



Status Report on Offender Transitional and Re-entry Services

*Office of the Secretary of Public Safety and Homeland
Security*

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Executive Summary

§ 2.2-221.1. Secretary to coordinate system for offender transition and reentry services.

“The Secretary of Public Safety and Homeland Security shall establish an integrated system for coordinating the planning and provision of offender transitional and reentry services among and between state, local, and nonprofit agencies in order to prepare inmates for successful transition into their communities upon release from incarceration and for improving opportunities for treatment, employment, and housing while on subsequent probation, parole, or post-release supervision. It is the intent of the General Assembly that funds used for the purposes of this section be leveraged to the fullest extent possible and that direct transitional and reentry employment and housing assistance for offenders be provided in the most cost effective means possible, including through agreements with local nonprofit pre- and post-release service organizations.”

To this end the Secretary shall provide a report to the Governor, Chairman of the House Appropriations Committee, and Senate Finance Committee that outlines the efforts of the various Secretaries to support this cause by November 15th.

This report details the efforts made by the Virginia Department of Corrections (VADOC) and other executive agencies to ensure returning citizens transition smoothly back into the community. The Commonwealth provides services to offenders from the time of their arrest, to the time of their release, and consistently prioritizes re-entry needs.

The state agencies involved in the 2019 Re-entry Report evaluated their various programs, services, and collaborative efforts during FY2019. Agencies reported program benefits and barriers in annual evaluations. Overall, reported barriers include issues with funding, participation, and access.

A number of pre- and post-release strategies were implemented throughout FY2019. Pre-release services were focused on mental health treatment, substance abuse treatment, employment training, life skills, and education. Post-release services included assistance in acquiring clothing, food, housing, transportation, identification, health care, and employment. These services aim to facilitate an offender’s seamless re-integration into the community.

Identified funding and policy barriers should be addressed to continue the facilitation of supportive re-entry services. Evidence-based programs should be identified and replicated throughout the Commonwealth. Accurate data collection is imperative for Virginia’s program evaluation techniques and fidelity measurements of statewide initiatives. These efforts will ensure available funds support effective programs and re-entry needs.

Department of Aging and Rehabilitative Services (DARS)

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

Adult Protective Services Division

The Adult Protective Services Division (APSD) oversees local departments of social services—Adult Services (AS), Adult Protective Services (APS) and Auxiliary Grant (AG) activities. APSD also develops and interprets law, regulation, and policy for these programs. APSD regional consultants provide direct consultation, training and technical assistance to local AS/APS units. Home office and regional APSD staff participate in the following prisoner re-entry efforts:

- Provide information and consultation to Virginia Department of Corrections (VADOC) re-entry staff on services and supports that may be available to returning citizens, with the understanding that AS/APS/AG programs do not provide housing.
- Work with re-entry staff and other agencies to clarify and expedite applications, screenings and documentation for eligibility for Medicaid, AS, AG, long-term care and other benefits and supports.
- Provide information to local departments on re-entry, as well as their responsibilities and options in working with returning citizens.
- Monitor cases which involve special-needs inmates and provide consultation and technical assistance to local AS and APS involved.
- Act as liaison between local AS/APS workers and VADOC release and re-entry staff on challenging cases, including confined offenders with special needs.
- Advocate for the safety and health of special-needs inmates and the safety and security of the communities where they wish to locate.

Pre-Release Services

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

DARS vocational rehabilitation counselors from across the state continue to serve on local Re-entry Task Forces, lending their expertise on employment for formerly incarcerated people with disabilities. DARS also works with VADOC Pre-Release Centers, providing them with information on eligibility requirements for vocational rehabilitation services and contact information of local DARS Field Office around the state. DARS staff also sit on the recently formed Juvenile Justice Reentry Task Force, which will design a comprehensive plan to aid juveniles released from the state's detention centers transition back to their communities. DARS' Vocational Rehabilitation (VR) program continues to offer Federal Fidelity Bonding to VR consumers that requires bonding as a condition of employment.

DARS' Disability Determination Services (DDS) continues to participate in the SSI/SSDI Outreach, Access and Recovery (SOAR) Program in all regions of the Commonwealth. This program was designed to assist homeless individuals with severe mental, physical or a combination of both impairments to gain access to mainstream benefits such as Social Security and Medicaid. A total of 179 individuals benefited from the SOAR program for State FY2017.

DDS has maintained the cooperative agreement with the Virginia Department of Corrections (VADOC) which identified and formalized procedures that facilitated the timely entitlement to Supplemental Security Income (SSI) for disabled and aged inmates of the VADOC system. These prerelease application procedures were implemented throughout the Commonwealth and allowed inmates to file for SSI benefits prior to their release, providing for a smoother transition back into the community. These pre-release procedures apply to the initial determination only and are not used during any appeals processes. A total of 239 inmates, who were pending release, had their applications processed last state fiscal year. Additional information on the DDS SOAR and Prerelease programs can be obtained by contacting Teresa Sizemore-Hernandez, Professional Relations Coordinator at Teresa.Sizemore-Hernandez@ssa.gov.

Employment/Job Training

DARS had 991 formerly incarcerated people with disabilities who applied for Vocational Rehabilitation (VR) services in federal fiscal year 2019. Of these 991 applicants, 821 were found eligible for services. An additional 11 ex-offenders who applied prior to FFY 2019 were found eligible to receive VR services in 2019. These services ranged from job training and development to purchasing uniforms and equipment, which enabled them to start employment. 241 previously incarcerated people with disabilities were successfully employed after receiving VR services throughout the year.

Department of Behavioral Health and Developmental Services (DBHDS)

The Department of Behavioral Health and Developmental Services (DBHDS) is involved in the provision of behavioral health services to offenders leaving VADOC custody. DBHDS works to ensure all individuals with behavioral healthcare needs have access to services. DBHDS operates eight adult inpatient mental health hospitals, and provides mental health services to adult offenders released to the community. In FY2019 a total of seven individuals had completed their sentence, but due to mental health concerns were considered a risk of harm to self or others and in need of inpatient hospitalization. These individuals were committed to DBHDS custody rather than being released to the community. An integral part of the treatment for these individuals is the development of comprehensive discharge plans to address their re-entry needs to try to minimize the risk of reoffending.

In FY2019 a total of 736 individuals were committed to DBHDS facilities from local & regional jails as being in need of emergency behavioral health services. An important part of the treatment for these individuals also included the development of discharge plans that link the individual to behavioral health services both in the jail and in their home communities. An additional 697 individuals were admitted to DBHDS facilities in FY2019 for the purpose of restoring their competency to stand trial. Ninety-nine percent of these admissions were from local/regional jails, and again, these individuals participated in discharge planning in order to link them to behavioral healthcare services both in the jail and in their communities.

The following chart shows the number of individuals receiving services from Community Service Boards (CSBs) who are justice-involved. CSBs provide behavioral health and developmental services to individuals in need. DBHDS has provided training and technical assistance to CSBs on the Risk Need Responsivity model of risk management.

Referral Source Code	Referral Source Description	FY2017	FY2018	FY2019
11	Local Correctional Facility	4,104	4,720	4,912
12	State Correctional Facility	668	581	445
13	Local Community Probation and Pre-Trial Services (formerly CDI)	710	657	625
14	Probation	11,546	11,335	10,799
15	Parole	744	764	797

DBHDS provides targeted funding to CSBs which provide direct services for jail diversion related initiatives. DBHDS facilitates development of local programs and provides technical assistance to CSB programs which may serve offenders with behavioral health disorders who return to the community.

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

DBHDS has strong collaborative relationships with the Virginia Department of Corrections (VADOC), Department of Criminal Justice Services (DCJS), Department of Social Services (DSS), Department of Juvenile Justice (DJJ), Department of Medical Assistance Services (DMAS), Department of Veterans Services (DVS), State Compensation Board (SCB), and other state agencies. Additionally, DBHDS works with local entities such as, CSBs, community corrections agencies, police and sheriffs' offices and other local and statewide organizations, on issues related to behavioral health disorders and intellectual disabilities among the justice-involved population. Specific collaborations impacting individuals reentering from prison or jail include the statewide Cross Systems Mapping initiative, the statewide expansion of Crisis Intervention Teams, Jail Diversion, and Behavioral Health Dockets, as well as the Virginia Veterans and Family Support (VVFS) Program, and the Annual Crisis Intervention Team Conference and Training.

Other specific efforts include:

1. Memorandum of Understanding between VADOC, DBHDS, and CSBs remains in place.
2. Crisis Intervention Team (CIT) Statewide Expansion – This project is a collaborative effort among DCJS, DBHDS, local CSBs, police, sheriff, consumer, and other service agencies.
 - a. There are now 38 local CIT initiatives developed and supported by Federal, State, and local funding.
 - b. 38 programs operate 42 CIT Assessment sites throughout the Commonwealth.
 - c. The CIT Assessment Site Coordinator at DBHDS provides technical assistance to the 42 CIT Assessment Sites. The coordinator also works with the CIT Coalition to bring uniformity to CIT operations.
 - d. During the 2019 session of the General Assembly, funding was approved for FY2019 that allowed for the creation of five new CIT assessment sites supporting CIT programs in rural jurisdictions in Virginia.
3. 17 CSB Jail Diversion Program Initiatives continue to receive support and provide data on outcomes at all intercepts, including re-entry. During the 2019 session of the General Assembly, funding was approved for FY2019 that allowed for the creation of three new diversion programs operating at Intercept 2, jail booking/initial court hearings, in rural jurisdictions in Virginia.
4. DBHDS completed the Forensic Discharge Planning for Individuals with Serious Mental Illness (SMI) in Virginia Jails, a study commissioned by the General Assembly that examined resources

needed to provide this service to anyone with SMI in local or regional jails in Virginia. New funding was approved for FY2019 and FY2020 to establish forensic discharge planning in two regional jails with high percentages of inmates with SMI.

5. Behavioral Health Docket Expansion – In November 2016, The Chief Justice of the Supreme Court of Virginia issued Rule 1:25 that authorized the expansion of Behavioral Health and other Specialty Dockets and established procedures for application and development of new dockets. DBHDS partnered closely with the Office of the Executive Secretary (OES) on the development of statewide standards, and has provided training in conjunction with OES to the Courts, CSBs, and local and state probation and parole on implementation and best practices. The Behavioral Health Docket Advisory Committee has reviewed and approved applications from 11 dockets throughout Virginia and there are three additional docket applications pending review in FY2020. DBHDS provides funding to three of the operating Behavioral Health Dockets to support staffing and treatment services.
6. DBHDS and the State Compensation Board (SCB) collaborated on the development of the July 2019 annual Mental Illness in Jails Survey.
7. DBHDS collaborated with the State Compensation Board to share data related to individuals served by the DBHDS Jail Diversion cohort. All parties were in agreement that the SCB data could be shared with DBHDS in a data warehouse. Steps were taken from FY2015-FY2017 to facilitate the development of an MOU and to discuss the logistics of making this data transfer possible. This MOU was finalized and the planning for the exchange of data began in FY2017. Work on this continued into FY2018, and the first successful data transfer took place. Since that time, DBHDS has begun accessing criminal justice outcome data on participants in the agency's CSB jail diversion programs for analysis.

Please describe any pending or upcoming collaborative efforts that involve your agency.

1. Crisis Intervention Team Statewide Expansion
 - a. The annual CIT training and conference will be held in May 2020 for representatives of Virginia's 38 CIT programs and other stakeholders. The conference is a collaborative project with DBHDS, DCJS, and the Virginia CIT Coalition (VACIT).
 - b. DBHDS is developing a CIT training program efficacy survey and completes an annual status report.
 - c. During the 2019 session of the General Assembly, funding was approved for FY2019 that allowed for the creation of five new CIT assessment sites supporting CIT programs in rural jurisdictions in Virginia.
2. 17 CSB Jail Diversion Program Initiatives will continue to receive support and provide data on outcomes at all intercepts, including re-entry.
3. FY2019 funding allowed for the expansion of jail diversion programming to three new rural sites that will provide diversion at Intercept 2 of the criminal justice process, jail booking/initial court hearings. Three new programs were selected and started providing services in FY2019.

4. Forensic Discharge Planning funds were issued to two regional jails with high percentages of inmates with Serious Mental Illness. These sites became fully operational in FY2019 and data will be collected between FY2019 and FY2020.
5. DBHDS and SCB will collaborate on development of the July 2020 annual Mental Illness in Jails report to the General Assembly.
6. DBHDS will continue to offer one-day Cross-Systems Mapping workshops to localities upon request.
7. DBHDS will continue efforts to collaborate with SCB around data sharing, and will continue to integrate the data from SCB into DBHDS's Data Warehouse for analysis. DBHDS plans to use the newly acquired data to measure criminal justice outcomes for its 17 Jail Diversion Programs and newly forming programs, as well as its three Behavioral Health Dockets.
8. DBHDS will continue to serve on the Behavioral Health Docket Advisory Committee established by the Chief Justice of the Supreme Court of Virginia, and will continue to partner with OES in providing training to localities that are starting new dockets.

Please describe any past or current policy-level barriers to collaboration and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

There are challenges related to the coordination of care for individuals with behavioral health disorders in the state and local behavioral health and criminal justice systems. At a macro level, this is due in part to a patchwork of state level IT systems and software which are often incompatible, and limited IT resources and personnel. Criminal justice information is housed in multiple systems, for example, jails use the local inmate data system. VADOC uses CORIS and the state police manage Virginia Criminal Information Network and National Crime Information Center. Information sharing among agencies and across platforms requires substantial coordination and effort.

There also are various interpretations of the Health Insurance Portability and Accountability Act (HIPAA) with regard to sharing of information and the inconsistent interpretation of HIPAA often becomes a barrier to collaboration. Some communities have been able to overcome this at the individual (micro) level and share information regularly, but this appears to be the exception rather than the rule. SCB, DCJS and DBHDS have had discussions about ways to facilitate better access to data. These discussions continued into FY2018 and steps were taken in FY2018 to initiate data sharing. During FY2019 data has been transferred monthly to DBHDS's data warehouse. This was the first step toward resolving the barrier, which will provide criminal justice outcome data on participants in DBHDS's 17 jail diversion programs. Continued efforts will be made to facilitate sharing of data between DBHDS, LIDS, and DCJS through other avenues.

During the 2019 legislative session of the General Assembly several bills were passed to address the barriers with information sharing between CSBs and local and regional jails. DBHDS convened a work group with representation from CSBs, Jails, OAG, and other stakeholders to develop a plan for the sharing of protected health information. A report will be drafted that will include the plan for sharing, implementation of the plan, and any recommended code changes.

At the request of the JCHC, DBHDS worked with VADOC and SCB to create a uniform release of information form that can be used by state hospitals, VADOC facilities, jails, and CSBs. A report will be drafted that will include recommendations for implementation and any recommended code changes.

Please describe any past or current policy-level gaps in collaboration and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

DBHDS continues to advocate for a sufficient continuum of community based mental health and substance use services. This includes access to the full range of supports for continuity of care such as, housing, mobile emergency services, crisis stabilization and Program of Assertive Community Treatment programs, detox centers, medication assisted treatment for opioid addiction, counseling, medications, and benefits restoration. While these resources may be difficult to put in place; local, regional, and state partners continue to collaborate to understand each other's system needs and goals.

Law Enforcement

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

There are now 38 CIT initiatives across Virginia, and these 38 programs operate 42 CIT Assessment Sites. Data show a significant decrease in officer involved time for localities with CIT Assessment Sites, which allows officers to spend more time in the community.

Employment/Job Training

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

DBHDS provides limited employment/job training programs within its inpatient psychiatric facilities. In addition, DBHDS has long been a strong advocate for the hiring of peers to provide assistance, support, and guidance to others recovering from behavioral health disorders. DBHDS has successfully implemented a peer certification process, in collaboration with the Department of Health Professions and DMAS. Peer certification will elevate the role of peers with healthcare agencies and will create more job opportunities. Since 2017, 1,642 peers were certified through the Virginia Certification Board (VCB).

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

DBHDS will continue to collaborate with other agencies on addressing the new requirements for peer certification.

DBHDS is committed to providing access to Permanent Supportive Housing (PSH). PSH is a national evidence based practice for adults with serious mental illness. It combines affordable rental housing with supportive services to address the treatment and recovery needs of participants. The initial data indicates 93% of the individuals provided with PSH remain in stable housing and had a 94% reduction in state hospital bed use, and a 74% reduction in private hospital bed use.

Alcohol/ Drug Addiction

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

State Target Response (STR) funds: Granted 9.6 million dollars for Prevention, Treatment, and Recovery were awarded from 2017-2019.

State Opioid Response (SOR): Granted 15.3 million dollars for Prevention, Treatment, and Recovery plus a one-time allocation of 8.7 million dollars' supplement was awarded from 2018-2019. These funds have enabled the expansion of Medication Assisted Treatment (MAT) programs at the CSBs.

Jail Opioid Diversion Program: Three CSBs have been awarded funds to partner with their local jails to offer MAT in addition to treatment services in an effort to divert individuals with OUD from incarceration and engage them in treatment services.

Virginia Comprehensive Opioid and Addiction Program (COAP) Grant: DBHDS and DCJS have partnered together to work on this grant. The goals are to develop a state wide plan that focuses on cross systems collaboration of criminal justice and behavioral health to engage individuals in substance use treatment and recovery at each point of contact within the criminal justice system and to expand the use of alternatives to incarceration to engage individuals in treatment and recovery. The planning phase involved facilitating mappings across the state to identify services and gaps and to develop a statewide plan. The second phase will involve implementation on of the identified services across the state. A training conference will take place in October 2019 that will outline efforts being made across the state and highlight specific programs that are being implemented that are utilizing evidence based practices.

Mental Health

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

DBHDS funds 17 jail diversion programs to enhance mental health services to those involved in the criminal justice system.

DBHDS convened a group of subject matter experts to develop a list of standards for the treatment of individuals with mental illness in Virginia's local and regional jails. This committee published its recommended minimum standards, and shared their report with the SJ47 Joint Subcommittee to Study Mental Health Services in Virginia in the 21st Century and the Joint Commission on Healthcare. During the 2019 legislative session of the General Assembly, a bill passed directing the BOC to establish minimum standards for care in the jails in the Commonwealth. DBHDS is supporting the BOC with this effort and is building upon the work that was done in 2018.

Re-entry Focus Areas

Women

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

No new specific efforts/initiatives specifically focused on women's re-entry needs.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

Any upcoming Cross-Systems Mapping sessions will include women's re-entry needs/issues.

Veterans

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Assets: DBHDS continues to collaborate with Virginia Veterans and Family Support (VVFS) on veteran's mental health issues. DBHDS also collaborates with the Department of Veterans Services to enhance mental health care for veterans.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

Any upcoming Cross-Systems Mapping sessions will include Veteran's re-entry needs/issues.

Juveniles

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Assets: DBHDS continues to hold meetings with DJJ and local detention centers to discuss and address behavioral healthcare gaps for justice-involved juveniles. DBHDS funds several behavioral healthcare programs for juveniles in detention.

DBHDS provides training and consultative support to local detention centers and DJJ regarding re-entry, community supervision, and addressing mental health needs of detained juveniles. DBHDS also participates in DCJS-led training of school resource officers to increase understanding and improve interactions with adolescents in an effort to improve police-youth interactions and decrease arrests. DBHDS provides clinical support and consultation to detention center staff and mental health staff to improve interactions and care.

Data and Information

Please describe any improvements or updates made to your agency's information system in the last year.

DBHDS continues to progress in the development of an electronic health record (EHR) system. The EHR system is already in use in three facilities and will be brought on-line in the remaining DBHDS facilities over the next two to three years. The advent of the EHR system will improve DBHDS' ability to share information with other providers and adhere to federal mandates regarding having accessible records. DBHDS has also created a data warehouse and via this warehouse DBHDS has begun to analyze data from various sources to better measure outcomes from our jail diversion programs.

What has been the impact to date of your agency's information system on the collaborative sharing of case-level information between agencies?

DBHDS has acquired a significant amount of information from our jail diversion initiatives and will be in a position to report information more accurately concerning the clinical and criminal justice outcomes for these individuals going forward. Similarly, collecting data on the CIT Assessment Sites will be able to

more accurately describe criminal justice and clinical outcomes for individuals who are served in the CIT Assessment Sites.

Please describe any legislative funding that your agency has received for re-entry-related initiatives? Please provide a brief description of the intended purpose of the funding and what the funding has been used for to date, the total amount of funding that the grant will provide, and when the funding has/will terminate.

Forensic Discharge Planning funds (\$1,600,000 in FY2019 and FY2020) were awarded to two CSBs that serve regional jails with high percentages of inmates with Serious Mental Illness. Funding will be used to create staff positions through the Community Service Boards to provide discharge planning and case management services to individuals with SMI being released from two regional jails. These sites will become fully operational in FY2019 and data will be collected between FY2019 and FY2020.

Virginia Department of Corrections (VADOC)

The Virginia Department of Corrections (VADOC) supervises about 90,000 offenders in its prisons, community corrections facilities, and on probation or parole.

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

Virginia Serious and Violent Offender Re-entry Program

Assets: This program transitions violent and sex offenders through jails in Newport News, Fairfax and Richmond City. These programs provide intensive services to offenders through contracts with the local Community Services Boards and non-profit agencies, and also provide case-management services after release.

Barriers: The programs are small, serving only about 70 offenders per year. Offenders without post-release supervision are not eligible to participate.

Gaps: The program is small and limited to three local communities.

Virginia Community Re-entry Program

Assets: This program utilizes the Local Re-entry Councils to help prepare offenders for re-entry. Services include coordinating with local service providers and providing pre-release planning and transition support to offenders. The Councils are convened by local Social Services (DSS) agencies that partner with the VADOC, non-profits, and other re-entry stakeholders. The program has been expanded to every locality in Virginia.

Barriers: The Secretariat level position that coordinated these councils was eliminated with the change of administrations in January 2014. Primary coordination has been assigned to the local DSS. The amount of time devoted by the partners to address reentering offenders is not sufficient to meet the needs of this population. Local DSS offices run the councils using existing resources, and vary in size and scope.

Gaps: There is no funding for coordination of the Councils and it is handled by DSS staff in addition to a range of other duties. The program could benefit from a staff person at the Secretariat level to provide coordination. Lack of funding ultimately limits the services that can be provided.

Faith Based Re-entry Program

Assets: This faith-based re-entry program is operated by volunteers and coordinated by Prison Fellowship, the VADOC's faith based services provider. The voluntary program uses a Christian curriculum to provide re-entry preparation programming to incarcerated offenders approaching release and mentoring upon transition to the community. The program operates at St. Brides Correctional Center and will soon expand to Fluvanna Correctional Center for Women.

Barriers: Because of the faith based nature, the program is voluntary and may appeal only to persons of Christian faith.

Gaps: As the program is faith-based, offenders must volunteer for the program instead of being assigned. The capacity is only 80 offenders at St. Brides Correctional Center and will be limited to 35 offenders at Fluvanna Correctional Center for Women.

Virginia Department of Motor Vehicles (DMV)

Assets: The DMV has partnered with the Virginia Department of Corrections (VADOC) to develop creative ways to provide offenders who are preparing for release with official state identification cards. The DMV Connect program has been fully implemented in all correctional facilities. DMV Connect is an outreach program where DMV personnel use portable equipment to process transactions for individuals and groups who may not otherwise have access to DMV. Examples include assisted living facilities, homeless shelters, VA hospitals, and areas hit by natural disasters. The program started in 2012 as a partnership with VADOC to serve incarcerated persons who are preparing for release by providing them with state identification cards. Identification is required for persons to obtain employment, housing, transportation, banking, and other necessary daily life activities. Offenders are now able to leave the correctional facilities with an official state identification card that will assist them in their transition and re-entry into society. As of August 2019, the DMV Connect program has been successfully implemented with DMV issuing over 28,000 credentials to offenders leaving VADOC facilities. The program also is able to provide Veterans ID's and duplicate drivers licenses for those that meet the criteria. The DMV Connect Programs remains proactive with expansion of relevant services and is preparing to offer the Real-ID to offenders as well in compliance with the domestic travel requirements for the Department of Homeland Security Act effective October 1, 2020 for all states.

