ADAPT has changed substantially since 2011, resulting in greater service access.

Figure 19: Arrest Rates for a Sample of I-ADAPT vs. Non I-ADAPT 2011 Releases



Source: Recidivism in Delaware: An Analysis of Prisoners Released in 2009 through 2011. The Delaware Criminal Justice Council, Statistical Analysis Center. October 2015.

Figure 19 may indicate (and the findings should be interpreted with caution for reasons stated in this report and in the report from which Figure 19 was taken), is that participation in the I-ADAPT process may be associated with lower rates of arrest in the first two years post release. The difference in arrest percentages between I-ADAPT participants and a comparison group of almost 10% at six months decays over time. This is not unexpected. I-ADAPT is designed to provide services during the period of transition from prison to the community. To the extent that released persons are accessing services (and this report demonstrates that they are), those services are providing some level of assistance during the transition period. Still, the myriad issues and concerns facing individuals returning from prison, including those that led them there in the first place, are not likely to be overcome by the ability of persons to access I-ADAPT services upon release. Overcoming these issues is not a task that I-ADAPT alone can overcome, nor should it be assessed by its ability to do so.

## **Conclusions and Recommendations**

A list of specific recommendation is provided below. First, we offer some thoughts about case management, and then provide some general concluding thoughts and several overall recommendations.

### **Case Management and Access to Service Providers**

It is imperative for the success of I-ADAPT and other corrections and re-entry processes for workgroup members to work to improve communication and trust with other team members and the participants. I-ADAPT workgroups typically work collaboratively, and regular interactions and information sharing has improved inter-agency collaborations and provision of services for participants. However, participants frequently report feeling uninformed, wanting more pre- and post-release one-on-one case management interactions with I-ADAPT workgroup members, and let down by the process or lost in the system—often due to miscommunications of what the process will provide them and how (especially since services are not uniformly available to participants), infrequent contacts, and/or because of delays in file and documentation transfers when participants transfer from one county to another.

Miscommunication of and participants feeling let down by the process could be reduced with more frequent pre-release one-on-one interactions and better communication including which services a participant will receive or is deemed ineligible for and why, expectations of participants, and clear steps for activating I-ADAPT benefits and picking up transition plans and official identifications. Many participants never pick up their transition plan and official documentation and some report not knowing when or from whom they are supposed to receive

these items. This is especially true for those who go to a Level IV work-release facility. Movement between institutions and counties can result in miscommunication of information and a breakdown in receipt of information and services for some participants. DOC is aware of the issue and is working to improve the flow of information when people move from Level V to Level IV and eventually home. Additionally, efforts are underway to begin holding I-ADAPT workshops at Level IV. As of the Fall of 2016, workshops were being held at the Sussex Correctional Center.

Post-release contacts are sometimes difficult in the community, especially when service providers have large caseloads or participants do not have telephones; therefore, post-release contacts are typically participant-initiated on an as-need basis, yet few participants in need reach out to I-ADAPT post-release. Many inmates and probationers do not trust DOC and other agency representatives due to past experiences and input from others, which reduces I-ADAPT enrollment, engagement in the available services, and communication of participant needs. Improving pre-release interactions with participants through more frequent, positive, one-on-one interactions may help develop greater rapport between participants and I-ADAPT, encouraging participants to maintain engagement post-release. Positive interactions and outcomes for current participants can greatly influence potential participants' likelihood to enroll and engage in I-ADAPT.

In addition to improving participant perceptions of I-ADAPT, buy-in from staff at involved agencies is important. Currently, I-ADAPT and rehabilitative measures to improve re-entry are not substantially part of the culture of DOC or other partnered agencies, and disconnects between intra-and inter- agency efforts exist. Greater involvement of more I-ADAPT agency personnel in the process, or at least more awareness of I-ADAPT among non-I-ADAPT personnel in the partnered agencies, would also greatly improve process outcomes. For example, increased involvement of communication between I-ADAPT and DOC probation officers and correctional staff to promote information sharing and possible collaboration on mutually beneficial initiatives would help foster a continuum-of-care and increase referrals of those in need of I-ADAPT services to facilitate successful re-entry. The I-ADAPT process will be most successful when all pre- and post-release DOC and partnered agency staff are fully aware of I-ADAPT's services and promote engagement in the process.

