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Assistant Director Janes,

Please find the attached final report "Follow-up Evaluation of Ohio's Community Based Correctional Facility and Halfway House Programs—Outcome Study." Thanks to you and ODRC colleagues for taking the time to carefully review of the draft report and provide detailed feedback. A formal response to the feedback will be submitted as well. Please feel free to contact any of the report authors if you have questions or concerns (lori.lovins@uc.edu, edward.latessa@uc.edu, paula.smith@uc.edu). We look forward to seeing you next week to present the report findings. Also, congratulations on your promotion to Assistant Director.

Respectfully Submitted,

Lori Lovins
Research Associate
Project Director

FINAL REPORT

Follow-up Evaluation of Ohio's Community Based Correctional Facility and Halfway House Programs— Outcome Study

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Table of Contents

Tables

Figures

Follow-up Evaluation of Ohio's Community Based Correctional Facility and Halfway House Programs— Outcome Study

Executive Summary

The University of Cincinnati, Division of Criminal Justice was contracted in 2006 by the Ohio Department of Rehabilitation and Correction (ODRC) to conduct a follow-up evaluation of the state's halfway houses (HWHs) and Community Based Correctional Facilities (CBCFs). This study was designed as a follow-up to an original study conducted in 2002, which examined the effectiveness of Ohio HWHs and CBCFs at reducing recidivism. The original study was pivotal in determining elements of effective programming for Ohio offenders. A key finding from the original study was support for the risk principle, which suggests that intensive programming be reserved for higher risk offenders.

The current study was designed with the following research questions in mind:
- *What type of offenders benefit most from programming?*
- *Which programs are most effective at reducing recidivism?*
- *What models or program characteristics are most important in reducing recidivism?*

The current report focuses on answering the first two research questions; a supplemental report will address the third question by examining in-depth program characteristics to determine which are most important in reducing recidivism. To determine the type of offenders that benefit most from programming, the current report examined individual level characteristics of participants of HWH and CBCF programs. Adjusted probabilities were calculated to identify predictors of both successful completion and recidivism. Like the 2002 study, outcome data examining how HWH and CBCF program participants compared to non-participants using multiple measures of recidivism were also presented. Data were examined by program termination status, as well as referral type.

The 2010 study offers several improvements over the original 2002 study: 1) the current study uses a prospective rather than retrospective design; 2) detailed program-level data were collected which will allow for an in-depth analysis of program characteristics in a supplemental report; 3) rather than sampling a group of offenders from each treatment program, all offenders participating in each program within a one year time frame around the date of the site visit were included in the initial pool of experimental cases; 4) an additional comparison group was used in the current study; 5) treatment cases were matched one for one with comparison cases; the assurance that treatment and comparison cases are the same on the matched variables limits the need to statistically control of differences between the treatment and comparison groups; and 6) the outcome data related to conviction of a new crime were collected via the Ohio Law Enforcement Gateway (OHLEG), which is considered more reliable than data sources available for the 2002 study.

The research employed a quasi-experimental design wherein two treatment groups and two comparison groups were examined. Treatment groups consisted of participants of an Ohio CBCF or HWH facility between February 2006 and June 2007. The comparison samples consisted of 1) parolee/PRC offenders released from a state institution during the same time frame, but not exposed to either HWH or CBCF intervention; and 2) offenders placed on Intensive Supervision Probation (ISP), which was used as a comparison group for probationers in both treatment samples. Comparison cases were matched on the following factors: *gender* (male/female), *race* (White/non-White), *sex offender status* (sex offender/non-sex offender), *county* (large, medium and small) and *risk* (low, moderate, and high). Offender data were provided by ODRC, whereas program level data and conviction outcome data were collected by University of Cincinnati researchers. Outcome measures included felony conviction, any conviction (misdemeanor or felony), and new incarceration. A two-year follow-up timeframe was used. Results were examined separately for successful program completers and all participants, as well as by risk level.

The CBCF offenders participated in one of 20 Ohio CBCF programs in operation in 2006. Two separate comparison samples were used for the CBCF experimental cases: 1) the CBCF/parole sample, which included 3,764 matched pairs; and 2) the CBCF/ISP sample, which consisted of 3,564 matched pairs. The HWH offenders participated in one of 44 Ohio HWH programs in operation in 2006. Unlike the CBCF samples, one HWH experimental group was examined with HWH parolees matched to parole/PRC comparison offenders, and HWH probationers matched to ISP offenders. This sample consisted of 6,090 matched pairs. All in all, three groups of offenders were analyzed: 1) CBCF/ISP comparison; 2) CBCF/Parole comparison; and 3) HWH/parole and ISP comparison. Excluding duplicate CBCF and comparison cases, there were just over 20,000 independent offenders included in the study. A brief summary of the findings of the study follows.