DMV has also worked collaboratively with VADOC to establish a Commercial Driver's License (CDL) program for offenders that are incarcerated. In the program, non-violent offenders who are eligible for a driver's license receive training by VADOC staff to obtain a CDL to operate a commercial motor vehicle. CDL holders may drive trucks to deliver products produced in the VADOC agribusiness program. DMV provides the training curriculum, testing, and licensure. The program also provides offenders with a viable job skill that they can utilize upon release. As of August 2019, the CDL program has been successfully implemented with DMV issuing 27 CDLs to offenders leaving VADOC facilities.

Virginia currently has the lowest three-year recidivism rate in the country. VADOC calculates a three-year recidivism rate for a cohort, four years after the cohort is released. The data includes three years of follow-

up plus an additional year for court records to be received and entered. Data available indicates that 12 offenders completed the DMV Connect program and were released from a state responsible (SR) term of incarceration during FY2012. Of these 12 offenders, two (16.7%) returned to incarceration within three years following their release. There were 954 offenders who received IDs through the DMV Connect program and were released from SR term of incarceration during FY2013. Of these 954 offenders, 183 returned to incarceration within three years following their release. This recidivism rate (19.2%) is lower than the overall three-year re-incarceration rate for all SR released offenders during FY2013, 22.4%.

Barriers: None.

Gaps: None.

Social Security Administration (SSA)

Assets: The collaboration between the SSA and VADOC allows offenders to apply for replacement Social Security Cards 120 days before release. SSN cards are needed by offenders after release so they may obtain employment. The cards are also a form of identity verification used by DMV.

Barriers: It is restrictive for the SSA to only issue cards 90 days before the offender is released from prison. This limited timeframe, given processing and mailing times, sometimes causes cards to arrive at the prison after the offender has been released. The VADOC would like to be able to obtain cards earlier in the offender's incarceration. The SSA has not been willing to lengthen the timeframe for VADOC applying the cards.

Gaps: None.

Virginia Department of Veterans Services (VDVS)

Assets: The Virginia Department of Veterans Services (VDVS) assists justice-involved veterans through diversion efforts in jurisdictions such as veteran dockets, during incarceration, and upon release to connect veterans to services in the community. VDVS Benefits staff partner with VADOC to assist incarcerated veterans with benefits claims and technical assistance. The VDVS Virginia Veteran and Family Support Justice Involved Services (JIS) program provides resource connections, care coordination, and support to veterans and service members in the criminal justice system. In addition, VDVS participates in VADOC resource/re-entry fairs and other outreach initiatives for justice-involved veterans. VDVS is also a member of the VADOC Incarcerated Veterans Quarterly Stakeholders group, which meets to discuss issues and services for incarcerated veterans. The VDVS Criminal Justice Director collaborates with VADOC to address gaps and barriers for justice-involved veterans. VDVS works closely with the VA, veteran service organizations (VSOs) and other local, state, and federal partners to provide a comprehensive network of services to justice-involved veterans. Virginia has developed a streamlined procedure for the compensation and pension (C&P) exam process for incarcerated veterans. The VDVS collaborates with the VA and VADOC to coordinate compensation and pension (C&P) exam requests for incarcerated veterans in VADOC correctional facilities. VDVS also works in partnership with the VA and VADOC on the Justice Involved Veterans with Special Needs workgroup to help coordinate discharge planning efforts for justice-involved veterans with serious medical and/or mental health needs.

Barriers: Housing access for justice-involved veterans continues to be an issue, particularly for justice-involved veterans with serious medical and/or mental health needs. Many justice-involved veterans are not eligible for or able to access community housing or veteran-specific housing directly upon release

from incarceration. Criminal history, housing policies, previous incarcerated status, and lack of affordable housing options are barriers for justice-involved veterans. The lack of housing options leaves justice-involved veterans competing for the same limited resources with other individuals who do not have a criminal history. Justice-involved veterans with complex medical and mental health needs face additional housing barriers due to lack of long-term care housing options and restrictive long-term care facility policies.

Gaps: Housing instabilities for justice-involved veterans diminishes efforts to improve health outcomes and can increase the risk of re-offending.

U.S. Department of Veterans Affairs

Assets: The VADOC partners with the federal Veterans Affairs to allow medical and mental health examinations to be conducted on incarcerated veterans to determine if disability benefits are warranted. The VADOC welcomes VA health care examiners to examine offenders on site at the prison as needed for the VA to carry out its statutory requirement to provide compensation benefits to all veterans regardless of incarceration status. The VADOC has established a wage position to manage the C&P exam appointments and liaison with the VA and its contractors to assist with the completions of the exams.

Barriers: The VA continues to work through internal issues to identify providers willing to enter the correctional facilities to complete the C&P exams.

Gaps: It would be beneficial for the VA to provide disability determination examinations at the prisons. The VADOC can help facilitate this partnership.

Medicaid: Virginia Department of Medical Assistance Services (DMAS) & Virginia Department of Social Services (DSS)

Assets: Through their partnership with VADOC, DMAS and DSS have defined procedures for incarcerated offenders to apply for Medicaid prior to release. When applications are completed correctly, offenders can get a Medicaid number the day of release, qualifying them for services upon release. As a result of HB 2183, DMAS established a central processing unit for the application intake and processing of Medicaid for offenders residing in VADOC facilities, regional and local jails and at the Department of Juvenile Justice. The Cover Virginia Incarcerated Unit (CVIU) also handles the processing of pre-release and re-entry applications for offenders upon release from facilities. Processes and procedures have been developed and implemented for the smooth transition of the offenders from incarceration to the community with the CVIU coordinating with local department of social services agencies. DMAS project staff continue to consult and adjust processes and procedures to meet the needs of all offender populations.

Barriers: The application process is complicated and VADOC staff expertise and resources continue to remain engaged with the Cover Virginia Incarcerated Unit (CVIU). The CVIU is overseen by DMAS staff, but staffed and managed under contract with a DMAS vendor. Due to the contractual agreements, DMAS manages the volume of applications in coordination with VADOC and local and regional jails closely to ensure compliance with federal and state regulations. DMAS project staff continues to meet regularly with all facility staff to ensure open communication and resolution of challenges.

Gaps: DMAS, VADOC and Jails are working closely on the re-entry process, to ensure that the incarcerated individual continues to be enrolled in Medicaid, without any gaps in the coverage. DMAS, in contract with a vendor has developed training for local and regional jails to describe the application process as well re-entry process.

Assisting Families of Inmates (AFOI)

Assets: The VADOC offers an offender video visitation program at most prisons across the Commonwealth through the Department's partnership with community faith-based and non-profit organizations. Video visitation allows family members to meet with the offender via video conferencing at a cost lower than what the visitor typically spends traveling to a prison. Video visitation has expanded from the seven visitation centers across the Commonwealth of Virginia, to family and friends being able to participate in video visitation from home using a laptop or cell phone. This change has dramatically increased participation across VADOC facilities.

Barriers: Generally, facilities are limited to only one or two video visitation units per site for offender participation.

Gaps: The program is still in its initial implementation phase at the current sites. Approximately 20 facilities currently offer this expanded program.

Virginia Employment Commission (VEC)

Radford Office

The Radford VEC Disabled Veterans Outreach Program (DVOP) representative regularly attends and is a member of the New River Valley Re-entry Council. More than twenty agencies are active partners to include; Department of Corrections, Drug Courts (Pulaski, Montgomery County, Blacksburg), Virginia CARES, Social Services from six areas, Virginia Veterans and Family Support, and New River Valley (NRV) Community Services. Partners from the NRV Re-entry Council also provide monthly re-entry briefings and classes in the local jails. The Radford Center manager, staff and Job for Veterans State Grants (JVSG) are very active in assisting ex-offenders in making a successful transition from prison to their community.

Wytheville Office

The Wytheville VEC office participates in the re-entry program with Bland Correctional Facility. DVOP/ISC, Mike Frye, visits the prison twice a month to provide resources to the prison's veteran group. The Wytheville VEC office also attends the prisons resource fairs twice per year. Wytheville DVOP/ISC Mike Frye and (Interim) LVER Rob Myers are members of two local re-entry groups: the Highlands Community Re-entry Council (Smyth County) and the Wythe/Bland Substance Abuse Coalition and Re-entry Group (Wythe and Bland Counties). The Wytheville VEC and JVSG staff are highly involved in assisting ex-offenders overcome barriers to employment.

Norton Office

The Norton VEC staff helps offenders conduct job searches, via supervised internet access, at Wallens Ridge State Prison located in Big Stone Gap, Virginia. The Norton office participates at the United States Federal Penitentiary in Lee County to provide services to transitioning offenders. Norton VEC JVSG Staff coordinate with the Wise County Circuit Court to work with offenders on a special Veteran's Court Docket. This new Program began in 2019 as an extension of the Drug Court Docket to emphasize

Services for Veterans with Significant Barriers. The Norton VEC office also participates with the Virginia Department of Corrections Appalachian Re-Entry Council at Camp 18 on a monthly basis.

Danville Office

The VEC Danville Office Veterans Representative participates bi-annually in the Re-entry Job Fair at Green Rock Correctional Center. In addition, staff participates in the annual Job Fair for Southwest Cares. The VEC Danville Office staff also works with transitioning offenders and makes referrals to Southwest Cares for any returning citizens needing assistance.

Lynchburg Office

Veterans Representatives participate in monthly meetings with the Blue Ridge Re-Entry Council. In addition, staff present VEC Services and Job Seeker Services on a quarterly basis for the Peer Support Program at the Department of Corrections District 13 and Parole office.

Martinsville Office

Holds Re-Entry Job Fairs at the Green Rock Correctional Facility and participates on the Martinsville Community Re-Entry Council and the Patrick County Re-Entry Advisory Board. The VEC Martinsville Office provides bonding letters for participants in the annual local Re-entry Resource Fair and annual local Re-entry Job Fair as well as conducts Re-Entry workshops as needed.

South Boston Office

Refers returning citizens to Tri-County Community Action. The local Veterans Representative conducts monthly visits to the Farmville Office of Probation & Parole and both the Veterans Representative and Workforce Services Office Manager will begin that process with the South Boston division.

Hampton Office

Staff participate in the annually City of Hampton and Newport News Re-entry Job and Resources Fairs. The staff provides VEC and WIOA services (job fairs, hiring events, job search workshops, etc.) information to the jobseekers. The Hampton VEC JVSG staff conducts monthly Veterans Resources Workshops to transitioning veteran offenders at the City of Newport News Jail. The JVSG staff also attends monthly City of Newport News Re-entry Veterans Sub-Committee and Employment Meetings. During the meetings, the staff provides the committee with information about VEC and WIOA services (job fairs, hiring events, job search workshops, etc.).

Norfolk Office

Staff serve on the Re-entry Councils for Norfolk and Virginia Beach and provide input at the monthly meetings of the council. Every two to three-weeks staff attend the Re-Entry Planning Meeting and the Re-Entry Faith Based Meeting for Norfolk, and the Annual Re-Entry Summit meeting held once a year in September. VEC staff attended the Norfolk Homeless and Ex-Offender Stand-down at the Scope Arena providing VEC job seeker services to attendees.

The Norfolk VEC JVSG staff provide services to the City of Virginia Beach Jail by assisting incarcerated veterans with registering in VWC, application, resume assistance, and interviewing techniques.

Portsmouth Office

Staff serve on the Re-entry Councils for Portsmouth and Chesapeake and provides input at the monthly meetings of the council. The office serves the transitioning offenders monthly at the Chesapeake City Jail. The office provides information on job search strategies, Labor Market Information and apprenticeship programs at Resource Fairs two times per year at Indian Creek, Deerfield, and St. Brides Correctional Facilities. Additionally, the office provides employment services monthly to the veteran population at Indian Creek Correctional Facility.

Roanoke Office

Staff provide Job Services presentations to the Western Virginia Regional Jail and to the Virginia Department of Corrections' probation and parole districts twice a year.

Fishersville and Harrisonburg Offices

Staff regularly provide outreach to market DVOP services to the local State Correctional Facilities in the area. The Reemployment Services and Eligibility Assessment (RESEA) Coordinator and the Office Manager for these offices are members of the Community Re-entry Council.

Charlottesville Office

Office participates in a monthly Job Fair at the Albemarle Charlottesville Regional Jail.

Work Opportunity Tax Credit (WOTC)

The WOTC State Coordinator presents the program to offenders who are within 30 days to 6 months of release. This year, the Coordinator has presented at the Greensville Correctional Center in Jarrett, VA as well as Sussex I and II State prisons in Waverly, VA.

Barriers: Because of funding issues, several of our offices do not have sufficient staff to participate in re-entry activities.

Gaps: Because of the barriers identified above, staff are not able to provide services at all Virginia correctional facilities.

Department of Behavioral Health and Developmental Services (DBHDS) & local Community Services Boards (CSBs)

Assets: VADOC has an agreement with DBHDS and the Association of Community Services Boards to address re-entry appointments for incarcerated offenders who are in need of continuing mental health services after release. In prison, qualified mental health professionals provide re-entry assessments to the local CSB and make appointments for care prior to the offender's release. Many local Probation and Parole Districts have agreements with their CSBs for offender treatment services.

Barriers: Funding does not follow the offender but is provided to the CSB, enabling each individual CSB to establish its own service priorities. CSBs across Virginia various resource and funding challenges. These restraints create public safety concerns when offenders have mental health needs. Reentering offenders would be better served if the funding were provided to Probation and Parole Districts to pay CSBs directly for specific services.

Gaps: See barriers.

Pre-release and Post-Incarceration Services (PAPIS)

Assets: This program is operated by a coalition of non-profit organizations across the Commonwealth that supports pre- and post-incarceration professional services. The programs are partially funded by a grant from the Department of Criminal Justice Services. This coalition also provides guidance that increases the opportunity for, and the likelihood of, the successful reintegration of formerly incarcerated adult offenders into the community. VADOC partners with PAPIS providers for services in some prisons and in some Probation and Parole Districts.

Barriers: None.

Gaps: PAPIS providers are not located in all areas of the State and are not sufficiently funded to provide services to all offenders in need.

University of Virginia (UVA) Darden Business School Entrepreneurial Program

Assets: This innovative program was created by Dr. Gregory Fairchild, Associate Professor at UVA's Darden Business School. The program operates at Dillwyn Correctional Center and Fluvanna Correctional Center. The program provides college-level entrepreneurial training to offenders in the last year before release. Offenders selected for the program are those who have completed vocational training during incarceration. The program uses a business planning curriculum taught by Dr. Fairchild and graduate students. A post-release mentorship phase using community business owners is currently being planned. In the past year the program was expanded to include a Financial Literacy program and a Capstone program that ties the two programs together.

Barriers: The program is not funded and is dependent on the volunteer work of Dr. Fairchild and his students.

Gaps: The program operates at two prisons.

Concurrent Enrollment program

Assets: This program brings together certain Career and Technical Education programs that are offered through the VADOC Division of Education and certain Community Colleges. Students who complete VADOC classes and programs also get credit for through the community college. These programs operate much the same way as the dual enrollment programs which are offered through public high schools and local community colleges.

Barriers: Funding for these programs is dependent on outside resources and desire of Community Colleges to participate.

Gaps: These programs are not offered at all facilities.

Other Institutions of Higher Education

Assets: Partnerships exist with other universities and colleges that assist with re-entry preparation in prisons or Probation and Parole Districts. These organizations include but are not limited to the following: Blue Ridge Community College, Southside Virginia Community College, Piedmont Community

College, Germanna Community College, Rappahannock Community College, James Madison University Virginia Commonwealth University and Virginia State University.

Barriers: The efforts are not funded and dependent on the resources and motivation of individual educational institutions.

Gaps: Not all prisons or Probation and Parole Districts have partnerships with universities or colleges.

Agribusiness Partnerships

Assets: VADOC has a number of external partnerships that involve the Department's agribusiness operation. These partnerships provide incarcerated offenders with work training that could help them find employment after release. One initiative involves offenders who work with beef cattle on VADOC farms receiving training by Virginia Tech Vet School Veterinarians. Participants receive certificates upon completion. VADOC partners with Virginia Cooperative Extension with the assistance of the Department of Agriculture and Consumer Services to train offenders in the use of pesticides under the Virginia Pesticide Act. Participants can become a Registered Technician. In a new multiple agency partnership among the VADOC, Virginia Department of Health, and the U.S. Food and Drug Administration, incarcerated offenders who work in the prison Milk Plant and Dairy are provided with a special course that covers plant sanitation and milk pasteurization and includes mock inspections. Offenders will receive a certificate for successful completion.

Barriers: None.

Gaps: The programs are small and limited to offenders who work in the specific agribusiness programs, but demonstrate how agencies can use their expertise to work together and prepare offenders for re-entry.

Department of Professional and Occupational Regulation (DPOR)

Assets: VADOC works with DPOR to provide offenders the training and Registered Apprenticeship programs for offenders seeking licenses in Barbering, Cosmetology, Plumbing, HVAC, and Electrical Trades. VADOC Maintenance provide on-the-job training for offenders in the Trade areas. Offenders install, repair, replace, and maintain the mechanical and electrical systems throughout correctional facilities in Virginia.

Barriers: No DPOR-regulated professions or occupations have "barrier crimes" that expressly prohibit entry due to a prior criminal conviction. Offenders are evaluated in accordance with the criteria enumerated in § 54.1-204 to determine whether a prior criminal history directly relates to the license sought by the applicant. However, due to the U.S. anti-terrorism act, there are crime-type barriers that prevent some offenders from working in public wastewater jobs after release; these are reviewed by VADOC on a case-by-case basis before entering the program.

Gaps: The programs are small and limited to offenders who work in VADOC Wastewater Treatment Plants.

Alexandria Collaboration for Recovery and Re-entry

Assets: This program is supported by a model of collaboration between the VADOC Probation and Parole District in Alexandria and the local CSB. A grant obtained by the CSB funds a Mental Health Probation Officer and a CSB therapist. The program provides rapid/intensive treatment, supervision and support for probationers/parolees diagnosed with mental illness. The Substance Abuse and Mental Health Workgroup of the Governor's Re-entry Council identified the program as a model worthy of replication in other localities.

Barriers: Although the program was recommended for expansion by the Governor's Re-entry Council, funding is a barrier.

Gaps: The program is a model identified for replication but only exists in one locality.

Virginia Parole Board

Assets: The VADOC has an agreement with the Virginia Parole Board whereby offenders who are eligible for parole may be referred by the Parole Board to complete a VADOC Intensive Re-entry Program before being granted release. This practice helps ensure that long-term offenders receive re-entry preparation before release.

Barriers: None.

Gaps: The process is used for specific offenders at the discretion of the Parole Board.

Federal Bonding Program Stakeholders

Assets: VADOC was designated as the Federal Bonding program coordinator in July 2011. The federal bonding program is an employer job-hire incentive that allows employers to hire at-risk job seekers with prior criminal convictions with limited liability to their business. The VADOC partnered with a number of agencies and employment stakeholders to develop and oversee its approach to providing the program. Stakeholders assisting VADOC in this effort include the following: Department of Ageing and Rehabilitative Services, Northern Virginia Development Board SkillSource Group, Inc. and Virginia Career Works Center, Federal Bureau of Prisons, Department of Labor, Virginia Community College System, Department of Social Services, Boaz and Ruth, Department of Juvenile Justice, Offender Aid and Restoration of Richmond, Step-Up, Inc., Virginia Employment Commission and the Education and Training Corporation.

Barriers: None.

Gaps: None.

Collaborations to Reduce Homelessness

Assets: The VADOC makes continual efforts to reduce homelessness of reentering offenders by working with other state agencies and community groups. The VADOC participates in the Workgroup on Release of Special Needs Inmates facilitated by the Governor's Office. Partner stakeholders include Department of Social Services, local Social Services offices, the Richmond City Criminal Justice Agency, and

Department of Behavioral Health and Developmental Services. The workgroup developed a shared protocol for release of offenders with special needs, provided a blue print for use by communities that are planning for the return of these offenders, and established long-term public policies to address this growing population. VADOC staff regularly meet with the Housing Director for the Department of Veterans Services to discuss meeting the needs of the homeless veteran population.

Barriers: Community housing for violent offenders is extremely limited due to funding, community attitudes about perceived risk, public policy and barrier crime laws. There are also tremendous barriers to placing offenders with health care needs in assisted living or nursing home care due to associated barrier crimes and an overall lack of available Medicaid/Medicare beds in the Commonwealth.

Gaps: There are huge gaps in community housing for violent offenders and offenders with mental or physical health care needs due to public policy, funding, and public perceptions.

Norfolk Re-entry Court Docket

Assets: Implemented as a pilot in 2011, the State's first re-entry court is funded through a federal grant to the Virginia Supreme Court and includes partnerships among VADOC Probation and Parole District #2, Norfolk Circuit Court, Norfolk Sheriff's office, Norfolk prosecutors, faith based organizations, and community treatment providers. The program is modeled after the city's drug court and is designed to take 18 months to complete, including a 6 month stay in jail followed by community supervision and services. Re-entry Court participants make regular appearances before the Judge and can receive immediate sanctions for misbehavior or recognition for appropriate behavior. The program is aimed at reducing recidivism and includes workshops on GED preparation, anger management, and employment skills. The program is voluntary and is generally part of sentencing for a probation violation.

Barriers: The program exists only in Norfolk City and is dependent on federal grant funding.

Gaps: The program exists only in Norfolk.

Probation/Parole Supervision

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC implemented evidence based practices (EBP) in all its Probation and Parole Districts. VADOC is implementing EPICS II, Effective Practices in Correctional Setting, as a key element of EBP. EPICS II is a supervision technique that combines three skill sets: relationship building, bridging skills, and cognitive intervention skills. These skills are designed to be used by correctional staff in regular interactions with offenders to help motivate and guide change. Relationship skills include active listening skills to establish rapport and enhance intrinsic motivation to change behavior. The bridging skills serve as a bridge between relationship and behavior change including the use of reinforcement, punishment and effective use of authority. The intervention skills are related to cognitive model, problem solving and relapse prevention. EPICS II offers a concrete and structured method for correctional staff to help an offender identify a problem and present steps to develop solutions for the problem. Implementation of EPICS II is based on a peer training and coaching model to develop staff competency. All current staff have been trained; all new staff receive EPICS II training as part of their Basic Skills training.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

VADOC currently has 23 Senior Re-entry Probation Officer positions to serve the Intensive Re-entry Programs. The role of these positions is to increase long-term public safety by helping to prepare incarcerated offenders for successful re-entry and reintegration into the community and bridging the gaps between prisons and community supervision. The Re-entry Probation Officers provide incarcerated offenders, family members and other stakeholders with opportunities to learn about and discuss community supervision issues and re-entry challenges before the offenders are released. The positions serve as a link to local community resources and with community stakeholders to enhance effective re-entry.

Probation and Parole District staff continue to implement Thinking for a Change peer support groups to provide continuity and support as offenders transition from prisons to community supervision.

In 2019, we are beginning a statewide rollout of EPICS II in our institutions for counselors, cognitive counselors, and treatment officers. This will provide additional tools to promote behavior change both inside the facility and in the community.

Director of VADOC, Harold Clarke has issued a strong edict to staff that VADOC will engage in organizational development to create a culture that establishes and supports offender change and re-entry preparation. The VADOC has made strong progress in creating more internal continuity among its prison and community corrections operations, which supports successful re-entry. Collaboration, training, and role clarification have led to a culture shift in the agency. With the implementation of the Integrated Re-entry Model and the Healing Environment Initiative, a level of oneness has been created between community corrections and institutions. In addition, the VADOC has trained all staff in the use of dialogue which has enhanced collaboration and communication.