### **Concluding Thoughts**

I-ADAPT team members have been working to craft a system of service delivery for reentering individuals. The process was unique because it was allowed to grow organically from

the recommendations of those working in the field for each agency, rather than through top-down directed policies originating from the administration. Through an ongoing process, the I-ADAPT oversight team has identified areas in which their agencies can offer assistance to returning individuals and adapted to better provide services to those individuals. Now that the I-ADAPT process and management issues have largely been worked out, the process should be formalized in agency directives and possibly through legislative action.

It should be stressed again that services such as those provided by I-ADAPT are not likely to initiate a change in lifestyle or in the offending patterns of released persons. Rather, things like employment, housing, education, and social services should be viewed as buttressing the likelihood of success for persons who have made up their mind to change their lives and patterns of behavior. A long line of research literature suggests that people will not change behavior patterns until they decide to do so. Long term drug treatment and other rehabilitation programs are designed to encourage incarcerated people to make these lifestyle changing decisions and to provide them with tools to make better decisions upon release. Without such a decision, it is unlikely that obtaining employment or housing or education will keep someone committed to returning to "the life" from doing so. Similarly, returning individuals who have decided they want to change their lives and desist from criminal behavior are less likely to succeed without adequate education, housing, employment, and other social services supporting their efforts for change.

The Delaware Department of Corrections houses numerous programs designed to change offender thinking patterns. One way of improving the success of these programs would be a streamlined mechanism in which persons participating in DOC programs were linked to I-ADAPT services before and after release, buttressing the effect of programs by providing a more stable transition from prison to the community.

Lastly, one of the findings from the I-ADAPT survey was the difficulty I-ADAPT participants had following up on post-release services. The period of time directly following release to the community is one of turbulence. Newly returning individuals face a host of responsibilities, appointments, and demands on their time, all at a time when they are reuniting with family and friends. As a result, many do not always find their way to available services, or fail to follow up or take advantage of what is offered. A more structured type of case management, ideally provided by mentors who have experienced reentry process themselves, would assist reentering individuals as they navigate this tumultuous period of their lives.

## Specific Recommendations

- Community Collaborations
  - Develop and maintain community partnerships via regular (monthly or quarterly) meetings to be attended by community-based organization representatives as well as I-ADAPT coordinators.
  - Include community partnership representation in each I-ADAPT workgroup.
  - Incorporate input from community representatives who have been previously incarcerated.
  - Develop, update, and disseminate resource guides to participants and community organizations.
  
- Enrollment
  - Increase Level-V personnel and resources for I-ADAPT enrollment.
  - Provide one-on-one enrollment assistance for eligible participants who have reading or comprehension limitations.
  - Improve process reputation among inmates, probationers, and staff to encourage process enrollment.
  - Provide clear information during enrollment about the abilities, limitations, and expectations of I-ADAPT.
  
- Documentation
  - Increase mobile service center bus's access to all DOC facilities to increase number of participants who are able to receive state IDs upon release.
  - Provide participants who were not born in the state of Delaware printed information about how they can independently go about obtaining a birth certificate from their state-of-birth.
  - Inform each participant by writing if he/she is deemed ineligible for a copy of his/her birth certificate, state ID, or social security card, explaining why and how he/she can go about obtaining the documentation independently post-release.
  - Clearly inform participants about *when* and *how* they will obtain I-ADAPT provided documentation, including who from and where they must obtain the documentation.

- Education and Vocational Training
  - Increase education and vocational training opportunities within Level-V facilities.
  - Expand education and vocational training opportunities to Level-IV facilities.
  - Assess educational and vocational needs of each inmate upon intake and develop an education plan early to prepare inmates for release.
  - Increase availability of computer skills training classes.
  - Develop re-entry education and support classes to provide additional information to participants and foster a community of support for those returning to the community.
  - Increase communication and transition assistance for participants as they transition from Level-V and Level-IV facilities to the community.
  
- DOL Career Counseling and Development
  - Increase pre-release engagement between participants and DOL I-ADAPT representatives.
  - Clearly communicate need for participants to self-identify as I-ADAPT participants when reporting to DOL for services so they can be paired with the I-ADAPT representative and receive one-on-one assistance.
  - Increase in-reach of DOL I-ADAPT representatives into Level-V facilities by regularly attending monthly pre-release workshops, allowing for pre-release rapport building and regular information dissemination to participants.
  - Improve service provision to participants in Level-IV work-release facilities by starting basic computer skills classes, assessments, and resume building exercises pre-release.
  