Predictors of unsuccessful termination and recidivism:
- Findings suggested that younger, higher risk, Non-White, property offenders with prior convictions and current employment problems were more likely to be unsuccessfully terminated from a CBCF. Predictors of recidivism for CBCF participants included similar factors, in addition to being male with prior incarcerations and a substance abuse problem.
- For HWH participants, being a younger, higher risk, male property offender with a prior record, lower level offense and employment problems leads to a higher likelihood of unsuccessful termination. Predictors of recidivism for HWH participants were also similar to those factors predicting unsuccessful termination, except for the addition of being Non-White and having a substance abuse problem.

Outcome results for the CBCF/ISP group:
- When all participants are examined, despite how recidivism is measured, program participants had a higher rate of recidivism (slight increases when measured via a new conviction and modest increased relative to new incarcerations). However, when broken down by risk, high risk offenders produced a slight positive treatment effect.
- When only successful treatment completers are examined, programs produced a very slight decrease in the rate of new convictions, but still increased the rate of new

incarcerations relative to ISP offenders. The effect sizes for high risk offenders became more substantial and the majority of programs produced positive effects for high risk offenders.

Outcome results for the CBCF/Parole group:
- Like with the CBCF/ISP group, when all participants are examined, programs on average produced negative effects. While an increased number of programs produced treatment effects with high risk offenders, programs still, on average, tended to increased recidivism, despite risk level.
- When only successful treatment completers are examined, treatment effects again improve. Yet even though treatment effects were apparent related to new convictions, when incarceration was used as the outcome measure, programs on average failed to produce positive results, irrespective of risk.

Outcome results for the HWH Sample:
- When all participants are examined, HWHs produced very slight decreases in rates of new conviction across programs, but showed a modest increase in the rate of new incarcerations. As with the CBCFs, aside from new incarcerations, effect sizes increased with higher risk offenders.
- When only successful completers were considered, like with the CBCFs, treatment effects increased substantially. Despite how recidivism was measured, programs on average showed about a five percent reduction in recidivism. This rate increased substantially for high risk offenders, while programs on average increased recidivism rates for low risk individuals.
- Rates of recidivism were also examined by referral type for the HWH sample (condition of probation, condition of parole, violation of probation, violation of parole, transitional control and other). While the magnitude of the treatment effect varied with referral type, most types of referrals benefited from HWH intervention, so long as the offenders referred were moderate to high risk.

Overall, CBCFs performed better against the ISP sample than the parolee sample. Likewise, HWHs appeared to outperform CBCFs with respect average rates of recidivism across programs, as well as the percentage of programs producing positive effects. Finally, programs as a whole produced less favorable results when new incarceration was used as the recidivism measure.

Overall, there were several findings consistent with the 2002 study. First and foremost, remarkable consistency was found regarding support for the risk principle. Programs clearly produced more favorable results with high risk offenders, and tended to increase recidivism for low risk individuals. Likewise, both superior and poor program performers could be identified, despite the use of different outcome measures. Many programs that performed well in the 2002 study continued to perform well in the current study. Likewise, some of the programs that performed poorly in 2002 continued to do so in the current study.

In the current study, attention was paid to successful completion rates for programs. More care was taken in interpreting results for programs with low successful completion rates; as such rates

are likely elevated. On average, CBCFs had much higher rates of successful completion than HWHs, due in part to these programs being secure facilities.

Limitations of the study include small sample sizes in some categories. Although the overall sample size was large, examining offenders by risk category, program and termination type lead to some small sample sizes, particularly for smaller programs and for low risk offenders. Another limitation is the likelihood that multiple factors influence the recidivism rates of offenders participating in programs aside from program quality. For example, the quality of offenders' post release supervision and community treatment, as well as the philosophy of the counties being served are likely to influence outcomes. The examination of such factors was out of the scope of the current study.

In terms of recommendations, program should continue to pay attention to risk, reserving more intensive interventions (such as residential placement) for higher risk offenders. Use of the newly developed Ohio Risk Assessment System (ORAS) will aid in this as this tool brings consistency to the assessment of offender risk across the state.   Another recommendation is that programs as well as ODRC address post-release supervision and aftercare programming, as these interventions are also likely to affect offender outcomes. Finally, programs that failed to produce favorable outcomes should examine their treatment practices, including whether they are using an evidence-based model and curricula, or are targeting appropriate risk factors. For those programs that meet these objectives, but still produced unfavorable results, a closer look at how programming is implemented becomes important. Research has shown that evidence based interventions can produce negative effects if not delivered with high fidelity.   The program characteristics supplemental report will provide further insight as to what program factors are important in reducing the likelihood of recidivism among participants. Results of this report can also be used to assist facilities in improving programming for Ohio offenders.