The position of the Dialogue and Business Practices Administrator provides leadership, direction, and organization to the development and implementation of effective cultural changes, communication strategies and decision making; dialogue to support re-entry and the public safety mission.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

The VADOC began utilizing SOARING, an implementation strategy to increase the use of evidence-based practices in daily interactions with those under VADOC care, in partnership with George Mason University in 2013. SOARING includes three components: E-Learning where staff complete modules to ensure understanding of the use of EBP's, observations where supervisors observe staff interactions with their clients and provide feedback on skill use, and a quality improvement process where the districts review their own data and develop plans to improve their outcomes. In 2019, VADOC expanded to include an additional nine sites, for a total of 21 probation districts utilizing the SOARING model.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

As noted above, some positions have been received to assist with re-entry. Probation Officers continue to face challenges of high caseloads and staff turnover. VADOC has been successful in referring most low

risk cases to electronic monitoring which maximizes the officer's time with those offenders who are medium or high risk.

Pre-release Services

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Case Management Services: The VADOC case-management services are in line with evidence-based practices. The COMPAS Risk and Needs Assessment instrument is fully implemented across the agency for facilities and probation districts. Based on the results of the assessment for each offender, an individualized Re-entry Case Plan is developed to guide their participation in programs that will help lower their risk of recidivism.

Re-entry Councils: The VADOC Wardens, District Chief Probation Officers and their staffs continue to be active participants in the Councils.

PAPIS Programs: The VADOC continues to use PAPIS providers within the prisons where such services are available.

Re-entry Specialists: Consistent with the approved strategic re-entry plan, re-entry specialists have been reorganized to effectively work certain areas of the state. Their role is to identify and work to build resources to assist returning citizens.

An additional Statewide Re-entry position was added due to the increased challenges associated with discharge planning for those offenders suffering from severe medical and mental health conditions. They also assist with finding placements for challenging releases.

Intensive Re-entry Pods/Cognitive Community Programs: Consistent with its re-entry strategic plan, the VADOC has fully implemented the Intensive Re-entry Programs at 15 prisons as well as re-entry pods at higher security prisons.

Re-entry Pods/Cognitive Community Programs at Higher security prisons: Sussex I State Prison, one of DOC's high security prisons, recently implemented a re-entry program and had its first commencement.

Work Release Program for Women Operated by Spectrum Health Systems, Inc.: In 2013 a work release program was implemented at Deerfield Women's Work Center for offenders who have transitioned through the Intensive Re-entry programs. The program is operated by a Spectrum Health Systems, Inc. Work release is available for carefully screened female offenders in the last 90 days before release to better prepare them for law abiding re-entry. The program allows offenders to be employed in real world jobs and to save money prior to release. While on work release, the participants return to the prison at night and continue programming related to effective transition.

Career Readiness/Life Skills Programs: Offender Workforce Development Specialists deliver career readiness portions of life skills training to offenders participating in the prison Intensive Re-entry Programs. Prison counselors deliver Life Skills programming that is not workforce development related. Topics include how to budget or locate housing.

Cognitive Therapeutic Community programs: VADOC continues to operate therapeutic community programs for male offenders at Indian Creek Correctional Center and for female offenders at the Virginia Correctional Center for Women.

Veterans Re-entry Programs: Haynesville and Indian Creek Correctional Centers operate specialized re-entry preparation and support programs for veterans. These programs help address the unique needs of veterans and help them learn how to access available federal benefits. Several other institutions operate veteran pods that allow offenders to live together but do not provide veteran re-entry services. Veterans at these institutions will undergo re-entry through the designated Cognitive Community when they are within 12 months of release.

Thinking for a Change: This evidence-based cognitive behavioral program has been implemented in the prisons and follow-up peer support booster program implemented in community corrections for those who are released.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Resources for programs and post-release services are a large barrier. Space in which to operate programs is often a limiting factor.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

Gaps continue to be limited resources for programming, limited community housing resources for placement of offenders without home plans, and lack of available jobs. Another critical gap is a lack of substance abuse programming at security level 1 (minimum custody) facilities and for intensive substance abuse programming at detention/diversion programs.

Residential Community Facility

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC continues to contract for approximately 195 community residential program beds. These beds are essential to the re-entry success of the VADOC. There are currently beds for both female and male offenders released to supervision.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Funding is the primary barrier in this area. There are community partners who want to open housing programs but without startup funding these opportunities are minimal.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

A huge gap remains between the number of beds available and the offenders needing placement. There are interested parties willing to establish community residential/transitional programs, but they look to

the VADOC for funding. Beds are critical in the eastern part of the state where residential programs do not exist for the VADOC.

Electronic/GPS Monitoring

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Supervision through technology (such as automated self-reporting systems) continues to be a cost-effective manner of monitoring low risk offenders in the community. GPS Technology is also used for higher risk offenders to augment staff supervision practices.

Employment/Job Training

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Virginia Correctional Enterprises (VCE): VADOC continues to operate correctional industry programs, many of which include on-the-job training in areas where offenders may find employment after release. Offenders work for VCE in prison jobs producing goods or services for sale to state agencies and other entities within government. Many of the skills that offenders in these jobs learn related to the manufacturing process, including upholstery, furniture building, printing, and commercial laundry, are transferable to jobs offenders may apply for following release from prison.

VADOC Agribusiness work programs: Agribusiness operations provide incarcerated offenders with skilled work training that should help them find employment after release. In one initiative, offenders who work with beef cattle on VADOC farms receive training from the Virginia Tech Vet School's veterinarians and participants receive certificates for "Beef Quality Assurance." The offenders learn the proper way to administer vaccines for heart health using techniques that limit exposure of drugs to the beef. They also learn how to handle the cattle in a way that limits the stress on the animals. VADOC also partners with Virginia Cooperative Extension with the assistance of the Department of Agriculture and Consumer Services to train offenders in the use of pesticides under the Virginia Pesticide Act, and participants can become a Registered Technicians. In a new multiple agency partnership among the VADOC, Virginia Department of Health and the U.S. Food and Drug Administration, incarcerated offenders who work in the prison Milk Plant and Dairy are provided with a special course that covers plant sanitation, milk pasteurization, and passing inspections. Offenders will receive a certificate for successful completion of this program.

Wastewater Operations: Offenders working in the VADOC wastewater treatment plants receive on-the-job training from work foremen in maintenance of waste water plants, laboratory work and clerical skills. Offenders may become qualified as a licensed Wastewater Treatment Plant Professionals.

Workforce Development: The VADOC's workforce development program is operated in conjunction with its re-entry efforts. Staff provide career readiness preparation, assist in resume and portfolio development, and register offenders on the state employment network prior to release. Job Fairs involving employers from nearby communities are held twice per year at each re-entry program sites.

VADOC Food Services work program: VADOC is providing offenders who work in its prison kitchens with the ServSafe Food Certification training and Foundations for Culinary Arts and Restaurant Management Level 1&2. Since being implemented in early 2011, over 13,800 offenders have passed the ServSafe

exam and received the nationally recognized food industry certification. Since the Foundations program started in late 2012, 700 offenders have passed the Foundations for Culinary Arts and Restaurant Management Level 1 (a six-month course) and/or Level 2 (also a six Month Course) nationally recognized food industry certification. In addition, the VADOC has converted the former vendor operated staff cafeteria at its headquarters to an offender food industry training program. VADOC have also converted 17 Staff Dining hall at the Facilities into offender food industry training programs. Offenders prepare and serve food for staff and visitors while participating in the ServSafe class and Foundations for Culinary Arts Level 1&2. Participating offenders also learn skills that will help them manage a restaurant including sanitation, food supplies, waiting tables, food code, and working the cash register.

Federal Bonding Program: The program enhances offenders' employability. VADOC was designated as the Federal Bonding program coordinator in July 2011. The federal bonding program is an employer job-hire incentive that limits the liability of employers that hire at-risk job seekers with prior criminal convictions. The VADOC partnered with a number of agencies and employment stakeholders to develop and oversee its approach to providing the program. The VADOC provides letters to offenders acknowledging they are bondable and then the employer may contact VADOC to request the offender become bonded.

Career and Technical Education Live Work Program: The programs work as an element of the Career and Technical Education programs to provide a simulated workplace providing custom work projects for the correctional facilities, state employees and non-profit organizations statewide. The live work program provides students the opportunity to work with clients and provide goods and services saving tax dollars for the state as well as provide additional funding back to the program to continue its mission. Live Work programs include Welding, Print Production, Cosmetology, Barbering, Cabinetry, Upholstery, Small Engine Repair, Communications Arts and Design, Auto body Repair, Automotive Repair, Motorcycle Repair, Commercial Cleaning, Carpentry, Sheet Metal Fabrication, and Horticulture.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Barriers continue to be a lack of space for sufficient programming and staff resources. Another barrier is that most employers use the internet as a means to accept job applications and incarcerated offenders are unable to access the internet due to security issues. To work toward removing this barrier, the VADOC is installing dedicated internet circuits to provide highly controlled Internet access for Internet-enabled services for Offender Technology Stakeholders in VADOC Operations and Programs, Re-Entry & Education. As of October 2018, Verizon has completed installing the circuits at 9 of the 35 locations thus far (River North, Lunenburg, Fluvanna, Augusta, Appalachian, Wallens Ridge, VCCW, Dillwyn, Coffeewood). Verizon has submitted and scheduled the requests for the remaining 24 sites and is installing the circuits on a weekly basis.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

The need for employing offenders in meaningful work within prisons exceeds the VADOC's resources.

Alcohol and/or Drug Addiction

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

For offenders assessed with a high need for substance abuse treatment, the VADOC continues to operate Cognitive Therapeutic Community Programs. They require longer duration and intensity of treatment for offenders than those offered to general population offenders who complete the intensive re-entry program.

For offenders assessed with a moderate need for substance abuse treatment, the MATRIX program has been modified to remove faith-based references. The MATRIX model is provided as a treatment group within the Intensive Re-entry Programs as well as in most VADOC institutions. However, VADOC has initiated a new evidence-based substance use disorder treatment curriculum, Cognitive Behavioral Interventions for Substance Abuse (CBI-SA), to replace MATRIX. This curriculum was developed by the University of Cincinnati Correctional Institute (UCCI) and staff facilitation trainings have taken place. The curriculum is expanding Department wide.

Probation and Parole Districts continue to contract for substance abuse services with the local community services boards and/or with private providers. Contracts now include requirements for evidence-based practices. Through an RFP in 2019, a new Outpatient Substance Use Contract has been established. This contract ensures that services are adhering to best practices and ethical standards. The VADOC has 28 different vendors on the contract.

The VADOC drug testing program continues both in prisons and in community corrections.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Resources for security level 1 facilities where previously no intensive substance abuse treatment was available, has been addressed in 2018 through the implementation of two new drug treatment programs at Halifax CC and Rustburg CC. Halifax's program was developed through a Federal Byrne grant and Rustburg's program was funded through a Federal Residential Substance Abuse Treatment (RSAT) grant.

The VADOC has established an MAT (Medical Assisted Treatment) Program through the use of naltrexone. The program is offered to those offenders in the Cognitive Therapeutic Community Programs or participants involved in the Community Corrections Alternative Programs (CCAP). As the client moves through treatment, they voluntarily commit to the MAT Program and work with a regional Recovery Support Navigator to ensure a continuum of care post-release. There are three designated Districts in the MAT Program (Norfolk, Richmond, Tazewell).

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

The VADOC has not received funding to reinstate the transitional substance use disorder treatment programs that provide a halfway house for graduates discharging from the Cognitive Therapeutic Community programs following release. An intense Cognitive Therapeutic Community Program is

needed at the lower level facilities to ensure this population receives necessary substance use disorder programming. Funding is not available to staff such a program.

Peer Recovery Specialists are used nationally to assist with substance use and mental health programs. The VADOC has submitted an application for grant funding to develop a Peer Recovery Specialist (PRS) system to support the probation districts. These PRS could facilitate programming and offer crisis counseling. Resources and funding are needed for the services.

Mental Health

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

VADOC continues to provide mental health screening and core services to offenders with varying types and degrees of mental health needs. VADOC has re-entry procedures related to mental health services that are outlined in Department Operating Procedure 820.2.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

Resources for follow-up care are critical issues. It can be challenging for local CSBs to schedule appointments for returning citizens until they have actually been released from VADOC custody. Given limited community resources, this process can increase the risk of offenders with mental health issues who may deteriorate and/or not receive needed medication. In addition, services for offenders under community supervision who have a mental health diagnosis cannot be mandated to be provided by the CSB until they are in crisis.

Finally, supportive housing for offenders with mental health issues is not readily available, especially if those offenders have special needs such as cognitive issues or a history of sex offenses.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

The prevalence of incarcerated offenders who have mental health issues continues to steadily increase, and is now at 31%. Emergent clinical issues, such as increasing trends in the occurrence of neurocognitive disorder, trauma history, and gender dysphoric disorder demand a higher level of specialized training and experience in working with these complex concerns. Staffing levels have not increased concurrently with acuity and complexity of clinical issues. Recruitment and retention of health care professionals remains a major challenge. In addition, the gaps between service and community needs have been widened by the focus on treatment of serious mental illness (SMI). Individuals who grapple with substance use disorders and other mental health diagnoses may not be eligible for this new programming where the bulk of current grant funds have been directed.

To manage these challenges, VADOC is focused on implementation of more group programming hours, and are hiring mental health technicians to run psycho-educational groups and activities. We are piloting peer mentoring programs and tele-behavioral health to provide more services and a greater array of therapeutic options. VADOC has increased the availability of "specialty" pods to reflect the risks and needs of the current population. A Mental Health Initiatives Administrator has been hired to help establish, support, manage, and/or track many of these Mental Health programs, projects, and

initiatives. The additional support provided by the Mental Health Administrator will ensure proper implementation, oversight, coaching, and follow-up to enhance the effectiveness of the initiatives.

VADOC is conducting a staffing study to ascertain ideal staffing levels, and are bolstering recruitment packages.

The implementation of twenty-four clinicians in the community serving as liaisons and consultants to the P&P offices has helped to bridge the service gaps between community resources and supports after release from jail or prison.

Family Reunification

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC operates a family/parenting program at eight facilities. The program is specifically designed to provide offenders the training and opportunity to practice skills to rebuild and maintain the vital relationships in their lives with their children, spouses or significant others, as well as extended family members.

VADOC Re-entry Probation Officers offer re-entry seminars for offenders and families to help prepare them for the challenges of returning to the community.

The VADOC continues its partnership with several faith-based and non-profit organizations to provide a video visitation to families, which supports family reunification and continued social support/communication while the offenders are incarcerated.

VADOC has developed a seminar to brief families about the re-entry expectations and probation requirements of returning offenders.

Within the past year, the role of the Parenting Coordinator has expanded to a statewide manager to ensure resources, programming and partnerships are throughout the VADOC. In addition, the VADOC was awarded a grant through the Department of Juvenile Justice to establish the Building Family Bridges Program within three pilot sites in the VADOC. Thus far this program has reviewed parenting curriculums and established two gender responsive, evidence based programs for implementation/expansion. Staff facilitation training is being scheduled. In addition, an Advisory Committee was established that has created strong collaboration with community partners in the field of parenting/child trauma. VADOC policies are being reviewed to ensure they are in-line with best practices and trauma informed care training for staff is being reviewed for implementation. Finally, visiting practices are being examined and visiting rooms in the three pilot sites will be enhanced to ensure a safe atmosphere that will encourage family reintegration.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

The VADOC is not funded for resources to facilitate extensive family reunification efforts, therefore is dependent on faith-based and other volunteer groups to assist.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

The video visitation program is under-utilized by families of incarcerated offenders. The VADOC is holding regular meetings with stakeholders to see how the program can be marketed more extensively.

Mentoring

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC has a partnership with Prison Fellowship to operate three faith-based re-entry preparation programs that includes mentorship for the year following release. The mentoring is currently offered at State Farm, St. Brides, and Fluvanna Correctional Center for Women. Mentors are also available at Indian Creek for a faith based mentoring program.

Peer Support has been recognized as an effective and evidence-based practice. The VADOC is exploring the involvement of peer supporters to enhance re-entry services in various ways. Programs under development include peer Dialogue Facilitators to enhance communication skills and engagement both in the institution and following release and certified peer support counselors providing groups within the institutions to prepare for re-entry and within the Districts to support the individuals upon release to the community.

Future enhancements to the conditions of confinement for offenders being managed in restrictive housing environments include the potential utilization of offender Peer Recovery Specialist and tutors to assist with the delivery and facilitation of an established set of psycho-educational programs, electives, and activities. The specialist will also serve as an asset to the Shared Allied Management (SAM) Units by mentoring and providing services to a: mental health population, offenders requiring frequent medical attention without the demand to reside in an infirmary, and individuals who are at greater risk for victimization or being bullied due to characteristics such as a cognitive challenge, age (seniors and youthful), or small in stature or timid personality.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

The VADOC is continually seeking volunteer mentors who are positive role models for offenders.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

It is difficult to recruit mentors, and VADOC largely depends on faith-based volunteer agencies. The Youthful Offender Program at Indian Creek Correctional Center would greatly benefit from a mentorship program; however, resources and volunteers are challenging to secure.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

The current mentorship program is small and exists at three prison with approximately 100 participants.

Education

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The Correctional Education unit of the VADOC provides academic and vocational programming to incarcerated offenders. In 2019, the VADOC won the Governors Public/Private Partnership Award from VCU for its ongoing collaboration with industry leader Johnson Controls. This Green HVAC program provides state of the art technology furnished by Johnson Controls to the facility to help instruct the students on the latest Green HVAC initiatives. The DOC's Instructor collaborates with Johnson Controls on new learning materials to aide students to gain necessary skills and industry credentials that provide career opportunities post release. The growing demand in the green HVAC market will provide many job opportunities in the Commonwealth.

In 2019, five CTE programs were reaccredited for college equivalent credit with additional credits for its initial programs. The ACE-accredited courses offered are business software applications, computer aided drafting, computer graphics and design, introduction to computers and print production. Upon release, ex-offenders may submit an accredited transcript to higher education institutions for potential transfer credit in a degree program. Based upon the initial success of the program, the VADOC Correctional Education plans to seek ACE accreditation for additional courses, including welding, HVAC, plumbing and masonry.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Correctional Education Recidivism studies proves that correctional education practices effectively reduce recidivism. Our Career and Technical Education programs' recidivism rate is currently 12.3%. More resources would help additional returning citizens participate in existing programming options. Waiting lists are long and some offenders reenter the community without having an opportunity to learn basic literacy or a vocational trade. There is not space or positions to offer more programming. Offenders may take longer to complete a program than originally anticipated. This prevents them from completing programs and other offenders being enrolled.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

Many offenders are released from prison without receiving educational and vocational services, some not even to the level of basic literacy. VADOC has attempted, where possible to provide programming at alternate times at facilities. VADOC has adopted an alternate school schedule at a number of facilities that provide more classroom time per week and fewer disruptions to the school day. We have incorporated the BOOK program at facilities to assist in the completion of programs. An educational committee has submitted recommendations to provide more educational opportunities at lower level facilities. These recommendations are being examined for possible implementation.

Victim Services

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC Victim Services Unit (VSU) provided direct assistance to 3,782 victims in FY2019. In addition the automated notification system provided 8,819 phone calls, 4,976 emails and 8,511 letters. Over 2,300 new registrations were processed through the VADOC VINE Automated Notification System. The VSU continues to provide safety planning, community referrals and explanation of community supervision.

VADOC provides a facilitated Victim Offender Dialogue (VOD) process. This process is victim-initiated and victim-sensitive. After a series of preparation meetings with a trained facilitator, a face-to-face dialogue may occur between the victim/survivor and the offender responsible for the crime. Due to the extensive work of VOD Program facilitators, 28 dialogues have been completed and 2 are in preparation. The VSU welcomed 6 new VOD facilitators during a training held last October.

The Victim Impact Program (VIP) seeks to provide offenders with a better insight into the harm they have caused their victims and the ripple effect of that harm throughout the community. The program is structured to hold offenders accountable and to foster empathy toward crime victims and survivors. VSU provided two, three-day trainings per year for new VIP facilitators in both 2018 and 2019. Currently, VIP programming is running in 24 VADOC facilities and 3 Probation Districts. As a critical piece and highlight to the curriculum, crime victims travel to the VADOC sites and provide offenders with first-hand accounts of the impact crime has had on their lives. VSU hosted 46 victim speaker presentations in 2018 and 25 victim speaker presentations in 2019. Since January 2018, 768 offenders have completed the program and 134 are currently enrolled statewide.

All registrations for the VADOC VINE system are coordinated through the VSU to ensure the most trauma-informed, evidence-based services for crime victims. VSU has continued to add victim data and contact logs to CORIS. An estimated 14,000 victims are now documented in CORIS. Probation officers, correctional staff and management can determine a victim sensitive case by reviewing the "victim" alert in CORIS. More than 2,300 Victim and Stakeholder Surveys were distributed in 2018.

CORIS access including the Victim Module was provided to the Attorney General's Victim Notification Program (OAG) and Virginia Parole Board (VPB) staff to allow them access to offender information and provide an improved, collaborative response to victims of crime during the post sentencing phase of the criminal justice system. VADOC remains the lead agency to receive, track, register and update the victim registration data.

In 2017, the VADOC Victim Services Unit welcomed six new positions which allowed for increased correctional-based victim services. Five of the staff are Regional Victim Advocates who assist probation offices, facilities, local victim witness programs and community stakeholders to provide information and referrals to victims. Staff partner with existing local victim advocacy to assist victims with notification and questions regarding offenders in the custody or supervision of the VADOC. The sixth new staff is the Statewide Victim Impact Advocate, who provides ongoing training and assistance to facilitators of the Victim Impact: Listen and Learn curriculum. The expansion of the unit in 2017 has yielded significant increases in services provided statewide. Overall, in 2018, data showed a 178% increase in services provided, a 61% increase in new victim registrations, and a 79% increase in victim travel reimbursement over the previous year.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

VADOC VSU Staff continue to serve on the VADOC Sex Offender Visitation Committee.

Victim Offender Dialogue (VOD) Program facilitator meetings and training continue on an annual basis. Two VOD cases are currently in the preparation phase. VOD training for 6 new facilitators was held in October 2018.

Quarterly meetings and training for existing VIP facilitators will continue. Staff continue to work with VADOC sites to launch the program where facilitators have been trained in VIP. It is anticipated that 5 new sites will launch in FY2020. Staff will continue to interview, recommend and accompany victim speakers to VIP classes to share the impact of crime on their lives.

Program evaluation, client and stakeholder surveys will continue to be distributed and evaluated.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Lack of court-ordered supervision of the offender still creates a risk for victims. The VSU attends local and state victim advocacy meetings to provide feedback regarding observed barriers that can be managed at sentencing. VSU developed and facilitated four regional trainings in 2018, offered to local stakeholders including, victim/witness, victim advocates, Commonwealth's Attorney's Offices, Law Enforcement, and Probation & Parole, regarding post-sentencing victim services offered by VADOC. VSU staff presented at three trainings hosted by the Virginia Victim Assistance Network and the Action Alliance as part of their Basic Skills for New Victim Advocates as well as their annual training conference in November 2018.

Victims still struggle with threats and harassment from offenders. Social networking and the internet are used along with traditional methods such as phone and letters. Some jurisdictions will not issue a protective order if the offender is incarcerated. Victims are referred to local law enforcement and prosecutors' offices for additional assistance. VADOC utilizes a 136B disciplinary infraction for offenders who communicate with a member of the general public with the intent to cause or instill the fear of death, injury, terrorism or intimidation. VSU staff communicate with the victim and/or local victim/witness program and then write the charge to be processed at the facility.

Restitution collection remains limited and offenders are released from supervision without completing these obligations.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

There have been significant changes to the Victim Services Unit to address the lack of staffing and resources for post-release victim assistance and notification. With the additional six positions funded by a federal Victims of Crime Act (VOCA) grant in 2017, the regional victim advocates averaged over 700 victims served per year/per advocate in 2018-2019. The new regional positions allow for proactive communication to assist victims with information and provide referrals regarding the correctional and re-entry phases of the criminal justice process. Regional advocates work in collaboration with existing victim resources to improve information, services and referrals to victims. They also serve as a liaison for the victim during all phases of VADOC custody and supervision.