- Housing
  - Continue working one-on-one with participants pre-release to develop individualized post-release housing plans.
  - Secure additional funding to continue providing financial assistance to help reduce housing barriers for participants.
  - Provide transitional housing assistance in the form of residential reentry centers and family transitional housing units.
  - Work to expand housing options in the community for sex offenders, women, and participants with families.



- Educate participants about public housing waiting lists, application procedures, and how to petition for a negative housing decision to be reconsidered.
- Social Service Benefits
  - Clearly communicate to participants that food stamp and Medicaid benefits must be turned on via a telephone interview with the designated DHSS benefits coordinated post-release.
  - Explain to participants how the I-ADAPT team case management approach works so that they better understand why not all DHSS personnel are familiar with their case and the I-ADAPT process and why they need to contact the designated benefits coordinator for benefit activation.
  - Assist participants in obtaining a telephone with voicemail so that they are able to receive return messages from the DHSS benefits coordinator if follow-up information is needed.
  - Follow-up with participants post-release to confirm activation of benefits within 2 weeks of release; assist participants through activation process if necessary.
- Monthly Pre-Release Workshops
  - Provide general information about the I-ADAPT process structure and design at the beginning of all monthly workshops in order to orient new participants and remind other participants; explaining the I-ADAPT team-based case management approach to participants may reduce confusion of why they are referred to other people and/or why non-I-ADAPT representatives at DOL, DHSS, DOE, DOC, and DSHA may not be aware of I-ADAPT process benefits or processes.
  - Continue bi-annual presentations on employment, housing, education, community corrections, health and social services, and community services and providing associated workbooks to participants.
  - Have representatives from DOL, DHSS, DOE, DOC, and DSHA attend all monthly workshops, not just those that they present at bi-annually.
  - Expand time for one-on-one interactions between I-ADAPT representatives and participants at the end of each workshop.
  - Facilitate one-on-one interactions between I-ADAPT representatives and participants who are unable to attend monthly workshops due to classification.

- Facilitate one-on-one case management interactions between I-ADAPT representatives and participants with impairments that may impact communication during workshops (ex. Hearing or visual impairments, inability to read or comprehend quickly, non-English speakers) and provide assistants or interpreters during I-ADAPT engagements as needed.
- Work towards improving relations between service providers and participants, including increasing opportunities for rapport building and minimizing de-humanizing treatment during workshops (ex. Calling participants “offenders”, refusing to shake hands, speaking negatively about participants and/or their re-entry efforts in front of participants, etc.).
- Workbooks
  - Continue updating workbooks regularly
  - Overview workbook materials at each session to inform participants of what information is included, why it is useful to them, and how participants should engage with the material to maximize benefits.
  - Encourage participants to keep workbook sections and bring them back to each session so that information can be clarified and built upon.
  - Provide opportunities for participants to discuss workbook materials and responses to workbook questions with other participants and I-ADAPT representatives.
  - Provide assistance to participants who are unable to read or comprehend the workbooks independently, either through one-on-one interactions with I-ADAPT representatives or by providing an assistant or interpreter during re-entry planning workshops.
  - Develop and regularly update county-level service guides to provide information about community-based organizations who can provide assistance to participants post-release.
- Case Management and Access to Services Providers
  - Increase group and one-on-one interactions between I-ADAPT representatives and participants.
  - Include individual participants in developing his/her transition plan as much as possible in order to increase communication, reduce participant stress or confusion, and improve likelihood that the plan matches the participant’s needs

and that the participant will adhere to the plan, take accountability for their actions, and succeed.

- Provide transition plans to individuals earlier in the release process.
- Regularly and clearly communicate process services and limitations for individuals, including how he/she should obtain services and documentation post-release.
- Develop policies and procedures to ensure participants who are unable to attend monthly workshops have equal exposure to information, case management, and other services via one-on-one interactions.
- Develop policies and procedures to streamline facility and county transfers in order to minimize delays in participants' receiving information about services or receipt of his/her transition plan and official documentation.
- Have at least one I-ADAPT coordinator in each probation office.