Since there had never been regional victim advocate positions in VADOC prior to 2017, the VSU was tasked with integrating the positions into the mainstream operations of the VADOC. In 2018 and 2019, the VSU conducted more than 35 presentations and/or trainings to educate and spread awareness on the needs of crime victims in the Commonwealth. This awareness has created a dialogue and opened the door to invaluable departmental collaborations statewide to assist in the safe reintegration of offenders back into the community.

Re-Entry Focus Areas

Women

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VADOC has established Intensive Re-entry Programs or Cognitive Substance Abuse Therapeutic Community Programs at all female prisons. Within the two years, the Cognitive Therapeutic Community Program at the Virginia Correctional Center for Women has implemented gender responsive curriculums. This change has led to greater investment and stronger participation from the offenders enrolled.

The VADOC implemented a gender specific version of the COMPAS Risk and Needs Assessment instrument designed for female offenders in 2017. All VADOC Women's facilities now use the WRNA, as well as nine Probation and Parole Districts. Based on dialogues with staff, trauma training was added in 2019 to improve competencies to address the complexities of justice-involved women.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

In 2018 VADOC conducted a series of multidisciplinary dialogues to generate a vision for the design of a gender-responsive, trauma-informed system of custody and care of female offenders. In July of 2019, implementation began to design the new structure for this system. Plans include movement of all female offenders to the Central Region under one administration for better coordination of care, consultation from national experts in the field of women's corrections, gender-responsive and trauma-informed training for security, non-security, and executive leadership, and gender-specific improvements in curriculum, job-training, family reunification, and re-entry.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Funding for programs, services and post-release special needs for women is needed.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

There are few specialized services for women leaving prison. Gaps include housing, trauma counseling and substance abuse care, child care, and transportation.

Veterans

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

VADOC has a Veteran Programs Manager position that is designed to lead VADOC efforts in support of incarcerated veterans. VADOC has also created a part-time Veteran Support Technician position to assist with the re-entry needs of offenders who are veterans and to manage the C&P exam appointments and liaison with the VA and its contractors to assist in the exam completions.

All prisons have been directed to establish a Veterans Group where security issues and numbers allow, and where volunteers are available to support the program. The groups are to be voluntary and supported by veteran volunteers in the community. Established programs are currently operating at 21 correctional facilities. Twelve facilities have established, or are in the process of establishing, a designated Veterans' Housing Unit that would allow the incarcerated veterans to live with one another and assist each another with peer-specific issues.

The VADOC utilizes the Veterans Re-Entry Search Services. This is a website sponsored by the VA to assist agencies in identifying potential Veterans. Over the last calendar year approximately 200 additional incarcerated veterans have been identified. This enhances the Department's ability to strategically link them with veteran-specific organizations that will assist with their re-entry needs.

The VADOC works with a wide range of internal and external stakeholders that focus on assisting the needs of justice-involved veteran. The Department participates on the Governors' Coordinating Council on Homelessness- Veterans Committee (GCCHVC) whose goal is to prevent veteran homelessness. Additionally, VADOC is a member of the Virginia Military and Veterans Coordinating Committee (VMMCC) that is currently focusing on reducing veteran suicides. They are leading the Governor's Challenge for suicide prevention.

The VADOC is in negotiations with the American Legion to open additional American Legion Posts within correctional facilities. This will help with several veterans' issues including the Compensation and Pension application process, increase comradery and enhance current re-entry initiatives.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Funding for services is an issue. The incidence of post-traumatic stress disorder (PTSD) is higher among veterans who need more treatment services, particularly mental health and physical health services. The VADOC is largely dependent on the volunteer support by community veterans to run programs.

Please describe any past or current gaps and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

The VADOC is currently in the process of hiring its part-time Veteran Support Technician that will assist with scheduling the C&P exams.

Data and Information

Case Information

Please describe any improvements or updates made to your agency's information system in the last year.

VADOC continues to update VACORIS to improve operational efficiencies and outcome tracking associated with re-entry efforts.

Please describe any grant funding that your agency has received for re-entry-related initiatives. Please provide the title of the grant, a brief description of the grant project and what the funding is being used for, the total amount of funding that the grant will provide, and when the funding has/will terminate.

VADOC has a number of formula and discretionary grants contributing to the agency's re-entry-related initiatives. Funds are primarily federal and received as either pass-through or direct awards.

Education Grants: Each year, VADOC receives two education grants through the Virginia Department of Education for specific educational purposes. Educational achievement is a dynamic risk factor, which these grant funds help address. The Individuals with Disabilities Education Act (IDEA) grant provides funds to support special education services for incarcerated offenders under age 21 with a qualifying need for such services. The Strengthening Career and Technical Education for the 21st Century Act (Perkins V) provides funds to support career and technical education programs. Virginia's 2019 IDEA allocation is \$100,279 and the Perkins V allocation is \$157,696. Funding is federal and distributed on a formula basis annually.

Building Family Bridges: In late 2018, VADOC received Second Chance Act grant from the Office of Juvenile Justice and Delinquency Prevention to improve services for incarcerated parents and their minor children. The project, entitled Building Family Bridges, will implement a number of pre- and post-release strategies and activities to foster positive parent-child engagement, thereby strengthening relationships and reducing recidivism. Building Family Bridges includes training and parenting programs offered throughout VADOC facilities, as well as wrap around re-entry and transitional services for offenders and families in three pilot facilities. VADOC's award is \$667,829 with an end date of September 30, 2021.

Substance Abuse Services: VADOC receives grants of federal funds through the Department of Criminal Justice Services (DCJS) supporting two substance abuse programs for incarcerated offenders nearing the end of their sentences. The Web-Based Substance Abuse Program (WBSAP) utilizes an innovative web-based program at Halifax Correctional Unit. For the third year of the program (October 1, 2018-September 30, 2019), the project received \$36,898 in federal funds. VADOC provided a \$12,300 cash match. Funding from DCJS is anticipated to continue one more year at the same level, through September 30, 2020.

A Residential Substance Abuse Treatment (RSAT) program is located at Rustburg Correctional Unit. Now in its third year, VADOC receives \$88,671 in federal funds, providing \$29,557 in cash match. Funding is anticipated to continue for a fourth year at the same level, with an end date of June 30, 2021.

Administrative Response Matrix: VADOC continues work begun in 2016 under a federal Second Chance Act Innovations in Supervision Initiative grant of \$748,470 from the Bureau of Justice Assistance. Now integrated into VADOC's case management system, the Administrative Response Matrix (ARM) helps guide probation officers in designated pilot sites to select sanctions based upon an offender's individual criminogenic risk/needs and the severity of the violation when responding to significant supervision events, and increase the use of incentives. Use brings consistency among officers and encourages utilization of evidence-based strategies. Project funds continue through September 30, 2021.

Victim Services: VADOC receives federal and state funding through the Department of Criminal Justice Services (DCJS) supporting regional victim advocates, the Victim Impact Program, Victim Offender Dialogue, and other victim services. Advocates assist victims with safety planning and community-based

referrals; the Victim Impact Program attempts to provide offenders with insight into the harm they have caused their victims and the ripple effect of that harm throughout the community; and the Victim Offender Dialogue is a victim-initiated process leading to a possible face-to-face dialogue between the victim/survivor and the offender responsible for the crime.

VADOC receives an annual grant of federal and state funds for one position. Federal funding for six additional positions and related expenses is competitively awarded. For FY2020, VADOC receives \$98,582 (federal plus state funds) for the one position, and \$600,000 in federal funds (with a \$150,000 in-kind match) for the remainder. Annual funding is anticipated to continue for the one position. Future funding for the remainder of the program is expected for at least one additional year, with additional years' dependent upon ongoing federal allocations and DCJS award determinations.

Please describe any legislative funding that your agency has received for re-entry-related initiatives? Please provide a brief description of the intended purpose of the funding and what the funding has been used for to date, the total amount of funding that the grant will provide, and when the funding has/will terminate.

In FY2019, a total of six full-time cognitive counselor positions were added to Probation and Parole Districts located in Staunton, Richmond, Chesterfield, Norfolk, Manassas, and Petersburg, Virginia. These positions are designed to provide programming that addresses criminal attitudes and thought patterns and improve prosocial skills. In addition, all Probation and Parole Districts now have increased access to VADOC mental health staff who provide assessments, consultation and support, and programming services.

Department of Criminal Justice Services (DCJS)

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

Pre-release and Post-Incarceration Services (PAPIS)

DCJS administers funding for Pre-release and Post-Incarceration Services (PAPIS) programs. PAPIS programs currently receive a state appropriation for re-entry services totaling \$2.3M, and serve 96 of the 133 jurisdictions in Virginia. The nine PAPIS programs are: Northwestern Regional Adult Detention Center (Winchester); Colonial Community Corrections (Williamsburg); Northern Neck Regional Adult Detention Center (Westmoreland); OAR-Arlington; OAR-Fairfax; OAR-Jefferson Area; OAR-Richmond; STEP-UP (Tidewater); and Virginia CARES (seven locations mainly located in the southern and western parts of Virginia).

PAPIS programs work closely with local and regional jails, local community probation and pretrial agencies, state probation and parole, and local community leaders to provide a continuum of services that promote public safety and effectively utilize justice system and community resources.

DCJS currently partners with the Virginia Department of Social Services (VADSS) to provide PAPIS programs with Supplemental Nutrition Assistance Program Employment Training (SNAP ET) funding. SNAP ET is federal funding that helps participants gain skills, training, or work experience to increase their ability to obtain regular employment that leads to economic self-sufficiency. VADSS allocated \$250,000 for PAPIS programming during FY2019. DCJS distributes these funds to PAPIS programs as reimbursement for a portion of expenses programs incurred on behalf of eligible re-entry clients.

PAPIS providers continue to partner with the Department of Corrections (DOC) for services in many prisons and probation and parole districts. PAPIS programs are integrated into many Community Criminal Justice Boards, Local Re-entry Councils, and statewide re-entry steering committees.

Either by directly providing the assistance, or through partnerships with various community organizations, PAPIS programs assist clients with housing, clothing, and other emergency transitional assistance. According to FY2019 data the state funding for PAPIS programs 19,174 placements to services for returning citizens. Below is breakdown of services by type.

Pre-release Services

- Mental Health - 470
- Substance Use Disorder - 498
- Cognitive Behavioral - 424
- Life skills - 1,330
- Transition Case Plan - 778

Post-release Services

- Mental Health - 1,003
- Substance Use Disorder - 1,065
- Cognitive Behavioral – 206
- Life skills – 1,535
- Transition Case Plan – 1,137
- Clothing Assistance – 1,245
- Food Assistance – 696
- Housing Assistance – 1,390
- Transportation Assistance – 1,775
- Identification Vital Record Assistance – 1,267
- Medical Health Assistance – 1,815
- Employment Readiness – 1,818
- Employment Placement - 722

Residential Substance Abuse Treatment

DCJS administers federal grant funding for the Residential Substance Abuse Treatment (RSAT) programs. RSAT programs provide residential substance abuse treatment for incarcerated inmates to prepare them for reintegration into the communities by incorporating re-entry planning activities into treatment programs. The goal of the RSAT program is to break the cycle of drugs and violence by reducing the demand and trafficking of illegal drugs.

DCJS administers grant funding for RSAT programs at Western Virginia Regional Jail, and facilities operated by the Department of Corrections (DOC). In FY 19, approximately 100 inmates received substance use disorder and re-entry services as a result of RSAT programing.

Edward Byrne Memorial Justice Assistance Grant

DCJS administers Byrne grant funds for Loudoun County Community Corrections and facilities operated by the Department of Corrections (DOC) to provide substance use disorder (SUD) treatment for offenders under their supervision.

Victim Services

DCJS currently awards approximately \$60 million in state and federal funds to 450 grant programs working with victims of all types of crimes. Victim services funding provided by DCJS is primarily focused on the delivery of direct services to crime victims. The grants are supported by federal Victims of Crime Act (VOCA) and Violence Against Women Act (VAWA) funds, as well as state general and special funds. All funding sources permit use of funds to provide services to victims of crime who are incarcerated, including those who experienced victimization prior to incarceration and those who experienced victimization while incarcerated.

Please describe any pending or upcoming collaborative efforts that involve your agency.

DCJS is continuing work with all of the aforementioned programs to expand collaborative re-entry efforts in the upcoming year.

Virginia Department of Education (DOE)

School divisions and the DOE maintain student information systems that collect demographic data about all enrolled students, including those in detention educational programs. The data meet federal and state reporting requirements including students' schedules, grades, teachers, and test scores. The data system enables the sharing of student information to facilitate re-enrollment and placement in schools upon release and preparation of re-entry plans prior to release. Timeliness in providing information from students' records to agencies and school divisions is crucial to the preparation of students' enrollment plans upon release and academic course planning when the juvenile is admitted to a correctional facility. Training to reinforce enrollment regulation procedures and designating personnel within agencies to work with re-entry and re-enrollment have facilitated the timely receipt of student information for transition planning.

Department of Forestry (VDOF)

The Virginia Department of Forestry maintains work release agreements with facilities in the Department of Corrections, as well as three regional jail authorities. Through these agreements, the agency provides specialized training and supervision of inmate crews that support wildland fire suppression operations, help with grounds maintenance, and provide other assistance.

VDOF trained inmates in forest fire fighting at the following Department of Corrections facilities during 2019:

- Patrick Henry Correctional Unit in Henry County
- Camp 18 at Coeburn in Wise County
- Appalachian CCAP in Russell County
- Duffield Regional Jail in Scott County

Because of the small number of fires during 2019, we did not utilize any of the trained inmates during this fire season. Offenders from the Albemarle County/Charlottesville regional jail continue to assist with lawn care, landscaping, and maintenance at the agency's headquarters in Charlottesville.

The training and skills learned through this collaborative effort are applicable to a number of career disciplines and can be of benefit to the inmates upon release.

Department of Housing and Community Development (DHCD)

The DHCD does not provide direct services to offenders.

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

DHCD helps to organize and staff the Governor's Coordinating Council on Homelessness (GCCH), which coordinates services from a range of agencies that are targeted to preventing and ending homelessness. DHCD also serves on the GCCH's Solutions Committee which has included the coordination of efforts related to the intersection between criminal justice and homelessness systems. When requested the committee responds to local and regional requests to support efforts focused on reducing homelessness and recidivism, addressing services for behavioral health and substance abuse disorders; sharing best practices and initiatives from the state and national levels that address homelessness and recidivism reduction; and facilitate and promote Virginia's goal of reducing chronic homelessness. In the coming months, the GCCH and DHCD will explore other ways to support efforts of the Governor's office focused on improving outcomes of returning residents.

Department of Juvenile Justice (DJJ)

The Department of Juvenile Justice operates and is responsible for the vast majority of local Court Service Units (often known as juvenile probation offices) across the Commonwealth, as well as the state-operated Juvenile Correctional Center, Bon Air. The Department's mission – to protect the public by helping court involved youth become productive citizens – is best accomplished through individually tailoring the right mix of accountability and rehabilitation to meet the identified risk and need levels for every youth who walks through our doors, and making sure that we use data, research, and evidence-based practices to inform the interventions and services we provide. Over the last several years, the Department has undertaken a rigorous self-analysis to make sure that we are using resources effectively, and getting the outcomes we want for the youth, families, and communities we serve. This analysis led us to develop an ambitious plan to transform our work to get better outcomes for the children, families, and communities we serve.

Our transformation efforts break down into three core initiatives: (1) Safely **Reduce** the use of the large and aging juvenile correctional facilities; (2) **Reform** correctional and treatment practices within the facilities and with youth returning to communities; and (3) Develop a plan to ultimately **Replace** DJJ's two facilities with smaller, regional, treatment oriented juvenile correctional centers, and a statewide continuum of local alternative placements and evidence-based services.

These principles have been instrumental in guiding the Department in meeting its fundamental goals of reducing the risk of reoffending for court-involved youth, improving and promoting the skills and resiliencies necessary for young people to lead successful lives in their communities, and improving public safety for citizens throughout the Commonwealth. With the ongoing implementation of several transformation efforts, a fourth strategy has been added: (4) **Sustain** the Transformation Plan by maintaining safe, healthy, inclusive workplaces; continuing to recruit, retain, and develop a team of highly skilled and motivated staff; and aligning procedures, policies, and resources to support the team in meeting the goals of transformation.

In fiscal year 2019, there were 325 juveniles released from commitment, the majority of which were placed on juvenile parole supervision through a court services unit (CSU). DJJ understands the unique needs of juveniles transitioning back to the community and has specific programs and services to address these needs. Community based funding provides short-term services to support and assist the youth's re-entry to the community. The use of these contracted services is guided by the youth's level of risk and need. Resources are focused on those youths at greatest risk of re-offending and whose offense pattern represents a particular risk to community safety. Services include modalities based on cognitive-behavioral principles and community-based interventions that build upon treatment provided during confinement. Services, interventions, and strategies address the criminogenic needs identified by the Department's risk assessment instrument, the Youth Assessment & Screening Instrument (YASI), and included in each youth's Comprehensive Re-entry Case Plan (CRCP).

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

As the Department continues to build upon the strength of its collaborative relationships, we continue to expand those partnerships as the need arises. DJJ partners with the Department of Social Services (VDSS), Office of Children's Services (OCS), Department of Behavioral Health and Developmental Services (DBHDS), Department of Medical Assistance Services (DMAS), the Department of Motor Vehicles (DMV), Department of Education (VDOE), Department of Aging and Rehabilitative Services (DARS), Community College Systems (VCCS), and the Department of Corrections (DOC) to link juveniles returning to the communities after commitment with the highest and most appropriate levels of support. Expanded partnerships include: partnering with DSS to serve committed youth aging out of foster care; partnering with VADOC to serve youth transitioning to the DOC's community supervision; and partnering with DBHDS to serve confinement and transitional age youth (18-21) in need of mental health/substance services. Additionally, the Department continues to work with our community partners (e.g., local departments of social services, secure juvenile detention centers, and community based non-profits) to provide step-down and wrap-around services for released juveniles.

Other specific collaborative efforts include:

Transportation to Juvenile Correctional Centers (JCCs) and Other Placements for Visitation: The Department's partnership with AFOI, James River Transportation, and VanGo Transportation continues to provide transportation to families visiting Bon Air, the Community Placement Programs (CPPS), and other placements. From 7/1/18 – 6/30/19 there were 1,618 riders this fiscal year.

Family Engagement: DJJ continues to strengthen its efforts to improve family involvement. The Family Engagement Workgroup, a collaboration between Bon Air's Student Government Association (SGA), family members of youth committed to Bon Air, and DJJ staff continue to meet monthly to address the goals set forth in an action plan that reinforces family engagement and connectivity.

In addition to a fulltime Family Engagement Coordinator, DJJ has hired a Family Advocate to be a voice for families involved in the system. The Family Advocate is a parent of a youth formerly involved in DJJ. The Family Advocate's involvement has provided families with a platform to feel safe and heard, and to provide feedback on policies that may result in unintentional consequences.

Foster Care Children: The DJJ and the VDSS entered into a memorandum of agreement (MOA) setting forth guidance for the local departments of social services and requirements for DJJ on how to

effectively manage committed juveniles who were in foster care immediately prior to commitment and who will be released prior to their 18th birthday. The MOA has been revised to enroll youth who age out of foster care while in commitment into Fostering Futures. Fostering Futures provide independent living resources to support youth over the age of 18 as they return to the community.

Licenses and Identification Cards: The partnership with DMV has expanded to include remote driver knowledge testing at Bon Air Juvenile Correctional Center and state ID issuance at Juvenile Detention Centers (JDCs). With remote driver knowledge testing, committed juveniles take proctored tests with DJJ employees on-site, eliminating the need to transport juveniles to DMV.

Reenrollment: DJJ and VDOE work with localities to reenroll juveniles returning to a public school upon release from commitment. School divisions, State Operated Programs, and the DJJ Division of Education collect demographic data for all enrolled students. Each agency complies with federal and state reporting requirements and tracks data regarding students' academic and behavioral progress. Obtaining and sharing complete student records is crucial to the academic course planning when the juvenile is admitted to a correctional facility and in preparation of students' enrollment plans upon release. Representatives from each agency collaborate to share student information. This collaboration facilitates preparation of re-entry plans prior to release and re-enrollment and placement in schools upon release. Agencies and school divisions have established timelines to guide these processes. Designating personnel within agencies and providing training specific to enrollment procedures for each agency has aided the entry, enrollment, and re-entry transition planning.

Community Placement Programs (CPPs): DJJ and local detention centers have collaborated to serve more youth in the local communities. The programs are highly structured, disciplined residential programs in the juvenile detention centers (JDCs) for committed juveniles. CPPs are located regionally across the state so that residents will be closer to their home communities, making visitation easier for families. In FY 2017, the CPP average daily population (ADP) was 70, and there were 2,446 visitors. In FY2018, the ADP increased to 81 youth, and the number of visitors increased to 3,756. In FY2019, both ADP and visitors increased again to 86 youth with 3,994 visitors at the CPPs. CPPs focus on addressing specific treatment needs and risk factors and developing competency in the areas of education, job readiness, and life and social skills. Services provided focus on risk factors that can be changed using cognitive behavioral techniques and tailoring services to meet individual needs. Programs use the Youth Assessment and Screening Instrument (YASI) for case planning to address criminogenic need areas. We have developed partnerships at the following JDCs to serve both male and female juveniles: Blue Ridge JDC, Chesapeake JDC, Chesterfield JDC, Merrimac JDC, Lynchburg JDC, Rappahannock JDC, Shenandoah Valley JDC, Virginia Beach JDC, Prince William JDC, and Northern Virginia JDC.

Please describe any pending or upcoming collaborative efforts that involve your agency.

Medicaid Applications: HB2183 required The Department of Medical Assistance Services to convene a workgroup to identify and develop a process to streamline Medicaid applications for individuals incarcerated in DJJ, VADOC and local jails. As a result the Cover Virginia Incarcerated Unit was developed. Medicaid applications for juveniles over the age of 18 are streamlined through the CVIU prior to release.

Re-entry Evaluation: Child Trends, a research organization out of Bethesda Maryland, has been awarded a grant through the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to evaluate DJJ's re-entry reform efforts.

Please describe any past or current policy-level barriers to collaboration and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Length of Stay (LOS) Guidelines: DJJ and the Board of Juvenile Justice (Board) determined the need to review national research and DJJ data to inform a decision-making process regarding possible revision of the LOS guidelines. DJJ found that the average actual LOS of youth committed to DJJ was much higher than national averages and those of comparable states. The average actual LOS for youth released from DJJ between FYs 2013 and 2014 was 18.2 months (15.6 months for indeterminate commitments and 29.8 months for determinate commitments). Data from the 2011 Census of Juveniles in Residential Placement show the estimated national average LOS was 8.4 months, less than half of DJJ's actual average LOS.¹ Additionally, it was found that youth in direct care in Virginia stay much longer than what research suggests is the best practice. In general, research shows that youth incarceration fails to reduce recidivism and can, in certain instances, be counterproductive. DJJ's recidivism data (controlling for risk and offense) for youth released from direct care showed the probability of rearrests within one year increased by 2.4% for every additional month of LOS. The probability of rearrests within one year increased by 33.3% if the youth's LOS was longer than 15 months compared to youth with an LOS of 10 months or less. The Board aligned its LOS guidelines with research and best practices to ensure that juveniles are not held in direct care for durations that are counterproductive to success upon returning to the community.

Under the former LOS guidelines, 12-18 months was the most commonly assigned LOS for indeterminate direct care admissions. Under the current LOS guidelines, 6-9 months is the most commonly assigned LOS. The average LOS for youth released with indeterminate commitments decreased from 14.1 months in FY2015 to 13.4 months in FY2016, 10.8 months in FY2017, 8.0 months in FY2018, and 7.3 months in FY2019. The overall direct care LOS for all releases, regardless of commitment or placement type, was 13.0 months in FY2019.

Prior to the LOS revision, 46.3% of indeterminately committed youth were released early, 42.0% were released on time, and 11.7% were released late. Following the LOS revision, 74.8% of youth were released on time, 14.2% were released late, and 11.1% were released early. These results indicate that since the revision of the LOS guidelines, a greater portion of youth indeterminately committed are held for a period of time that is within their assigned LOS and shows how the Department used discretion to extend the LOS when appropriate.

The Department will continue to monitor commitment orders and examine trends for assessing the impact of the Board's changes to the LOS guidelines and of the ongoing establishment of the continuum of care for committed youth.

JCC Behavior Management: Beginning in May 2015, the JCCs began implementing the Community Treatment Model (CTM) program to promote juvenile rehabilitation while decreasing inappropriate behaviors during commitment. The main tenets of the model include a highly structured interactive program with meaningful and therapeutic activities while using consistent staffing and a team approach on each housing unit. Similar approaches, when adopted in other states, have resulted in improved

¹ This figure is based on the average number of reported days in custody on the census date for youth with a legal status of "committed" and placed in a long-term secure facility; it does not represent their final LOS.

behavior within the facilities and decreased reoffending upon return to the community. The CTM uses a relationship-oriented approach that helps residents identify and resolve negative behaviors that contribute to their criminogenic risk. The CTM offers a demanding, carefully crafted, multi-layered treatment experience that challenges the youth and helps them make lasting behavior changes and prepare for successful transitions back to the community. By integrating elements of trauma-informed care within the CTM, resilient residents can work to improve self-regulation, decision-making, and moral reasoning to become healthy adults and citizens.

In October 2019, the primary training focus has been trauma-informed care and group facilitation; keeping aligned with best practices in addressing trauma. Bon Air JCC has reduced the use of punitive isolation. In fiscal year 2018, the Department received a grant to participate in a national cohort sponsored by the Office of Juvenile Justice and Delinquency Prevention (OJJDP)/Center for Coordinated Assistance to states through the Counsel of Juvenile Correctional Administrators focused on the reduction of isolation in youth facilities. Over the last three years, Bon Air Juvenile Correctional Center has seen a steady decline in the use of isolation. The CTM is the facility's unit-centric behavior management program, and includes principles and methods employed to correct a resident's inappropriate behavior in a constructive, therapeutic, and safe manner. The CTM helps residents achieve positive behavior through the implementation of program expectations, treatment goals, resident and staff safety and security, and the resident's Personal Action Plan (PAP) and Comprehensive Re-entry Case Plan (CRCP). The CTM shall be implemented through staff training and development, DJJ procedures and manuals, staff supervision and oversight, and staff coaching. The following are various techniques that shall be used by staff as appropriate consistent therapeutic structured activities (TSAs), to include mutual help groups (MHGs), residential engagement (teaching, role-modeling, and mentoring), group facilitation (check-ins, circle-ups, and therapy groups), phase system, including privileges, behavior support contracts, disciplinary process, verbal interventions, and personal restriction in accordance with VOL IV-4.1-2.26.

Re-entry Procedures: DJJ had numerous re-entry procedures governing fragmented parts of the re-entry process across several operational divisions. To address this problem, DJJ created a unified re-entry process and set of procedures, which it continues to review and strengthen.

Please describe any past or current policy-level gaps in collaboration and how these gaps have been addressed. What efforts or initiatives aimed at minimizing these gaps have been implemented over the past year?

Family Based Services/Service Matching: Beginning in January 2017, DJJ adopted a new regionalized service delivery model utilizing two contracted companies, AMIkids (AMI) and Evidence-Based Associates (EBA), to serve as Regional Service Coordinators (RSCs). The RSCs have responsibility for processing service referrals submitted by parole officers. In May 2017, both RSCs began working with the Department to build the infrastructure necessary to develop and implement evidence-based family interventions. Two program models that have been proven to produce positive outcomes with youth involved with delinquency, Multi-Systemic Therapy (MST) and Functional Family Therapy (FFT), were adopted and added to the service menu with 12 MST and FFT (10 new, 2 existing) teams statewide. Each of the new MST and FFT teams were launched during an ambitious sixty-day roll out and began receiving referrals from October 1 to November 30, 2017. In addition to the Department's initial cohort of MST and FFT teams, independent of the DJJ's launch, Horizon Behavioral Services (Community Service Board located in Lynchburg) relaunched an MST team that had been dormant for a number of years, and Life Push launched a FFT team in Danville. While launched outside of DJJ's project, those teams will also be

available to receive referrals from the Department. Finally, in August 2019, DJJ launched a new FFT team in Abingdon to serve several previously unserved areas in Southwest Virginia. The addition of the FFT in Southwest Virginia brings the total number of MST and FFT teams in Virginia to 15. Given a 90-minute catchment area, the MST or FFT model is now available to 129 of Virginia's 133 cities and counties.

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Transition Home: In December 2018, DJJ collaborated with AMI and EBA to contract with Intercept Youth Services to establish a transitional home for youth leaving DJJ commitment and returning to the community in need of housing. Summit House is located in Chesterfield County and serves up to eight male residents between the ages of 17.5 – 20 years. Since January 2019, the program has served 17 residents. The Summit's goal is to provide an opportunity to learn, develop, and practice fundamental skills needed to increase independence, obtain employment, and contribute to communities.

Educational Programming: During the 2018-2019 school year (SY), the Division of Education continued to use the Personalized Learning Model, in which students' educational paths, curriculum, and instruction are tailored to their experiences, learning pace, and individual goals. This strategically transformed the delivery of instructional services provided to both high school and post-secondary students and moved away from the traditional "stand and deliver" teaching style. This model includes digital curriculum delivered through a system that actively tracks and reports the progress of the student. Teachers are facilitators who support learners at their varying levels of readiness, ability, and pace.

Graduation Rates: In the 2018-2019 SY, 39 students received their Virginia high school diploma, 15 students received Penn Foster diplomas for completing an equivalent online high school curriculum, and 17 students earned their GED®. For the 2018-2019 school year, 87.27% of eligible high school seniors graduated.

Virginia Tiered Systems of Support (VTSS): VTSS is a data-driven decision-making framework for establishing the academic and behavioral supports for students to be successful. VTSS aligns academics, behavior, and social-emotional wellness into a single decision-making framework to establish the supports needed for schools to be effective learning environments for all students. Positive Behavioral Interventions and Supports (PBIS) is the behavioral component of VTSS. PBIS, a data-driven decision-making framework for establishing the academic and behavioral supports for students to be successful. PBIS identifies proactive strategies for defining, teaching, and supporting appropriate student behaviors to create a positive classroom and school environment. Empirically validated interventions are utilized to implement the six essential features of PBIS, including facility-wide adoption and implementation conditions, universal behavioral expectations, systematic behavior communication, and teaching, positive reinforcement systems, instructional and function-based responses to problem behavior, and strategies for defusing aggressive or escalating behavior. PBIS ultimately impacts the very culture of the facility to shift attention to positive behavior and successful learning systems for residents, allowing them to contact success across settings, which will help increase the number of opportunities available when transitioning back into the public. The 2018-2019 school year encompassed a full school year of PBIS Tier 1 implementation. The total number of referrals out of class due to disruptive behavior decreased by 68%, and the total duration of time spent out of class decreased by 79% compared to the previous school year. 85% of school weeks averaged 2 or less referrals out of class, with 4 of those

weeks having 0 referrals out of class. Education staff collectively had an average score of 73% on the classroom fidelity tool related to Tier 1 strategies.

Technology in Education: Technology can be a bridge to connect with businesses, educational institutions and other community agencies and organizations. A focus of the Post-Secondary offerings was to provide technology-enhanced learning opportunities that produce a skilled workforce capable of meeting the changing demands of business and industry.

Post-secondary Programming: The Yvonne B. Miller Post-Secondary programs provides continuing education and/or job training skills to increase student's efforts in securing and sustaining a viable career. The Division of Education is committed to being at the forefront of innovative programming that will lead to quality technical/vocational education and academic achievement. Through our partnerships with community businesses, schools and other agencies, the Division of Education was able to expand the number of post-secondary programs and increased the number of awarded certifications/credentials this year.

This year at Bon Air, the Division of Education introduced a new Welding Simulator class and the Heavy Machine Operator Simulator class that train students on how to operate a bulldozer, backhoe, and forklift. Classroom simulations are one of the most effective methods of training today. Simulation training provides a virtual environment that mirrors actual work conditions. Students are provided real-world scenarios where they have to navigate through basic and complex situations using newly taught skills.

Through our partnership with the Virginia Department of Labor, the Division of Education was able to provide a structured work environment where students gained specific work skills through on-the-job training while earning pay. Establishing Registered Apprenticeship Programs at Bon Air is a valuable experience for students to effectively help them transition back into the community with employability skills and work as a productive citizen. Our current apprenticeship programs at Bon Air includes Barbering, Graphic Design & Sign Writer, Upholstery, and Industrial Sewing Machine Operator.

The Division of Education supports the Community Placement Programs (CPPs) by providing resources and opportunities to the post-secondary students for the purpose of continuing education after receiving a high school diploma or GED. Through partnerships with community businesses and schools, as well as collaboration with CPP staff, we are able to assess the needs of students, research jobs and college programs in each locality, and explore the appropriate program options for post-secondary students.

Transition: Education Transition Specialists work collaboratively with the Department of Aging and Rehabilitation (DARS) to ensure Students with Disabilities have the opportunity to access the Pre-Employment Transition Services (Pre-ETS) while attending school. Education Transition Specialists also work with students and families to complete Federal Student Aid (FAFSA®) applications, apply for scholarships, and explore a variety of career opportunities.

Standardized Disposition Matrix (SDM) Implementation Rollout: The Department's data shows, historically, similarly situated youth can be treated differently in Virginia's juvenile justice system based on their race or geographic location within the Commonwealth. The Department has partnered with the Annie E. Casey Foundation (Casey) and the National Council on Crime and Delinquency (NCCD) to develop a SDM, a data-driven tool to help make fair and objective dispositional recommendations based

on the youth's risk-level and offense severity. The SDM tool ensures the most intense interventions are reserved for youth with the highest risk of future delinquency and ensures low risk youth are diverted or receive alternative dispositions, which do not require probation or formal court involvement. This ensures that youth with similar characteristics will have similar and appropriate decisions made at their case dispositions. DJJ has completed a 6-month pilot of the SDM in five jurisdictions during the spring of 2019. Training of staff and stakeholders along with plans for local implementation began in July. A full implementation is planned for January 2020.

Department of Social Services (VDSS)

The Department of Social Services is committed to ensuring that Virginia's most vulnerable residents have access to the services and benefits to help them find permanent solutions to life's many challenges. The Department is responsible for administering a variety of programs, including Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Adoption, Child Care Assistance, Refugee Resettlement Services, Child Protective Services, Child Support Enforcement, and conducting Medicaid and Family Access to Medical Insurance Security eligibility determinations. The Department's goal is to promote the well-being of our citizens through the delivery of essential services and benefits to ensure families are strengthened, and individuals achieve their highest level of self-sufficiency. Accordingly, VDSS has worked to include support for returning citizens as a standard element of its core functions rather than a separate initiative.

VDSS is integrating the "Protective Factors" framework throughout agency programs as a case management strategy to improve outcomes when working with children and families. The "Protective Factors" framework provides a foundation for increasing parental resilience, understanding the importance of social connections, understanding where to obtain concrete support in times of need, gaining knowledge of parenting and child development, and understanding the social and emotional competence of children. Ex-offenders and juveniles returning home to their families and communities can face daunting challenges. This case management strategy focuses on working with the entire family to overcome challenges that impede family re-unification.

In order to support individuals being released from the Department of Corrections or Department of Juvenile Justice who may have serious medical conditions, individuals apply for Medicaid as a part of their pre-release planning. Pre-release planning permits individuals who are completing their term of confinement to apply for Medicaid and have their eligibility determined prior to release. Eligibility is to be determined based on the living arrangement anticipated upon release. Individuals who are determined to meet all Medicaid eligibility requirements are to be enrolled in the appropriate Medicaid coverage beginning with the date of release.

Local Departments of Social Services

Virginia's local departments of social services support re-entry in a variety of ways. Local human services directors serve as co-conveners, members of convener teams and members of local re-entry councils. Numerous agencies have staffs who are engaged in prisoner outreach and LDSS staff process applications for services and benefits from incarcerated individuals and returning citizens.

Human Services

The VDSS public assistance programs serve as a safety net for limited income individuals and families. Included in those served are victims of crime, individuals previously incarcerated and family members of victims and offenders. The array of programs carried out within the social services system support safe

stable nurturing environments and relationships where adults, children and families can thrive. The community services of the agency facilitate a collaborative community based approach among service providers, businesses and community organizations that supports family strengthening and positive outcome efforts for families.

Services and benefits delivered through the Virginia's state supervised and locally administered social services system and through community partners include:

- **Services Programs**
 - Child Welfare
 - Adoptions
 - Foster Care
 - Child Protection
 - Regulation of Day and Residential Care for Adults and Children
 - Child Support Enforcement

- **Public Assistance Programs**
 - Supplemental Nutritional Assistance Program (SNAP)
 - Supplemental Nutritional Assistance Program Employment Training (SNAPET)
 - Medicaid
 - Family Access to Medical Insurance Security (FAMIS)
 - Temporary Assistance for Needy Families (TANF)
 - Unemployed Parents (UP)
 - Auxiliary Grants
 - Energy Assistance
 - Child Care

- **Community and Volunteer Services**
 - 2-1-1 VIRGINIA
 - Community Service Block Grant Program (CSBG) & Community Action Network
 - Family and Children's Trust Fund (FACT)
 - Family/Domestic Violence Prevention
 - Refugee Resettlement
 - Volunteerism
 - AmeriCorps/Community Service
 - Virginia Community Re-entry Initiative
 - Fatherhood

- **Community Action Agencies**
 - **For Children and Youth**
 - Head Start, Literacy Programs, Dropout Prevention, Summer Youth Employment Programs, College Counseling and Placement, Nutrition and Food Programs, Substance Abuse Education, Prevention and Counseling
 - **For the Working Poor**
 - Child Care, Adult Education, Job Training and Placement, Small Business Development, Budget Counseling, Financial Education, Free Income Tax Preparation including Earned Income Tax Credit

- **For the Poor in Crisis**
 - Homeless Shelters, Domestic Violence Programs and Shelters, Transitional Housing, Energy Crisis Assistance, Emergency Food, Clothing and Services, Eviction Prevention
- **For the Elderly**
 - Meals-on-Wheels, In-Home Care Programs, Senior Centers and Day Care, Transportation, Volunteer Services
- **For the Entire Family**
 - Family Development Support, Nutrition Education, Parenting Education, Health Clinics, Weatherization Assistance, Home Ownership Programs, Individual Development Accounts, Community Centers
- **For the Entire Community**
 - Housing Development and Renovation, Economic Development, New Business Ventures, Safety and Crime Prevention, Consumer Education, Neighborhood Improvement, Pre and Post Incarceration Services

Division of Child Support (DCSE)

The Division of Child Support Enforcement engages families for success through the operation of programs that offer progressive, holistic, family-centered approaches that promote the well-being of children. Through collaboration with community partners and other governmental agencies, the Division helps parents overcome obstacles that inhibit their ability to provide the emotional and financial support their children need to grow and thrive.

The Division of Child Support Enforcement supports Prisoner Re-entry by providing pre-release information and post-release direct assistance to returning citizens in pre-release programs and resource fairs at state prisons, regional and local jails, and DJJ facilities; and by partnering with government agencies and community organizations to plan and provide offender transition and re-entry services. The Division of Child Support Enforcement provides parents information about child support services, re-entry services, and guidance on how to best navigate the child support system upon release.

Family Strong Re-entry Program

The Family Strong Re-entry Program is designed to assist noncustodial parents facing barriers related to current incarceration and prior criminal convictions. The participants work closely with a Case Manager to address barriers limiting their ability to support their children. The Case Manager will connect the participant with community resources and assist the participant with finding stable employment, obtaining orders based on current ability to pay and successfully reintegrating into society and their children's lives. Parents currently incarcerated in the Virginia state prison system and local or regional jails are offered, pre-release, general information about child support processes, specific information about their cases and the opportunity to immediately participate in the Family Strong Re-entry Program upon release.

Family Reunification

The VDSS Family Engagement process is part of the agency's Children's Services Practice Model. Family engagement is a relationship focused decision making approach that involves and empowers both the family and the community in the decision making process related to family stabilization and permanency for children. Re-entry related Family Engagement activities include:

- Family Partnership Meetings – Child Protection, Prevention and Foster Care workers actively seek out family members- including those individuals who have experienced incarceration- to participate in meetings where decisions regarding the safety, placement and future of children and families served by the local Department of Social Services are made. The Family Services Division and VDSS Domestic Violence program develop resources, protocols and training for how best to work with families for whom Domestic Violence has been identified as an issue. This includes how to engage non-offending parents and extended family members in identifying issues, insuring family safety and improving the likelihood the service referrals will be appropriate; how to engage the offending parent and help them take responsibility for their actions; and activities around how to prepare for Family Partnership Meetings so that offending parents are able to safely participate in case decision making. It expected result is that fewer fathers with a history of domestic violence and/or criminal charges will be excluded from participation as a result of these resources.
- Virginia Birth Father Registry has provided services to assist individuals who have experienced incarceration or are currently incarcerated to register with the Virginia Birth Father Registry in order to protect their parental rights.
- Child Protective Services has grantees that work with individuals who have experienced incarceration to reduce child abuse and neglect and prevent child abuse.
- The Permanency Regional specialists provide guidance on working with family members of children in foster care including individuals who have been incarcerated. Although these family members may not be suitable for placement, they may be able to provide support to another family member.

Memorandum of Understanding

The Virginia Department of Social Services, Virginia Department of Aging and Rehabilitative Services and the Virginia Department of Corrections entered into a Memorandum of Understanding to identify the roles and responsibilities of each agency regarding the release of homeless offenders with medical conditions and/or mental disabilities to ensure their continuity of care.

Protocol for Re-entry Planning for Offenders with Special Needs

The Virginia Departments of Social Services, Virginia Department of Corrections, Behavioral Health and Developmental Services (DBHDS) and Department for Aging and Rehabilitative Services/Adult Protective Services Division developed and approved a recommended protocol to plan release by VADOC of a homeless offender with medical conditions or mental disabilities or DBHDS of a civilly committed sexually violent predator (SVP) into the community without a home plan.

Virginia Employment Commission (VEC)

Please describe any collaborative efforts made by your agency within the last year and the impact of these efforts.

VEC staff collaborates with workforce system partners to provide pre-release information sessions for local jails and prisons throughout the Commonwealth. These information sessions include job market information; how to prepare for interviews; Work Opportunity Tax Credit (WOTC) opportunities; where to obtain training; referrals to pre-employment supportive services; workshops, etc. The VEC provides

instruction on resume writing and effective job search techniques. The goal is to provide information and assistance prior to release.

Staff also works with community agencies and other organizations established to assist ex-offenders. These organizations assist the VEC staff in scheduling pre-release information sessions. Representatives may also meet with ex-offenders in VEC offices and other one-stop locations to provide one-on-one help to ex-offenders.

VEC Veterans' Services staff also works with the Department of Labor ETA VETs Program to provide "stand down" services for homeless vets who are ex-offenders. They collaborate with businesses to offer job opportunities and services. During the activity, barbers offer free haircuts. Clothing and personal care supplies are also provided. Organizations provide information on housing, transportation, training, employment, and other services.

Please describe any past or current policy-level barriers to collaboration and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

The sharing of data and records is a perennial challenge for front line staff. Over the past year, the co-location of workforce partners in Virginia Career Works Centers has greatly improved collaboration and information sharing.

Employment/Job Training

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VEC joined a statewide initiative to provide professional development for workforce professionals. The Sector Strategies and Career Pathways Academy was developed to operationalize career pathways and sector strategies in the Commonwealth. VEC workforce professionals began taking classes this year, which includes class and online curriculum as well as community of practice in which workforce professionals can share resources in an online setting. The knowledge gained from this training opportunity can be used to assist ex-offenders who are entering the workforce.

Please describe any past or current barriers and how these barriers have been addressed. What efforts or initiatives aimed at removing or managing these barriers have been implemented over the past year?

Lack of funding is the VEC's primary barrier. The state of the local and regional economy in some areas is a barrier when job opportunities are limited.

Education

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

Beyond the information sessions for transitioning offenders mentioned above and group training about resume writing and effective job search techniques, the VEC Job Services program does not provide training. However, as noted below, if the transitioning offender is a veteran, our Jobs for Veterans State Grant may be able to fund job training.

Women

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

The VEC does not differentiate our services based on the gender of our clients.

Veterans

Please describe any efforts, programs, or services implemented by your agency within the last year and the impact of these assets.

VEC Disabled Veteran Outreach Program staff collaborates with local jails and prisons throughout the Commonwealth to provide pre-release information sessions for veterans. Further, this program provides intensive services to veterans who have significant barriers to employment. The definition of significant barriers includes incarceration. The services are wide-ranging based on individual needs, and can include housing assistance, job training, and case management.

Please describe any pending or upcoming efforts, programs, or services that involve your agency.

The VEC continues to expand the Veterans Services programs. We are currently in the process of hiring additional Vet Representatives to maintain and expand the intensive services described above

Virginia Indigent Defense Commission (VIDC)

The Virginia Indigent Defense Commission on behalf of the 25 Public Defender Offices

Alexandria Public Defender Office

Staff from this office serve on the city's re-entry taskforce that is led by the Adult Probation and Parole office. The task force is a collaboration of City and state agencies and private entities who work together to identify resources and services for those citizens returning to the community following incarceration in order to aid them in making a productive transition. We also work with the re-entry committee at Alexandria Detention Center—part of a taskforce that works with mentally ill individuals being released to the community from the local jail called the forensic team (formerly called the Collaboration for Recovery and Re-Entry, CORE). This task force designs treatment alternatives for mentally ill clients as an alternative to incarceration for people who are in custody following arrest. This group is part of the larger Mental Health Diversion Committee that addresses diversion alternatives for mentally ill clients at all stages in the criminal justice process—from encounters with police on the street through post sentencing. Our office serves on this Committee as well.

The Mental Health Diversion Committee oversees the CIT program and the forensic team. This year some magistrates have taken the initiative in ordering clients to mental health treatment as soon as they are brought to the jail when setting conditions of release, thereby avoiding the booking process. When advised of these cases, we are able to watch for these people at advisement at which time we are appointed as counsel. We can then work with these clients at the earliest possible time to assist them in being successful while on release. This allows for a seamless transition through all stages of the case. Early diversion of those who could be safely managed in the community results in better outcomes and less jail days. It also eases the process of re-entry upon completion of the criminal case. Communication and coordination in these cases is crucial.

We have been working with a deputy commonwealth's attorney to whom cases are now assigned in which a defendant's mental illness is a cause of the criminal conduct charged. In cases in which the crime did not result in significant victim injury, she works with us to devise a plan to provide services, successful completion of which, results in either dismissal or reduction of the charge. It is helpful to have these cases referred to a specific prosecutor who has a great deal of experience in handling criminal cases, as well as the authority to resolve cases in ways that are much more beneficial to clients than would otherwise be the case.

The Public Defender has been working with the Commonwealth Attorney, the CSB, probation, pretrial and the Circuit Court to develop a treatment court in Alexandria for people with substance abuse disorders. The first participants entered the program this August. The treatment team and representatives from all of the agencies involved attended a several- day training program presented by the National Center for Treatment Courts. The model we are using is appealing because it only accepts people who are both high risk to reoffend and who are high need because of the severity of their addiction. Unlike some other models, our treatment court is not designed to take primarily low level drug users who would otherwise be successful on probation in order to create better statistics for the drug court. Further, the program is specially designed to offer clients a better resolution of their cases if successful, than they could achieve by litigating their cases or entering a standard plea. Clients are thereby much more incentivized to participate and succeed. Unfortunately, we did not receive a grant for which we applied that would have provided needed funds for the program. We do not have a coordinator and so instead, the prosecutor designated to handle the treatment court serves also as the coordinator. We hope future grant requests will be successful in obtaining funds needed for a coordinator and to address certain other practical needs we have identified. Our initial group of participants will be limited to five people to allow time and resources to address any issues we identify in the early stages of operation.

The Public Defender also serves on the Correctional Services Advisory Board to the Sheriff. The Board is composed of representatives from various criminal justice agencies and from the business community as well as citizen representatives. Its mission is to provide input on programming at the jail that can ease the transition of those leaving custody to the community and to enhance inmate rehabilitation efforts. The Board recommends and supports innovative programming at the jail to include college courses for inmates offered through the local community college. The courses offer an introduction to college and the opportunity for inmates to begin their college careers, which they can resume on campus once they are released. Inmate completion and pass rates in classes have been very high.

The Board also supports certificate courses in food handling through ServSafe which is a valuable credential for former inmates seeking employment in the food service industry. The Board is continuing to explore the possibility of providing CDL courses to incarcerated people as the first step toward becoming licensed upon their release. Unfortunately, we continue to have difficulty in finding a teacher to replace the one who resigned. The Board sponsors employment fairs at the jail at which local employers come to meet with inmates and accept applications. Through Offender Aid and Restoration, inmates with three months or less on their sentences work with a counselor to develop a re-entry plan. Other life skills programming is also offered such as the thinking for change program. This is an evidence- based program offered several times during the year. Inmates can also participate in other life learning programs like Pathways to Peace, anger management, and mental health and substance abuse treatment groups.

Barriers: This office continues to face challenges when trying to connect clients who have challenging mental health and criminal histories with residential mental health services. Housing is a significant issue for many clients returning to the community either because of the client's past history or the nature of the charge. Lack of stable housing can be a significant barrier to successful re-entry. We continue to work with other agencies and the CSB to address difficulties in securing the full range of services for the seriously mentally ill and those who have substance abuse dependency who have failed in treatment efforts in the past. We continue to maintain efforts to increase diversion interventions at the early stages after arrest (i.e. between advisement and bond motions).

We are working with jail and with the CSB staff to improve communication and divert clients as early as possible. Early intervention is crucial in helping all clients succeed in re-entering the community upon conclusion of their cases. A challenge we continue to face are the charging decisions made by police involving clients who were psychotic during encounters on the street. We continue to see situations in which people seeking help, but acting bizarrely at a hospital or other location are taken into custody, committed to a facility only to be criminally charged once they are stable enough to be released. This results in decompensation and further incarceration. We urge a protocol to follow these cases to ensure compliance with treatment without having to charge the person with an offense resulting from serious mental health crisis. We initiate a review of cases known to us by the Mental Health Diversion Committee in order to identify points at which better decisions could have been made.

Arlington Public Defender Office

We encourage police to refrain from seeking warrants for people who can be managed and stabilized through the mental health system. Tragic consequences can and do result from the escalation of trauma and panic that can result from the force employed in an arrest.

The Office of the Public Defender (OPD), along with the Sheriff's Office and Department of Human Services (DHS), developed a Re-entry Committee in the Arlington County Detention Facility in 2010. The Committee previously met twice a month to discuss clients scheduled to leave the detention facility within ninety days. In the past several months, however, meetings have become less frequent due to the development of the Community Re-entry Unit (CRU), which became open to clients in the Arlington County Detention Facility in spring of 2018. The unit houses over 40 individuals with upcoming release dates, and emphasizes programming aimed at preparing them for their transition back into the community. Community organizations and employers also make periodic speaking appearances in the unit to educate clients about the resources and opportunities that will be available to them upon their release. Overall, OPD's relationships with agencies in the community have strengthened due to this re-entry effort.

Although there is consistent attendance by DHS staff at Re-entry Committee meetings, at times there still continues to be a challenge linking clients directly from jail to residential treatment programs in the community. The OPD continues to build relationships within the DHS in order to create a more reliable system of placement of our clients into residential treatment facilities. Although there continues to be barriers in getting people linked directly into residential treatment programs from the jail, the process has improved due to increased communication among agencies.

In 2011, Arlington created a pilot project, Project Exodus, for clients with severe mental illness ("SMI") reentering society from jail and prison. Since then, the project has been established as a program. The OPD serves as a steering committee member and as a source of referrals. During the creation of the

program, the OPD assisted in creating the Memorandum of Agreement among committee members and developing eligibility criteria. The Probation Department and the Department of Human Services meet with specific clients prior to their release to set up a plan together, which involves an agreement for therapeutic engagement. Once released, the probationer meets with both a clinician from DHS and his/her probation officer, in a collaborative effort to ensure that the client receives the appropriate supports for meeting obligations of probation. Once a month, the whole Project Exodus team meets and reviews program client progress.

Since 2015, OPD has been working with DHS to create bond diversion plans to divert defendants who are mentally ill from pretrial detention following the Sequential Intercept Map at intercept 2.5. OPD is involved with DHS for OPD clients' jail diversion at the magistrate level under the Post-Booking Magistrate Project ("PBMP") following the Sequential Intercept Map at intercept 2. We have had several successful jail diversions of people with mental illness at the magistrate or bond level. Through coordination between the magistrate or judge, the CSB and the OPD, we have been able to monitor cases of people who were diverted by the magistrate or judge so that we are aware of them prior to the court date to make sure the process of meeting with counsel for the first time is seamless. Communication and coordination in these cases is crucial, which is why the OPD, DHS, and jail mental health staff engage in weekly Forensic Staffing Calls. These calls, which typically span 1-2 hours, consist of all parties tracking updates about a shared caseload.

Arlington was disappointed not to receive funding for a full time mental health diversion counselor to create jail diversion plans for mentally ill and dually diagnosed people who are held pretrial. Early diversion of those who could be safely managed in the community would result in better outcomes and fewer jail days. Funding for a full-time mental health diversion counselor would be helpful to create jail diversion plans for the mentally ill and dually diagnosed people who are held pre-trial. Currently, creating appropriate plans is often too time-consuming within the current infrastructure. The proposal for this position was carried over from FY2018 by the CSB Mental Health Subcommittee, but still has not been resolved. Since this has been ranked by the group as priority #3, it is likely that the proposal will be made again.

In 2017, Arlington created a Risk Need Responsibility Group known as the RNR Group. The goal is to enhance positive outcomes for persons with mental illness reentering the community through the use of evidence based practices. The group is comprised of DHS, OPD staff, CA's office, JDR probation, District 10 State Probation and CCU's local probation. The group meets monthly at the OPD. In 2017, Arlington purchased the RNR Simulator Tool from George Mason University's Center for Advancing Correctional Excellence. The RNR Simulator Tool officially went "live" in September 2018. At this time, the tool is being tested on clients who are currently engaged in Bond Diversion programming, to gauge the accuracy of the simulation's community treatment recommendations. DHS plans to train District 10 Probation and Pretrial Services in use of the tool so that both bond candidates and release planning candidates can be assessed for appropriate treatment.

In addition, staff from OPD serve and attend on the Mental Health Criminal Justice Committee "MHCJRC", the Community Service Board Mental Health sub-committee, the Mental Health Docket Committee, and Drug Treatment Court. All of these programs address alternatives or diversions at parts of the traditional criminal justice system or intercept model and re-entry programming. These stakeholders work together to assist in re-entry or diversion from the criminal justice system including but not limited to Crisis Intervention Training, diversion of defendants who are mentally ill from

different intercepts of the criminal justice system, addressing treatment for substance addiction and housing first.

In 2017, Arlington agreed to transition 6 shelter beds into diversion beds for SMI/Criminal Justice involved homeless individuals. These beds are housed in the Residential Program Center (RPC Shelter) and make up the Re-entry Programming Unit (RPU). At this time, the RPU runs 12 groups Monday-Saturday. Participants typically spend 3-9 months in the program, at which time a focus is placed on the strengthening of prosocial community engagement.

In 2017, Arlington started the Arlington Addiction Response Initiative "AARI" to address opioid addiction in the community. OPD staff attends monthly meetings with representatives from local hospitals, treatment centers, sheriff, police, school and DHS. OPD continues to advocate for diversion and treatment instead of entry or incarceration in the criminal justice system for opioid substance addiction.

Bedford Public Defender Office

At this time there exists no formal re-entry program at the Blue Ridge Regional Jail (BRRJ) in Bedford. Or, indeed at any of the jails in the BRRJ system. The Amherst Regional Jail has the interfaith life skills improvement course which is twice a day for six weeks covering such topics as anger management, parenting skills, dealing with issues of substance use and abuse, and life skills of all kinds. Initially the program will be limited to state responsible inmates who will not be transferred to VADOC custody (inmates with sentences under two years) but the program administrator hopes to expand the program to local inmates and to other facilities within the BRRJ system as soon as funding will allow.

A major barrier to the effectiveness of this program is the lack of incentive for inmate to participation. At VADOC such programs are mandatory but that is not the case within the regional jail systems. While the regional re-entry coordinator would like to somehow make such programs mandatory, this office would prefer the carrot (additional time suspended for participation) to the stick (a new and onerous condition of release).

Starting in January, 2017 the Bedford Office of the Public Defender has officially joined the Bedford Area Resource Council (formerly the Bedford Area Re-Entry Council) and has a representative present at each meeting so far this year. The BARC is comprised of representatives from the Department of Social Services, Probation and Parole, Sheriff's Department, Town Police, Horizon, Johnson Medical Center, School Board, Family Preservation Service of VA Humankind, Bedford Community Health Foundation and Lake Christian Ministries.

Our Mitigation Specialist, Renee Burkey, now receives updates on upcoming job fairs, transportation assistance (Bedford is, at long last, launching new public transportation), available housing, food banks, and free adult education classes. Ms. Burkey has also this year gotten herself on DSS Director Andy Crawford's email chain for these regular updates.

In addition to the above, the Bedford Public Defender's Office works with Probation and Parole, both adult and juvenile, to identify alternatives to incarceration on the sound theory that avoiding an "exit" precludes any need for re-entry. The lawyers in this office are also trained to advise their clients that a probation officer is better viewed as a resource than as jailer. In our experience this can increase the level of communication between the probationer and the officer and often serves to encourage

probation officers to assist released offenders with such things as life skills counseling when difficulties arise, rather simply punish the released offenders.

The Public Defender has also been a long time member, and frequent chair, of the local CCJB. During the length of that tenure this Judicial Circuit has seen a marked increase in diversion from jail to supervision by the CCCA, as well as an increase in pre-trial release which can be instrumental in avoiding the aforementioned "exit." We have not been closely involved in prisoner re-entry in Roanoke. We do, however, on occasion become involved with re-entry and the various agencies that assist in that regard.

Charlottesville Public Defender Office

"Healthy Transitions" was initiated by collaboration between the District 9 Probation Office, and Region Ten Community Services. Initially this program was donation funded and has since been receiving ongoing funding by the localities we serve, Charlottesville and Albemarle County. Our office had experienced challenges referring clients (who have the opportunity to avoid a felony conviction) into this program as the program was initially designed to assist clients on supervised probation following a felony conviction and/or returning to the community from prison/jail. This limitation was corrected in 2014 by amending the program requirements to allow individuals under misdemeanor or pre-conviction probation to participate while they are under the supervision of Offender Aid and Restoration (OAR). This is important as clients with federal disability benefits can lose these important benefits, which are critical to their ongoing success in treatment, if they incur a felony conviction.

Mental Health and Wellness Coalition provides medication management and counseling services to clients without Medicaid, insurance, or funds to afford these services elsewhere. These services continue to be available through community funding (\$100,000 grant provided by the Charlottesville-Albemarle Community Foundation). Albie LaFave is our office representative and serves on both the Steering and Programs Committees. The "Navigators" for this program have assisted several of our clients in becoming productively engaged with service providers in our community, significantly improving client outcomes in court and allowing client favorable disposition agreements, but, more importantly, improvement in clients' quality of life in the community.

Our Therapeutic Docket Program began taking cases in February, 2018. Our Steering Committee put in many hours of hard work to establish parameters to make this program successful. It is successful so far and the participants are doing well, particularly given the numerous challenges this population faces. The "navigators," a staff role supported by "Partners for Mental Health" have shown themselves to serve an even more critical role in the successes of our participants by helping to overcome barriers to service, which may seem like small barriers to some, but end up being larger barriers for our clients. Our General District Court judge is superb at running this docket, and community partners have stepped up with enthusiasm to make this docket a success.

The "Local Inmate Workforce Program" continues to be successful, giving local inmates the opportunity to work in the community for local government and receive credit towards court costs and fines based on a minimum wage reimbursement schedule. This provides no cost services to the community and provides valuable work experience, job skills, work references, etc. to inmates. One major benefit of the program is that the payment of court costs enables inmates to keep their driver's licenses, something that can significantly improve their chances of successful re-entry into the community. Also, some inmates who have done well in the workforce program have been able to obtain full-time paid employment while still in jail and they can continue that employment after their re-entry into the

community. Our office was very involved in the process of developing the workforce program. This year the program continues to grow and VDOT has praised the program and helped increase its capacity by using inmates to do more road repair work, freeing up VDOT staff time to address higher priority needs. Our local jail has been given another 24 bed unit to house the growing number of participants. This program is continuing to prosper under the progressive jail administration.

Progress continues to be made on how probation violation cases are handled through collaboration with community stakeholders working within Evidence Based Decision Making (EBDM) workgroups. Our office actively participated in revising procedures for handling probation violations, in collaboration with judges, Commonwealth's Attorneys, probation officers, court staff and others. The above process is still ongoing, although new initiatives have been recently announced through the District 9 Probation Office. These initiatives involve inmates released from prison and address their counseling needs while under probation supervision. Our office is participating through EBDM channels. Previous treatment options offered by probation (VAPTO) were very much "one size fits all." Newer alternatives are much more progressive and promise to be much more effective. Our criminal justice planner and partners with Region Ten CSB are cutting edge at collecting data to research and support these efforts, and we have been surprised by the numbers of incarcerated individuals have a serious mental illness.

Our Citizen's Advisory Committee is supporting Re-Entry efforts at our local jail and has learned much about these initiatives recently.

Albie LaFave serves on the Region Ten Community Services Board, Liz Murtagh on the Drug Court and Evidence Based Decision Making (EBDM) team. Both Albie LaFave and Liz Murtagh serve on the Therapeutic Docket Board.

Chesapeake Public Defender Office

Our office is a stakeholder that participates in the Mental Health/Criminal Justice committee that meets with the Sheriff, Police, CSB, commonwealth's attorneys, magistrate, dispatchers, and other members of the community. It discusses current community needs of the mentally ill individuals involved in the criminal justice system and new programs. It oversees the crisis intervention training the police department and 911 staff, as well as the crisis intervention assessment center. It provides an alternative for the police when dealing with mental health involved offenders.

Judge MacDonald, chief Judge of the General District Court, heads up a behavioral health docket. The office remains involved with the mental health criminal justice committee.

The Chesapeake Correctional Center offers a re-entry program for inmates close to their release dates.

The Hampton Roads Regional Jail started a Forensic Advisory Team to address their mental health populations many needs. Many agencies are involved including local Public Defender Offices and CSBs. It also has a CORE program, Community Oriented Re-entry.

Our office actively participates in Drug Court with the CSB, police department, Probation and Parole, and the CWA in the circuit court. Because many drug involved cases are often dual diagnosed, Drug Court often identifies and makes referrals for mental health treatment as well as substance abuse treatment.

Drug Court often uses resources to assist participants in maintaining a stable healthy lifestyle. The drug court number of participants has significantly expanded.

Danville Public Defender Office

We continue to use the Alpha Program, a local substance abuse program. The in jail portion of the program is 4 months long and is held at the Danville City Jail. The outpatient part of the program is 9 months long and held at Danville Pittsylvania Community Services.

We work closely with Probation and Parole, both Adult and Juvenile, to identify and implement appropriate services that are beneficial to our clients so that we may provide the Judge alternatives to incarceration at sentencing. This has allowed our Judges to fashion sentences that are appropriate to the crimes and tailored to the individual allowing for both punishment and rehabilitation.

There are several faith based programs our office uses regularly. The Truth House is a 3 to 4-month substance abuse program for women in Danville. The Bridge Ministry is an 18-month program for men in Buckingham. The Hope Center is a fairly new substance abuse program in the Axton area. They currently only have housing for men but are hoping to open a women's facility soon. It's a 12-month program that includes a work component.

Probation and Parole has continued to monitor former clients who are placed on probation following conviction and/or release from incarceration. The Judges of every court are utilizing probation and parole on some level depending on the needs of the particular individual. The individual probation officers work closely with our client to identify and refer them to agencies or groups within the community that can provide counseling, treatment, and other rehabilitative services that may be beneficial or necessary for clients.

Probation and Parole has recently started holding substance abuse classes in house. The classes are led by a trained Probation Officer. We're hoping this will be a good resource for our clients who are sentenced to substance abuse classes.

We are able to identify services that are beneficial to our clients at the time of sentencing. However, due to the scope of our representation, there is little that we can do to directly help our client's transition or implement these services upon release from incarceration. We try to educate our clients as to the benefits of these services prior to sentencing with the hope that they will follow through upon release. Additionally, we inform them of the consequences for failing to comply with any of their terms of probation. Additional funding for probation and parole would provide more probation officers to address heavy caseloads and increase services available to our clients. er services available through probation and parole to assist our clients.

The largest impact of pre-trial release is that it allows the Judge to release our clients prior to trial. Release is the main objective for many clients. However, release serves an additional benefit in that it allows our clients to recover from choices they have made and hopefully avoid lasting consequences. Release allows them to return to their jobs in many cases and resume their life at home. It allows them to begin treatment programs and enter appropriate counseling programs immediately rather than postponing it until the end of a period of active incarceration. The condition of pre-trial release is frequently used in situations where individuals request a reduced or lowered bond amount.

Fairfax Public Defender Office

Fairfax County Public Defender attorney and staff have continued to cooperate and collaborate with various agencies and boards in Fairfax County. Our Mitigation Specialists participate in and are part of the steering committee for the Fairfax County Re-Entry Counsel. They have helped organize the Fairfax County Adult Detention Center's Resource Fair in cooperation with the Fairfax County Sheriff's Office. This Fair is held at the Fairfax Adult Detention Center and is twice a year. This Fair includes over a dozen organizations and governmental agencies that gather in the jail and meet with inmates to discuss programs and services that are available upon their release from the jail. The DMV, NAMI, the Fairfax CSB and the Office of the Public Defender are a few of the organizations represented.

The Office continues to be active members of the Criminal Justice Advisory Board, the Community Criminal Justice Board, and the Domestic Violence Prevention, Policy and Coordinating Council. We have a partnership with the Juvenile and Domestic Relations District Court's Transformation Team which is a team aimed at diverting children away from the juvenile system before they reach intake.

Fairfax County has a Veteran's Treatment Docket, a Drug Treatment Court in Circuit Court and just started a Mental Health Treatment Docket in General District Court in July 2019. The Public Defender's Office continues to be a primary stakeholder of all of these programs. The Veteran's Treatment Docket has graduated multiple classes and currently has 16 participants, Drug Court has 17 participants and the Mental Health Docket has 6. The office has partnered with many different county agencies, including the Fairfax County Sheriff's Office, the Community Services Board, local police departments and Commonwealth Attorneys' office in helping propel the Diversion First efforts.

At this point, hundreds of public defender clients have already been moved from the jail and into the community by connecting them with mental health services through the Merrifield Center. In 2018, 530 people were diverted from the criminal justice system through the efforts of Diversion First. While all of them are not clients, most of them likely would have been but for Diversion First. This has resulted in significant savings to the County but, more importantly, provided necessary treatment to a population that is very often unable to connect with the proper people to receive the appropriate treatment. Additionally, the Diversion First efforts have provided additional resources at all stages of the process. This means that we can use these same resources to get our clients out of jail on bail and to ensure that they have services when they re-enter the community.

While the program is still in the data collection stage, it is clear that these combined efforts will reduce recidivism in the long run. With all the additional programs, re-structuring, and new services offered through the Merrifield center, and the CSB, the office has also held numerous trainings for attorneys and staff to get up-to-date information on programs and services available to our clients once their court cases have concluded. We continue to build relationships with these professionals within our community to further the future success of our clients.

Franklin Public Defender Office

Our Mitigation Specialist continues to work closely with Juvenile Probation and Adult Probation and Parole to help provide services for our clients. She also assists clients in researching alternative program options. With her previous experience as being a Probation Officer, she has formed relationships with local jail staff and is able to assist our clients with questions in regards to mental health services, and

questions concerning Probation and Parole, and providing clients detailed instructions as to their obligations in regards to Probation and the ramifications of revocation hearings.

The Public Defender's Office continues to advocate for electronic monitoring for our clients as deemed appropriate. Additionally, the Public Defender's office continues to participate with 5th Judicial District Community Corrections Program.

Barriers: Being a rural community program availability, options, and funding have tended to be limited. In the 5th Judicial District, certain alternative program options have been phased out such as: Rubicon, The Healing Place, and the Southampton Memorial Hospital Detox Program. Our Mitigation Specialist is actively seeking new program options for our clients.

Fredericksburg Public Defender Office

This office serves clients in Fredericksburg, and King George, Stafford and Spotsylvania Counties. The Fredericksburg office currently employs twenty full-time attorneys. The support staff includes two full-time Investigators, one Adult Mitigation Specialist and a Juvenile Mitigation Specialist.

Our office plays an active role on the Community Criminal Justice Board and regularly interacts with a variety of government and private support agencies in the jurisdictions we serve. Each of our localities participates in the Rappahannock Regional Adult and Juvenile Drug Courts to address substance abuse issues. The heroin and opioid crisis are straining the resources available to the Drug Court but funding issues prohibit further expansion of this specialty court. A new Veteran's Treatment Docket is being administered in the Spotsylvania Circuit Court. This Docket may soon expand to include participants from other jurisdictions. This office works closely with the Veteran's Administration and VVFS (Virginia Veterans and Family Support) to help serve our veteran clients' needs and provide services.

This office also attends meetings of the Rappahannock Domestic Violence Council (RDVC). It is helpful to have a representative attend in order to keep our attorneys informed about the latest local domestic violence initiatives and to provide feedback to the RDVC team members from the defense perspective. We also have a representative attend meetings of the FUSE program (a multidisciplinary agency group which stands for Frequent User Systems Engagement) which targets the most frequent users of the jail, hospital, and Thurman Brisben Homeless Shelter to provide supportive housing and wrap around services.

The Mitigation Specialists attend monthly meetings of the PD16 Re-Entry Council. The Re-Entry Council is comprised of agencies providing resources to returning citizens. Clients staffed at these meetings receive opportunities for services from agencies such as the Rappahannock Area Community Services Board (RACSB), The Thurman Brisben Homeless Shelter, Rappahannock Goodwill Industries, VA Cares, and District 21 Probation.

Our attorneys regularly interact with representatives of the RACSB regarding clients with mental health issues or substance abuse issues. Attorneys and staff in our office have previously received a two day long Mental Health First Aid training session. A team from RACSB presented the training. The training provided information which will be useful when dealing with mentally ill clients, especially those who are preparing to be released from jail. RACSB has case workers assigned to the Rappahannock Regional

Jail to assist clients with mental health issues coordinate services as they transition back to the community.

The Sunshine Lady House, a crisis stabilization treatment facility is available to assist clients in need for up to 14 days. In addition, a local private agency, Micah Ministries, provides services to the chronic homeless population in Fredericksburg. Our office has an on-line Sentencing Alternative Library. The Sentencing Alternative Library is a collection of documents containing information about alternative sentencing programs and additional resources that may be helpful for incarcerated or recently released clients. The information is accessible to the entire office and allows for information to be easily shared.

Halifax Public Defender Office

The Office provides public defender services for Halifax, Mecklenburg and Lunenburg Counties. There are no specific re-entry task forces; rather, most of the efforts directed toward re-entry come from the Probation and Parole office and the court services units which cover the three counties Piedmont Court Services for Mecklenburg and Lunenburg, Halifax/Pittsylvania for Halifax. The Public Defender is a member of the local community justice board for Halifax County, which, among other functions, identifies individuals in the system who would benefit from rehabilitation programs and makes such programs available. A substantial part of the Mitigation Specialist's responsibilities involves re-entry by finding rehabilitation programs – primarily drug and alcohol programs—for clients upon their release from incarceration, or sometimes as an alternative to incarceration. The local governments have few resources beyond those provided by the counties' behavioral health programs, which means that the Mitigation Specialist must find programs outside of the area which are available for free or for minimal cost.

Hampton Public Defender Office

The Hampton Public Defender's office participates, as a sitting member, in the Drug Court Committee and the Public Defender attends all committee meetings along with other local agencies such as the Community Services Board, the Commonwealth Attorney's Office, the Sheriff's Office, and other local officials to provide sentencing alternatives that includes drug treatment and counseling to reduce recidivism and incarceration. The City of Hampton continues to maintain a Veteran's Track of the Drug Court and the Public Defender sits on the policy making committee of that board. The goal of the program is to provide alternative sentencing to veteran's that includes medical care, counseling, and mentoring to avoid recidivism and incarceration.

The Public Defender's office is working closing with the Circuit Court to establish an independent Veteran's Court apart from the Drug Court track. The new Veteran's Court will serve all veterans who are eligible without requiring a substance abuse issue. The office works closely with the VA Justice Outreach worker to secure treatment for veteran clients.

In a joint effort with the General District Court, the Commonwealth's Attorney and the CSB, the Public Defender is also working towards the establishment of a Mental Health Diversion Court. The Memorandum of Understanding was signed in the past month for submission to Richmond for funding. The hope is that this program will divert low-level offenders with mental health issues away from convictions and incarceration, and towards necessary treatment. The hope is that providing services to this needy population will prevent recidivism and get resources to those who need it. The Public

Defender sits on the Community Criminal Justice Board. The purpose of the CCJB is to enable the cities of Hampton and Newport News in combination to develop pre-trial court services, and community-based corrections programs consistent with the Comprehensive Community Corrections Act (CCCA) and Pretrial Services Act (PSA).

The Hampton Sr. Mitigation Specialist continues to participate in the Re-Entry Council in Hampton. The Council meets once a month. The Sr. Mitigation Specialist has built a rapport with the new Programs Coordinator for the Hampton Sheriff's Office. She has assisted clients by facilitating telephone interviews for local programs. This had been a barrier for clients in the past as the jail would not allow the attorney or advocate to assist with the interview. We are working with the Step up Re-entry program based in Norfolk. This program provides employment, housing and advocacy services to persons in the jails with 60 days or less left on their sentence and to persons recently released from incarceration. The goal of this collaboration is to ensure that services are in place when a client is released. P & P has been helpful with financial assistance for placement in Oxford House modeled programs for clients being released from incarceration.

The Mitigation Specialist has established a direct line of communication with the CSB jail services department. Once we contact this department, they quickly assist our client by assessing their mental health issues, medications and residential placement is necessary. This collaboration offers our clients uninterrupted medication and services once they are released. We continue to work closely with the VA Medical Center's Outreach Specialist to have all clients who are veterans screened and/or connected with services upon their release or as an alternative to incarceration.

Although our office no longer participates in the CORE (Community Oriented Re-entry Program) advisory committee, our office still utilizes the services provided by CORE by recommending the program to the Judges as an alternative to VADOC placement.

Our Mitigation Specialists have become familiar with two fairly new local re-entry programs, Bridging the Gap and House of Dreams. Both of these programs provide assistance to returning citizens with housing, employment, substance abuse treatment, and other life skills.

The Mitigation specialist has also located and verified a new program in New Kent County called "the Fix". This program offers faith-based, residential substance abuse treatment at a very low tuition fee. We have placed two clients with the program with tuition assistance from the program.

Our Mitigation Specialist is involved with our local Restorative Justice program. We are still in the early stages attempting to become a unified group of service providers working to tailor the program to the needs of our clients.

Barriers: Free or low cost long term residential treatment programs (six months or more) are still scarce. Lack of funding for these programs is an ongoing problem.

Leesburg/Warrenton Public Defender Office

The Mitigation Specialist, Kelly Williams sits on the Loudoun Re-entry Council. Kelly is trying to increase communication with the re-entry team at the jail and this relationship is getting stronger.

The office continues to have community programs come into the office to educate them as to the services they can offer our clients. The office is active in all bench bar groups. They continue membership and participation with JDAI, DART and the CCJB. They are part of the Circuit Court Judge run Law Camp program for high school students. It has been a part of the legal education program in the local high schools. There is now a Drug Court up and running in the Circuit Court, meeting each Wednesday to access, review and manage participants. Additionally, there is now a Mental Health docket in General District Court meeting every Friday to access and manage participants. The office has partnered with the ARC, local organization that assists Individuals with Intellectual Disabilities Individuals and with Pinnacle, a M.A.T. program that assists clients with rehab and re-entry. Twice a year attorneys go in to meet and talk with kids at the Douglas School - a school for teens who cannot function in a regular public school setting due to either behavioral, mental health or emotional issues.

The Warrenton office Mitigation Specialist, Jessica Compton, covers Fauquier and Rappahannock Counties. Jessica has been working with the community to find and utilize programs both in the community and those in surrounding areas as well to utilize to assist clients and cases. Jessica is working with the community organization PCR and attends monthly meetings to obtain new information about services offered to our clients and community such as PATH Foundation, CAYA, Verdun, Mental Health Association, CHADD, and many others. Jessica has also continued scouting and reviewing rehabilitation facilities such as, McShin Foundation, Life Center of Galax, Mount Regis Center, Guest House and Bethany Hall, that would be available to clients and working with them to provide services to clients in preparation for sentencing and re-entry. Jessica has started working with newer programs that have come to the area as well, Spirit works and Sex-Drugs-God. There have been several clients to be successfully placed as a referral and/or recommendation of our office. Jessica has continued building a relationship with the local CSB, Mental Health Institutions, Hospitals, Rehabilitation Centers, Schools, and Adult Educational services as well to work with them as the need for services and treatment is ongoing throughout their case through pre and post disposition.

Warrenton PD's office sits on meetings for the Path Foundation, PCR, Re-entry counsel, and is working with the courts in a new program being developed to assist in decreasing recidivism in the court system. Further Jessica continues working with the Adult and Juvenile Probation offices to foster a stronger relationship and are working together for client's interest.

Lynchburg Public Defender Office

Staff from this office work closely with the Regional jail's re-entry representative to provide housing, educational and job opportunities. For the past several years, we have served on the city's Jail Diversion Alliance and Central Virginia Coalition for Treatment & Recovery. We continue to maintain contacts with the local agencies who served on the coalition to continue to provide support. We also serve on the Juvenile & Domestic Relations Court Improvement Committee which involves collaboration with all entities that touch that court. We continue to collaborate with those agencies with regard to juveniles and their re-entry to the area. Our Mitigation Specialist assists with gaining access to appropriate mental health counseling, treatment options, housing, job placement, and mentor programs. She recently became certified to assist clients with obtaining Medicaid benefits. Probation and Parole officers work closely with this office to identify appropriate counseling and treatment options.

The Public Defender Office was instrumental in the Lynchburg Drug Court continuing to operate. The initial model was limited to probation violators. The program was reviewed by the Advisory Board in March 2019 and voted to expand the pool to other non-violent felonies. The Lynchburg Drug Court

obtained a grant of \$55,000 from the state and \$50,000 from the City of Lynchburg to hire a full time coordinator and expand the efforts of the court. The Lynchburg Public Defender serves on the Drug Court Advisory Board.

The Lynchburg office also serves on the Juvenile Detention Alternatives Initiative (“JDAI committee”). Specific approaches of the initiative include working to reduce unnecessary delays at each step of the juvenile court process, providing alternatives to detention for youth whose risk can be moderated by program participation, and ensuring proper conditions for youth in custody.

We continue to serve on the board of the local Crisis Intervention Team (CIT) program. The program is designed to help at the outset of a situation to divert cases involving mental health issues out of the criminal justice system and into the appropriate mental health service.

The Lynchburg office also serves on the Domestic Abuse Response Team (DART) formulated by a grant to the Commonwealth’s attorney’s office. Its goal is to continue to evaluate and develop responses to the growing number of domestic abuse cases in the city with a collaborative effort with numerous stakeholders.

The Public Defender continues to pursue use of the Pretrial Risk Assessment Instrument. However, a current barrier to its successful usage is the lack of support from the Commonwealth’s Attorney. We are committed to improving pretrial and bail advocacy and challenging long standing practices.

We have also begun a dialogue with the regional jail medical staff for a mental health housing unit at the facility. Our Mitigation Specialist and the medical staff are gathering data and research to present a collaborative effort to the regional jail’s administrative staff. The mental health housing unit would allow those individuals access to mental health treatment at the jail which is currently not available.

Barriers: Free or low cost long term residential treatment programs (six months or more) are nonexistent. Free or low-cost outpatient treatment programs are no longer available. Our local treatment provider has recently increased costs even for those on a sliding scale.

Martinsville Public Defender Office

Our office will continue to participate in the Offender Resettlement Journey collaborative meetings going forward. The Re-Entry Council which meets at District 22 Probation & Parole has developed a pamphlet that is distributed to inmates, providing them with contact information for many community-based resources. Staff from STEP and West Piedmont Re-Entry Journey visit the City jail to meet with inmates. The Re-Entry Council has developed a newsletter that will be sent to inmates several months prior to their release back to our local community with information and articles relevant to their lives upon release to our community. STEP is in the process of establishing a collaborative with Patrick Henry Community College and the New College Institute to bridge the educational gap experienced by returning citizens. This is to address one of the two greatest barriers identified by the Re-entry Council: ability to drive and lack of educational opportunities. STEP has instituted a low-cost bicycle rental program for returning citizens to assist with their transportation needs.

In Henry County, \$64 million in contracts were just awarded for construction of a new jail, with an anticipated completion date in 2021. The plans for greatly expanded services to inmates there include a

first-ever work release program and additional educational opportunities for inmates that are almost non-existent now. A mental health wing is also planned, one of very few in local jails in Virginia. There was no discussion of specific re-entry initiatives, but the educational trainings and counseling services will certainly provide much-needed assistance leading up to release.

The Mobility Management program, offered through the Southern Area Agency on Aging (Ms. Mandy Folman, Mobility Manager), offers a voucher program, the Miles 4 Vets program and the Mile 2 Volunteer Driver Program for in town and out of town transportation needs for not only the elderly but also for anyone in need of their transportation services.

The local Clean Start program is back in operation and a substance abuse counselor from the local CSB does provide services at the Martinsville jail and Henry County jail. The City jail and the jail annex now have iPads available to inmates, who can access online certificate programs to complete in preparation for release. The City jail also offers GED instruction, mental health counseling and anger management.

Our Mitigation Specialist has contacted all three local jails in an effort to establish a mechanism whereby incarcerated people can get their Federal benefits reinstated, either while they are incarcerated or upon release. She is now communicating with the Social Security Administration after all three jail administrators welcomed such an effort and agreed to assist with implementation.

Resources in our small community are always limited and getting more scarce with each budget. There is only one local program for juveniles, a half-way house for boys that is ordered for juveniles in lieu of detention (pre- and post-dispositional) or commitment to DJJ. This facility (ANCHOR Group Home) is in the process of extending their operating hours to cover weekends. There is no equivalent resource for juvenile females.

Two of our local jails have no GED instruction and no group substance abuse programs such as the Clean Start program in the City.

EIP (electronic incarceration program) is available through all three local jails but with widely differing eligibility criteria. The City allows the most inmates out on HEM, and Henry County the least.

Our office utilizes several programs geared towards substance abuse for both women and men. Locally, we have the HOPE Center program located in Axton, Va. It is an 8 to 12-month Christian based 12-step program for those seeking help with alcohol and substance abuse addictions. Recently, they were able to open a women's facility in Pittsylvania County. The Bridge Ministry is also a Christian based program located in Buckingham, Va. which services men only. We, along with our local Commonwealth Attorneys, have begun to work closely with Bridge Ministry in an effort to get clients released to the program prior to sentencing. The Truth House located in Danville, Va. has been very helpful with the placement of female clients who are on probation or will be on probation upon sentencing. This, too, is a substance abuse program that helps female individuals in their recovery.

Update on the Jail Diversion program- new Peer Support personnel Mike Blevins in addition to the 2 new Case Managers Adrian Wimbush and Tiffany Martin

Individuals are screened within 24 hours after jail officers contact the Case Manager. This is a means of recognizing clients with mental health issues early and getting them services immediately.

Update with Juvenile Probation-new mandate: Standardized Dispositional Matrix being implemented: offered pre-trial-voluntary for parents for children needing help immediately, able to identify their intervention level and able to refer them to services prior to Court. Some offenses such as CHINS, sex offender, probation violations and summons are not applicable.

Barriers: Resources/funding for services for clients continue to be a barrier.

Newport News Public Defender Office

This office is involved in re-entry as a part of sentencing if the disposition of the case allows it. There is an excellent Mitigation Specialist who is very active in securing alternative dispositions and sentencing plans to include substance abuse treatment and counseling, housing, mental health care and financial aid to those who qualify. She works very closely with the clients who continue to seek her support even after the case has been closed.

The Mitigation Specialist II is a recent member of the newly developed Medication Assisted Treatment (MAT) Planning Committee which is comprised of community partners from the medical, mental health, local jail and re-entry field. This committee is working to develop a MAT program within the Newport News City Jail. This program would begin the process of recovery from opioid addiction while incarcerated. This program will allow for community providers to establish a more seamless transition for the participants back into the community having an already established MAT plan and direct linkage to community resources that will continue to provide those services. The Mitigation Specialist II and a designated Deputy Public Defender are members of the Behavioral Health Docket for the Newport News General District Court.

Designed to reduce recidivism and improve the quality of life for our mentally ill population the Mitigation Specialist II and the Deputy Public Defender were involved as a part of the planning committee for this Specialty Docket and continue to attend Behavioral Health Docket case meetings and hearings twice per month. Both remain active participants as members of the Behavioral Health Docket Board and meet quarterly. The Mitigation Specialist II works in conjunction with the Newport News Sheriff's Department Re-entry Program to assist clients with obtaining State Identification Cards while incarcerated. The Mitigation Specialist II works closely with Hampton Newport News CSB jail staff and NNCJ staff, both for the purpose of diversion from incarceration as well as development of treatment options that will best serve the client prior to release and upon release. The Mitigation Specialist II established strong relationships with the Newport News City jail and jails in the surrounding jurisdictions to obtain information and arrange program interview calls in order to assist clients with obtaining sentencing alternatives and post release services. The Mitigation Specialist works closely with Hampton/Newport News CSB staff, private providers, as well as local and state treatment facilities, to address mental health and substance abuse treatment needs early in order to minimize interruption of services, including medication, counseling, benefits, housing, and case management during a client's time of incarceration and upon re-entry.

The public defender personally attends every drug court staffing session to monitor the progress of the clients this office refers to that program.

Norfolk Public Defender Office

Norfolk collaborates with and sits on the board of the re-entry docket, which is supported by a grant from the Supreme Court for the specific purpose of assisting transition back into the community for those incarcerated.

Barriers have simply been in obtaining sufficient participants. Many are not eligible for various reasons despite efforts to be as inclusive as can be while still mindful of the success of the program.

Efforts by the Re-entry court docket team have been to include more female participants, and our office in particular has been responsible for submitting more female applicants.

Simply striving to enlarge the pool of eligible applicants has been a barrier to inclusion of this group.

Tapping into resources of the VA in this area has been very helpful in identifying participants, and services specific to this group. This particular group is also now being served through the mental health docket as well and the collaboration between the diversionary court participants means that more participants are identified and services provided. Barriers have simply been in identifying those who would likely be eligible and coordinating services available. This has been particularly beneficial for those who suffer from dual diagnosis and have heretofore been ineligible for programs because they have more than one issue.

Collaboration of these agencies permits the sharing of information with the confidentiality as to non-participants remains intact. Not being able to access information that others are able to (particularly probation and parole) has been a barrier.

Norfolk was not awarded the EBDM grant, but the team continues to meet and collaborate even in absence of the grant funding. The re-entry docket still exists with the same success and barriers as was previously identified. The barriers are being addressed and certainly lessened in the past year, but work remains. Many Re-Entry programs exist in this area, outside of dockets, but subject to referral from probation and the courts, benefitting our community as well. Up center is just one of the agencies performing vital re-entry functions.

Petersburg Public Defender Office

The Petersburg office is connected with community partners to support returning citizens who are in need of re-entry services in the local area. When resources are limited in the immediate area, the Petersburg office identifies and partners with agencies outside of the local community to meet the needs of returning citizens.

The Mitigation Specialist is an active member of the Petersburg/Dinwiddie re-entry council and co-chairs the employment and workforce development subcommittee. The council meets quarterly and promotes re-entry strategies for adult and juvenile offenders. There are several targeted areas the council seeks to address such as employment and housing, substance use, mentoring, and anger management.

Despite our efforts to maintain a Mental Health Court docket in Petersburg, the program has been put on hold temporarily. The new and improved CCAP program has been utilized by our office consistently

to ensure that appropriate services, especially in the area of re-entry from the Department of Corrections, are identified.

The Petersburg office continues to work closely with the Riverside Regional Jail re-entry program to identify our clients who are in need of immediate services such as housing and other essential needs. We utilize the work release program consistently to ensure our clients are able to obtain and maintain employment, which is essential for their re-entry.

The Petersburg office also works diligently with the probation department; providing services for adults and juveniles, seeking out and developing suitable alternatives to confinement; and, identifying needs and services for adult and juvenile offenders as they return home. We continue to network and to build rapport with professionals in the community and to explore alternative options for our clients to ensure they are provided the best resources available with the hope that the effort might have the effect of reducing recidivism. On July 13, 2018, a member of this office created "Past the Verdict: A Criminal Defense Attorney's Guide to Juvenile Disposition & Sentencing" at the Late Day Lecture offered by the Indigent Defense Commission.

Portsmouth Public Defender Office

Our Mitigation Specialist actively searches for alternative programs prior to sentencing. She works closely with privately run programs to determine eligibility requirements and to screen potential candidates. Because the state run programs have become so limited we are becoming more reliant on private resources when searching for alternatives to incarceration.

We continue to be active in the Drug Court Program, and our office stays involved throughout the screening process, as well as throughout the client's period of probation. We attend weekly drug court dockets to aid clients and advocate for their best interests. Over the course of the past few months, our drug court team has made efforts to take a more active role in identifying and helping out clients who are struggling with the rigorous requirements of this program. We strive to remain active in the client's recovery process to advocate for services.

Portsmouth Behavioral Health Care received a grant (Mental Health in Jails Pilot Program or C.O.R.E – community oriented release) for re-integrating inmates with mental health issues from jail facilities back into the communities with services in place. We actively participated in planning and hiring for this program. We continue to work with Behavioral Health Care and Hampton Roads Regional Jail Authorities to identify individuals, who are in need of, and who meet the "legal" criteria for those suitable to the program.

While Portsmouth has still not received funding for a mental health docket, the Portsmouth office took on a leading role in establishing an informal mental health docket. The Portsmouth office works closely with the GDC Court personnel, appointed doctors and DBHS to streamline mental health cases, and to more effectively meet the needs of clients with mental health issues. Additionally, our mitigation specialist has developed a direct line of communication with Eastern State, Central State and DBHS to more effectively recognize and address the mental health needs of clients coming through the criminal justice system. Internally, we have created a mental health team to become more adept at identifying clients with mental health challenges and to work more closely with family members and other agencies to find ways to overcome the many issues that arise in cases involving clients with mental health

disabilities or challenges. Our mitigation specialist does bi-monthly visits with all clients who are identified as having mental health issues and who are held in custody. Additionally, she reviews and speaks with the treating facility (for each client) 24-48 hours before the client's court date, in order to be able to inform the Court of the status and progress of each client. We make every effort to reach out and coordinate efforts to involve family members and treatment facilities prior to release of clients.

Pulaski Public Defender Office

Re-Entry services within our four jurisdictions remain limited but have improved from the previous year. New River Valley Regional Jail no longer provides discharge planning services. If clients are on probation, probation officers will assist with a discharge plan. Our local Re-Entry Council has partnered with community resources, such as, DSS, DARS, New River Valley Community Services, Veterans Affairs, and VA Cares to assist with discharge planning. Bland Correctional Facility (BCF) continues to do discharge planning for offenders being released from BCF.

Re-Entry Council has assisted with renting a home for offenders returning to community who are homeless. We call this home "Manna House" and it is able to house up to 6 residents, no matter what their previous convictions have been. Originally the opening date for residents was November 2018 but due to construction delays the first 2 residents were placed in Manna House in August 2019. The house is furnished with donated items and purchased items donated by private individuals and churches. Residents have access to all necessities in home, including personal hygiene items. Residents sign a "lease" and are able to live rent free for 3 months. Probation Officers and VA Cares work with individuals during this time to obtain employment and save money to move out of home and be independent. The rent for home is paid by grant money and Department of Corrections.

Our mitigation specialist attends bi-monthly Re-Entry Council Meetings and serves on Community Support Committee, Housing Committee, and Steering Committee. The mitigation specialist attending these meeting benefits our office by keeping us abreast of what resources are available and upcoming in our area. The mitigation specialist selected the classes to be taught in Life Skills class and coordinated volunteers that would be teaching the classes.

Re-Entry Council is currently planning a family reunification dinner to assist families with various needs for their loved one who is returning home. This dinner will be held at New River Valley Community Services and food will be donated by various community supporters. A small resource fair will be set up for the families so they can speak to someone onsite from needed agencies.

Our office participates in Pulaski County Drug Court and is involved in start-up of Radford City Drug Court. Our mitigation specialist and assigned attorney attend each drug court and treatment team meeting. To date Pulaski Drug Court has graduated 17 participants.

Pulaski Public Defenders Office continues to provide referrals for mental health services and substance abuse treatment. Our community utilizes our community service board, New River Valley Community Services, the Bridge program, mental health referrals, and inner-office attorney trainings.

Homelessness remains an issue in our area due to no homeless shelters. We are able to refer to Roanoke Rescue Mission if client is willing to go that far away. New River Community Action partnered

with United Way to provide a Winter Overnight Shelter which serves the community from November to March and are hopeful they will be able to offer this service this year.

Employment services are provided by Career Support Systems, Virginia Employment Commission, and DARS. VA Cares assists individuals with work clothing needs. Literacy Volunteers assists individuals with resume writing and basic computer skills.

Re-Entry services remain limited to those services offered by the Court Services Unit. The office continues to work closely with juvenile probation officers in discussing services, referrals, and options within the community. The New River Valley Juvenile Detention Home offers post-dispositional program. Very few of our juvenile clients receive commitments to the Department of Juvenile Justice that are not suspended. Very few juveniles are transferred to be tried as adults.

Richmond Public Defender Office

The Public Defender's office participates in Richmond's Community Criminal Justice Board. The purpose of the Richmond Community Criminal Justice Board (RCCJB) is to allow the City Council of the City of Richmond greater flexibility and involvement in responding to the problem of crime in the City; to provide more effective protection to the citizens of the city of Richmond; to promote efficiency and effectiveness in the delivery of community criminal justice; to permit the City of Richmond through this Board, to establish policies that structure programs which will assist judicial officers in discharging their duties and meet the needs of selected adult offenders; and to approve funding sources that support programs engaging in pre - and post-trial services

The Public Defender's office is a member of the Juvenile Justice Collaborative Advisory Committee which meets to facilitate process and systems improvements among stakeholder agencies through collaboration that will result in improved outcomes for the youth and families of Richmond. This started as a Juvenile Detention Alternatives Initiative, but has expanded to include a broader vision of creating a comprehensive system that helps delinquent and at-risk youth become law-abiding citizens while maximizing community safety and strengthening families. The Public Defender serves on the steering committee for the larger collaborative. We continue to participate in weekly JADI meetings to review the status of juveniles held in detention, to secure their release as soon as possible through detention review hearings and placement in appropriate settings.

We represent all juveniles placed into the Juvenile Behavioral Health Docket, formerly the juvenile drug court. We participate in pre-court staffing meetings to discuss our client's progress and attempt to minimize the imposition of sanctions.

Public Defenders also represent adults placed into the Richmond Adult Drug Treatment Court. For clients with felony charges, Drug Court may serve as an alternative to incarceration following a conviction, a violation of probation or as a predicate for dismissal. We attend staffing meetings before each docket, to discuss each client's progress and reach a consensus on any sanctions.

We work closely with the local Division of Adult Probation, which runs the Daily Reporting Center as an alternative to incarceration for clients who are in General District Court or Circuit Court. DAP also provides pretrial supervision to clients who are not incarcerated prior to trial, including Home Electronic

Monitoring. We confer with the program administrators whenever an issue arises between the courts and the program.

We refer clients in need of mental health and substance abuse services to Richmond Behavioral Health Authority, Richmond's CSB. RBHA has recently introduced a rapid entry system for clients who are not incarcerated to quickly receive services. Treatment in one of their programs, both inpatient and outpatient, is frequently presented at sentencing as an alternative to incarceration.

In General District Court, the Mental Health Docket serves individuals who are in need of mental health services. Clients are assessed, assigned a case manager and specific services are provided, based upon their individual needs. We are present at the pre-court staffing meeting where the client's progress is discussed and then appear in court with our clients. Richmond's sheriff has said that the jail is being used as a mental hospital and this docket has enabled us to keep clients out of jail and provide them with services and supervision.

In Circuit Court, the Public Defender's office is working with the Commonwealth's Attorneys, DAP, District One Probation, RBHS, the CCJB and other stakeholders to develop a Mental Health Docket. We have implemented the pilot program with only 10 participants. This is being done without any additional funding for any of the stakeholders. The goal is to produce data to show that participation in the docket reduces recidivism and community safety, in order to obtain funding from State and Federal sources to expand the scope of the program.

The Richmond Sheriff's Office recently received a grant to start a Mental Health Pilot Program inside the jail. The program gives individuals (only males for now) with mental health disorders the opportunity to work with Licensed Clinical Social Workers, Re-entry Coordinators and upon their release, a Community Case Manager, to reduce their recidivism rates. Individuals participate in Cognitive Behavioral Therapy and Trauma based groups, as well as one on one therapy. Participants live in their own pod in the jail, out of the general population. The grant pays for medications, housing, food vouchers, transportation and works with individuals to complete their applications for disability benefits. Clients with a mental health diagnosis can be court ordered into the program.

We refer our recently released clients to Opportunity, Alliance and Re-entry in Richmond, (OAR). OAR serves individuals who have been released from incarceration within the past six months. They offer a plethora of services including re-entry case management, job preparation, resume writing, computer skills, bus tickets, advocacy, obtaining driver's license and state identification card (birth certificate and social security card), resume writing, addiction recovery meetings, multiple classes (anger management, parenting, responsibility, life skills) and more.

The executive director of OAR convenes the Richmond Regional Re-entry Council, which meets quarterly to cover re-entry issues such as Education/Employment, Housing, Health/Substance Abuse, Juvenile Justice, etc. The City of Richmond has its own Re-entry Council, which includes the public defender, and meets monthly to examine best practices in re-entry, employment/education and housing.

Our mitigation specialist and an attorney participate in the Trauma Informed Community Network, to support and advocate for trauma informed practices in the community and in the court system. Trauma informed is defined as: "An organization, system, or community that incorporates an understanding of the pervasiveness of trauma and its impact into every aspect of its practice or programs. It emphasizes

physical and emotional safety for both providers and survivors, and creates opportunities for survivors to rebuild/maintain a sense of control and empowerment.”

The office has been working closely with a charitable bail fund recently created in Richmond. We identify clients held in jail on low cash bonds and refer them to the charitable bail fund. The fund posts the cash bond for our client and helps to ensure they appear for their court date.

We are also cooperating with the Virginia Holistic Justice Initiative, to help our clients receive services to address their underlying risk factors. Criminal convictions are typically only one of numerous obstacles our clients must face. Homelessness, mental illness, substance abuse, and lack of education are all circumstances that can contribute towards recidivism. In connection with VHJI, we are able to help our clients receive classes, treatment, therapy and housing from among the various providers in the city. VHJI works as case manager, ensuring appointments with the providers are made and kept by our clients.

Annually, about a dozen attorneys in our office participate in Project Homeless Connect at the Richmond Convention Center. Project Homeless Connect matches clients with volunteers in a one-of-a-kind partnership to assist chronically homeless adults connect to as many on-site services as possible in one day. Public defenders are one of more than 40 service providers who come to a single location for a day, providing dedicated healthcare, dental and vision screenings, mental health interviews, case management, social security applications, identification services, employment resources (including for veterans), shelter and housing assessments, and much more.

Barriers: Our largest barrier is a lack of service providers. For our clients who lack health insurance, locating mental health and substance abuse services is extremely difficult. RBHA is the only provider and they are unable to treat all of our clients. The entire city of Richmond is suffering from a severe shortage of housing for the homeless. Until the city opens a cold weather shelter in the winter, there is no available housing for a large number of our clients.

Roanoke Public Defender Office

We utilize and work with Pre-Trial Services in an effort to keep as many of our clients out on bond as is appropriate under the circumstances. When issues affecting Pre-Trial Services arise we are usually included as one of the stakeholders that are invited to provide input and or to be apprised of new developments.

We make use of Drug Court and have done so since 1995 when it was established as the first Drug Court in the Commonwealth. We make use of it not only in drug cases but in other cases arising from drug use. As Public Defender I serve on the Drug Court Advisory Board and attend meetings when possible.

District 15, Probation and Parole has a Re-Entry Counsel which includes Total Action for Progress, Virginia Cares, Veterans Affairs, Blue Ridge Behavior Healthcare and Court Community Corrections. Jackie Holdren, our Mitigation Specialist, attends quarterly meetings. The District 15 Probation Office has a mental health specialist to whom we refer new probationers when consent has been obtained, and with whom we consult for active probationers.

This office participates in the Roanoke Valley Mental Health/Criminal Justice Task Force, which has been a very active group involving Judges, defense attorneys, prosecutors, police officers, deputies, probation officers, clerks, magistrates, and representatives from the community services board and the local state hospital. We develop goals and discuss issues involving individuals with mental health problems who come into contact with law enforcement and the criminal justice system.

The Roanoke City General District Court has established a Therapeutic Docket to assist defendants with mental health problems through closely monitored supervision and sentencing alternatives.

A number of our clients make use of the Rescue Mission, the main facility in Roanoke providing actual living quarters for the homeless. In the appropriate cases, both before and after conviction, we make our clients aware of the services offered at the mission. The mission also provides an 18-month residential drug and alcohol treatment program, the only such long term, residential treatment program in Roanoke. We utilize their program frequently.

We have developed contact with the Veterans' Justice Outreach program at the VA Medical Center in Salem. The program serves veterans through the provision of services to veterans involved in the criminal justice system. The program can address housing needs, medical needs, referrals for employment, mental health treatment, substance abuse treatment, etc. The Program Coordinator for the Homeless Veterans Reintegration Program is a valuable resource for the veterans we represent.

Virginia Cares assist inmates recently released from incarceration. They assist with job readiness classes, transportation issues; resume assistance, mock interviews, obtaining birth certificates and identification and rights restoration. We have occasionally made use of their service. We have referred clients to them and they occasionally testify on behalf of our clients.

TAP (Total Action for Progress) provides numerous services that are relevant to but not necessarily directed at former inmates. They assist those in need with educational needs, including but not limited to GED classes, employment, car purchases, clothing, child care, domestic violence and crisis intervention, housing, fatherhood services, housing and homeless services, restoration of rights and resume assistance. We refer clients to TAP when the need arises.

The area now has Discharge Planners, through our CSB, working our local jails.

Blue Ridge Behavioral Healthcare, our CSB, began utilizing a Discharge Planner in 2016. As an employee of BRBH, the Discharge Planner meets with inmates identified by the jail's medical department as having a mental health diagnosis or substance abuse diagnosis. The DP also responds to referrals by the Court or at our request to develop a discharge plan for those with a mental illness and/or a substance abuse issue. The plan usually addresses housing, clothing, financial and medical needs along with treatment recommendations. The inmate's feedback is included in the plan. Transportation will be provided, if needed, from the jail to the first place specified in the plan. The process to develop a plan is started one to two months prior to discharge and the individual is seen two to five times before finalizing a discharge plan.

Staunton Public Defender Office

Numerous programs continue to function in the Staunton/Augusta region to provide practical and effective re-entry services to the community.

The committees formed during the EBDM process continue to meet, and continue to produce useful improvements in the areas of pretrial release, continuity of mental health services for people released from jail, and accurate risk assessment for domestic violence victims.

The most significant advance since last year has been the implementation of a high-functioning system for insuring that jail inmates receive adequate mental health treatment, and most importantly, that the mental health services are continued without a break after their release. Jail mental health workers insure that released inmates have a 30-day supply of medications, and a prearranged intake appointment with the local Community Services Board. The Mental Health Rapid Assessment Tool, which has led to the speedy identification and removal of mentally ill inmates from the jail and into appropriate treatment, continues to be widely used.

Grants have allowed the local community services board, and the local community corrections agency, to contract for significant local housing units targeted at jail releasees who would otherwise be homeless. This initiative has been a great success. Domestic violence assessments are being implemented to identify the most at risk offenders for increased supervision, and restoration of driving privileges has been very successful, reducing recidivism and jail population, as well as collecting significant unpaid fines for the state and returning drivers to legal, and insured, status. In addition to our active Drug and DUI Court dockets, we have received funding to double the size of our therapeutic docket, which has produced significant results in reducing the recidivism of repeat offenders with serious mental health diagnoses.

This office has made a priority of improving its pretrial and bail advocacy, based on the overwhelming data correlating even a slight delay in release of low-risk arrestees with higher recidivism, and increase in risk level. We make full use of newly revised Virginia risk assessment tools to argue for the early release of our clients on bail, with pre-trial supervision if necessary. The public defender has assisted in trainings for local judges and prosecutors on the data underlying the recommendations of the new VPRAI.

A comprehensive re-entry program continues to be run through the efforts of a committee overseen by the local Probation and Parole office (District 12). This office was actively involved in that process. Numerous local stakeholders in the broadly defined criminal justice field sat on the committee. In addition to this office, representatives from the CSB, the misdemeanor probation office, the jail and local VADOC facilities, ex-offenders, and local churches and community groups took part. Housing and employment were identified as key initial factors in the success of recent releases. Consequently, representatives from local shelters and housing programs, and state and private employment services were involved in the process.

Grants have been received to triple the number of hours of mental health services at the local jail for all inmates, with the establishment of a mental health ward for the most severely impaired who can't be released to the community. Active Drug and DUI court programs in the area also have significantly contributed to reducing recidivism among a traditionally intransigent abuser population.

Representatives from this office sit on the boards of both programs. Efforts by this office helped revive a defunct Juvenile Restorative Justice Program, supervised by staff from the local misdemeanor probation office. The program targets young first offenders, and has statistics to show that participants have a significantly lower recidivism rate compared to traditional juvenile probation.

The local re-entry council, which includes two members from the Public Defender office, continues to hold open house type events in the local community to try to identify recent releases, and make them aware of the various educational, housing, mental health, substance abuse, and employment services that are available locally. In addition, the local prison has begun holding periodic re-entry fairs, to introduce soon to be released prisoners to the same services. The local jail holds mandatory re-entry counseling for all inmates nearing release. In addition to the above needs, the simple possession of proper identification has been identified as a key element to successful transition. Thus, a program has been established with the goal of insuring each released inmate has at least a state ID card. This is vital to getting housing, meds, etc.

An active Restorative Justice program continues to divert appropriate first-time and young offenders out of the criminal justice system and jails at an early stage.

Suffolk Public Defender Office

Both the Public Defender and the Mitigation Specialist have joined the Western Tidewater Re-entry Council, a group of stakeholders with representatives from the Community Services Board, the Probation Department, and a few private practice mental health providers. The goal of the council is to assist those returning citizens, particularly those with mental health needs, in obtaining necessary and available services to increase their chance for re-entry success.

The Mitigation Specialist attends bi-monthly mental health support meetings at the Western Tidewater Regional Jail. The focus is on clients either awaiting trial, or awaiting transfer to a state hospital for either forensic evaluation or restoration services. For local inmates pending release, the Mitigation Specialist will occasionally be involved in setting up the home plan for the client.

The only other area where our efforts can be classified as being involved in re-entry involves assistance in getting proper state ID. The Mitigation Specialist has assisted numerous clients obtain their birth certificates, which is often a prerequisite to getting a state issued picture ID.

Virginia Beach Public Defender Office

Staff from this office serve on the Juvenile Detention Alternatives Initiative (“JDAI committee”) – more specifically, the Public Defender serves on the executive committee. The committee includes representatives from various agencies (including the Commonwealth’s Attorney’s Office, City Attorney’s Office, Court Services Unit, Department of Social Services, and Police Department) and meets quarterly. Specific approaches of the initiative include working to reduce unnecessary delays at each step of the juvenile court process, providing alternatives to detention for youth whose risk can be moderated by program participation, and ensuring proper conditions for youth in custody. Re-entry issues are also an important part of this group. Another attorney, from the juvenile court team, serves as part of the working group that implements any of the recommendations of the executive committee.

This past year the Public Defender has been working with the Circuit Court (and many others) to develop and implement a drug court program – as an alternative to lengthy incarceration periods for severely addicted individuals. At this point, September 2018, the drug court has been active for roughly nine months and currently has nine participants, most of whom have entered the program directly from a period of incarceration. Drug court meets weekly to monitor the progress of the participants. Similarly, our office is involved with the implementation, again in Circuit Court, of a mental health program to aid clients in remaining on their medications and avoiding recidivism. We are also involved with the GDC mental health docket that ensures that clients with mental health issues are seen, evaluated, and transported, if needed, as quickly as possible to the hospital.

Our office participated in the Forensic Discharge Planning Group this year with a goal of facilitating both continuing treatment and community placement of the mentally ill defendant who is about to be released from a jail setting. Towards that end, our office was directly involved in setting up a discharge treatment program for the mentally ill offender as part of a circuit court disposition. The program links the defendant to services. He is picked up from the jail on his release date by a representative of the Virginia Beach Department of Human Services. He is taken to both his probation and his psychiatric appointments. The intent is to make sure that he remains on his mental health medication. All needs are appropriately addressed.

Additionally, the office is very involved in discharge planning, in general -- both as noted above and with our Mitigation Specialist and her services. The intent is to make sure that we have the client properly situated so that he has the best possible chance for success upon release.

Our Mitigation Specialist has created an advocacy resource folder that is full of programs as alternatives to incarceration with computer links for use by attorneys. Many of the juvenile resources are evidence based practices and some are from evidence based mapping. The re-entry goals are reviewed by our Mitigation Specialist in the search for alternatives to incarceration and for continued treatment and services after re-entry. Additionally, our Mitigation Specialist attends some of the Virginia Beach adult correctional services staff meetings and this, along with ongoing reviews and discussions with Adult Probation & Parole and Juvenile Court Service Unit staff, helps refine our use of their services to support any re-entry treatment goals and service plans.

Finally, an attorney in our office, who functions as our mental health expert, has been involved in multiple programs/organizations that focus on re-entry. Our office remains heavily involved in mental health re-entry in both the general district and circuit court arenas. The focus is on making certain that there is access to services from the jail to the CSB/DHS portal. Access to prescriptions, transportation, and placement is the focus of the attorneys and Mitigation Specialist in our office. We have also worked to try and make certain that everyone who needs treatment or evaluation does so in a timely fashion through both the general district and circuit court mental health programs. We are trying very hard to make sure that no one slips through the cracks. In the past, the office has participated in a “Re-entry Town Hall Meeting” sponsored by the Virginia Beach Re-entry Council. – a collaboration between Adult Probation and the Virginia Beach Human Services Department. Although there was no “Town Hall Meeting” held this year, I have reaffirmed to the Re-entry Council our continued interest in actively assisting them with any of their ongoing programs concerning re-entry.

Winchester Public Defender Office

The Public Defender is a member of several regional boards, workgroups and committees looking at various issues affecting mental health, substance abuse, and re-entry in the areas served by the Office of the Public Defender. The workgroups and committees are the Northern Shenandoah Valley Re-Entry Council, the Northern Shenandoah Valley Substance Abuse Coalition, and the Juvenile Court Best Practices Committee. In addition, the Public Defender is a member of the Community Criminal Justice Board and the ASAP Board, and serves as vice-chairman for both boards. These groups help foster collaborative efforts with other agencies such as DSS, Probation and Parole, Pre-Trial Services, the regional and local jails, court personnel, local hospitals, and private mental health and substance abuse treatment providers. These groups meet monthly and/or quarterly and explore how to access various services in the community. The major barriers involve funding and fragmentation of services. These groups have addressed these barriers by meeting regularly and sharing information among the various participants concerning available services.

The Northern Shenandoah Valley Re-Entry Council continues to meet every other month and has created a website to assist offenders reentering the community. Past efforts of the Council included sponsoring job fairs and a seminar for local employers to provide information and materials on the hiring of ex-offenders. The Council has also developed a "Pocket Resource Guide" with information on local service providers to aid those re-entering the community from jail or prison. The Council continues efforts to reach out to the faith-based community to help with a mentoring program. A major barrier for the Council has been a lack of resources and coordination.

The Public Defender serves on the board of the Northern Shenandoah Valley Substance Abuse Coalition to address the heroin epidemic that has gripped the Northern Shenandoah Valley. The organization has incorporated as a non-profit corporation and has received 501(c)(3) status from the Internal Revenue Service. The organization is made up of representatives from all sectors of the community affected by substance abuse, including law enforcement, the local Community Services Board, private substance abuse treatment providers, the local school systems, the court system, local hospital system, and concerned citizens. The Public Defender was a part of the effort to establish a drug treatment court to serve the City of Winchester and Counties of Clarke and Frederick. That drug treatment court was approved by the Virginia Supreme Court in April 2016, and held its first docket in August 2016. The Coalition was successful in obtaining initial funding from the three localities and Valley Health Systems to start the court.

The drug treatment court also was awarded a planning and implementation grant from the Bureau of Justice Assistance in September 2016. That grant is in the amount of \$350,000 and runs for three years. Federal grant funds from HIDTA (High Intensity Drug Trafficking Area) will be used to cover treatment costs after the BJA grant expires. In addition, the Coalition was awarded grants from the local United Way and Regional Rotary Clubs to assist drug court participants with housing, transportation and peer support. The Court is currently serving 35 clients and hopes to expand to 40-45 clients within the next 12 months. The Court has commenced 7 participants to date and is helping many others as they work their way through the program. Barriers to efforts to maintain the drug treatment court are the cost of treatment and housing, and sustainable and adequate resources for the future.

In September 2018, the Coalition was awarded a \$1,000,000 grant from the AETNA Foundation to develop a diversionary program called the Law Enforcement Overdose Intervention Program. This program will employ a dedicated law enforcement officer from the Winchester Police Department, a

case manager/counselor, and a peer recovery specialist. The goal of the program is to engage with non-violent substance users immediately upon their arrest and divert them into treatment and counseling services. If the individual is compliant with treatment services, the charge can be dismissed and not pursued.

The Juvenile Court Best Practices Committee continues to meet and address various needs of juveniles and their families. The Public Defender's Office participates with the Committee and has attended programs sponsored by the committee. The Juvenile Court Best Practices Committee has implemented a system of referrals using court orders for those organizations under the jurisdiction of that Court. Barriers to these efforts include sustainable and adequate resources for the future.

Virginia Parole Board

The Virginia Parole Board serves a population of approximately 3,000 offenders currently eligible for discretionary parole and geriatric conditional release review and a population of approximately 2,805 offenders who are on supervision in the community.

As of June 30, 2019, there were 2,936 incarcerated discretionary parole eligible offenders (2,005 of those offenders are currently discretionary parole, with 931 of them becoming discretionary parole eligible sometime after June 30, 2019). Additionally, the Parole Board serves a population of 1,260 geriatric conditional release eligible offenders, many of whom are also discretionary parole eligible. Per Department of Corrections, of the 30,000+ currently incarcerated offender population, almost 12,000 of those offenders either are or will become geriatric conditional release eligible during the course of their incarceration.

Absent extenuating circumstances, the Parole Board grants parole conditioned upon the successful completion of the VADOC re-entry program. The Parole Board will not approve an offender's release until he/she completes the program. The VADOC places the offender in the program as soon as space is available.

On September 1, 2019, the Parole Board had 2,805 offenders on parole supervision (on mandatory parole, discretionary parole, or post release supervision) in the community. The Parole Board works in cooperation with the Department of Correction's local probation and parole offices to ensure public safety and to respond quickly to warrant requests.

The Department of Corrections continues to allow the Virginia Parole Board access to its resources and facilities. The VADOC also provides training to board members on various aspects of the Department's operations including but not limited to offender programs, community releases, sex-offender treatment, offender's medical and mental healthcare, interstate compact procedures, criminal records, and sentenced-time computation. The Parole Board provides training to VADOC employees as well as to enhance understanding of their own procedures. The Parole Board's Victim Services Coordinator works collaboratively with the Department of Corrections Victim Services Unit.

As the Virginia Parole Board and the VADOC review geriatric offenders for parole consideration, the primary barrier to release is the lack of any public assisted living/nursing home facilities willing and able to assume care of this population.

The Special Investigations Unit (SIU) for the Parole Board is responsible for conducting pardon investigations for the Secretary of the Commonwealth and Governor's office. The SIU conducts simple pardon, conditional pardon and absolute pardon investigations. The SIU also conducts special parole interviews and investigations for parole and geriatric eligible offenders. This unit is currently composed of seven retired law enforcement officers with a combined total of 210 years of investigative experience.

The Parole Board also supervises those Individuals on a period of court-ordered post-release supervision. The Parole Board determines the appropriate outcome for those individuals who have violated the terms of court ordered post-release supervision. Often these individuals are struggling after having been released onto mandatory parole from a period of incarceration. Often these individuals have committed "technical" infractions for example, testifying positive for drugs. The Parole Board expedites its review of these violations to ensure those individuals that can be diverted into an alternative to incarceration (e.g., the Community Corrections Alternative Program) are done so quickly and in a manner that best ensures their successful overall re-entry.

Data and Information

The Parole Board relies upon the Department of Corrections to provide data and statistical information associated with their current incarcerated population and the population that is responsible to the Parole Board in the community.

Pursuant to Virginia Code Section 53.1-136(6), the Virginia Parole Board is required to report monthly decisions. The Parole Board website posts 5 full prior calendar years of decisions in addition to decisions made during the current calendar year.

The CORIS system changes are necessary. However, that system cannot generally be changed by VADOC IT staff and the changes require modification by the vendor of CORIS under its contract with VADOC. The Parole Board is currently working with the CORIS Project Management team to resolve some issues. incorporate other enhancements, and streamline processes in the system.

Conclusion

This overview of re-entry services shows many varied and effective collaborations in the Commonwealth. Not all agencies experienced notable changes during the reporting period, but relationships focused on effective offender reintegration were strengthened. The result of this increased collaboration is an innovative use of resources available to those individuals transitioning to the community.

Through agency collaboration, the Commonwealth is able to provide services to offenders from the time of their arrest to their release back into the community. To continue the facilitation of this seamless re-entry process, resource and policy barriers should be addressed. The most successful programs should be identified and replicated throughout the Commonwealth.

An increase in accurate data collection is imperative for program evaluation techniques and fidelity measurements of statewide initiatives. This will ensure available funds are targeted toward effective programs and re-entry needs. Performance measurement tools are an integral part of successfully

incorporating the most effective resources into our facilities and communities to have a positive impact on adult offender and juvenile re-entry.