SECTION I: INTRODUCTION

Research suggests that community-based interventions are oftentimes more effective at rehabilitating offenders than incarceration programs (Andrews et al. 1990; Lipsey & Wilson, 1998, Gendreau, French and Taylor, 2002). One proposed reason for the enhanced effectiveness is that intervention occurs in the environment in which offenders live (in vivo); therefore, prosocial skills offenders learn can more easily be transferred and maintained in his or her life (Gordon et al., 1988, Davison and Lazarus, 1993, Henggeler, 1997). One example of a community-based intervention used across the nation is the residential community correctional program.

Residential community correctional programs differ extensively in terms of size, services, population served, purpose and strategies used to rehabilitate offenders (Latessa and Travis, 1992). One type of residential community correctional program is the half-way house. Half-way houses were primarily designed to provide a step-down for offenders transitioning from prison to the community. Yet residential community correctional programs can also be used as an alternative to imprisonment (Latessa and Travis, 1991). In Ohio, Community Based Correctional Facilities (CBCFs) were developed to divert adult offenders from prison. Residential community correctional programs have the potential to assist offenders in obtaining employment and stable housing, as well as addressing the needs that impact an offender's ability to refrain from criminal behaviors (Latessa and Travis, 1992, Lowenkamp and Latessa, 2004).

The effectiveness of residential community correctional programs at reducing recidivism also varies widely (Latessa and Travis, 1991, Lowenkamp and Latessa, 2004, and Lowenkamp, Latessa, and Smith, 2006). Latessa (1998) noted several common shortcomings of halfway house programs, including inadequate assessment, low qualifications and high turnover among

staff, and lack of theoretically based treatment models. While many halfway house programs are plagued with these deficiencies, others have been effective at reducing recidivism, depending on who they serve, what they target, and how such needs are addressed (Lowenkamp, 2004).

Ohio halfway houses (HWHs) are community-based residential programs designed to serve adult offenders released from state prisons, referred by the Courts of Common Pleas, or sanctioned due to a violation of community supervision. Hence, Ohio's halfway houses serve a wide array of offenders, typically consisting of parolees, offenders on post-release control, individuals released from an institution on transitional control status, and probationers. These halfway houses provide an array of services to assist offenders in the reentry process. Common services include employment readiness and job placement, educational programming, and drug/alcohol treatment. Some also provide specialized treatment, such as sex offender treatment or programming for offenders with mental health issues.

Like halfway houses, Ohio's Community Based Correctional Facilities (CBCFs) are residential programs aimed at providing rehabilitative services to offenders. However, CBCFs primarily serve adult felony probationers as a last alternative to prison. Ohio's CBCFs were first opened in the late 1970s as a response to prison overcrowding. These facilities allowed for local sanctioning of lower level felony offenders. The operation of a CBCF involves a partnership between state and local governments. These facilities are funded primarily through ODRC, but are overseen by a local facility governing board. CBCFs provide comprehensive programming aimed at meeting multiple offender needs, such as substance abuse, criminal attitude, family issues, anger management, education and employment needs, and emotional wellness. The programs also emphasize effective reentry and restitution to the local community. The current programs range in size to accommodate roughly 50 to 200 offenders. Unlike halfway houses,

which tend to be staff-secure facilities, CBCFs are minimum security locked facilities. The per diem cost to house an offender in a CBCF is higher than a halfway house, due in part to facility security and services offered by these programs.

The Ohio Department of Rehabilitation and Correction, Bureau of Community Sanctions (ODRC-BCS) provides funding and oversight for many of Ohio's residential community correctional facilities. This prompted their interest in determining the effectiveness of these residential programs. In 2002, a comprehensive outcome study of Ohio's halfway houses and CBCFs was conducted.

Original Study of Ohio's Halfway House and Community Based Correctional Facility Programs

In 2002, the Ohio Department of Rehabilitation and Correction (ODRC), Division of Parole and Community Services contracted with University of Cincinnati, Division of Criminal Justice to conduct a large study of the state's HWH and CBCF programs. That study encompassed an examination of 13,221 offenders, 7,366 of which were either placed in a HWH or CBCF facility. The remaining 5,855 offenders served as parolee/Post Release Control comparison cases that were released from ODRC, but not exposed to HWH or CBCF residential placement. This study also examined the treatment practices of 15 CBCF facilities and 37 HWH programs. Likewise, recidivism data, including re-arrest and re-incarceration (for either a new offense or technical violation) were compared between the treatment and comparison samples. Treatment effects by risk, termination type, and geographic setting were examined.

Key findings from Lowenkamp and Latessa's 2002 study were that a program's ability to reduce recidivism among participants varied substantially depending on risk level of the offenders served. Low risk offenders showed an average *increase* in recidivism of 4 percent, while programs showed a *reduction* in recidivism of 8 percent for high risk offenders. Hence,

findings supported the risk principle, which suggests that intensive correctional services be reserved for higher risk offenders. Likewise, some characteristics, such as risk category, predicted successful program completion as well as recidivism. Program completers also showed more favorable outcomes than those terminated from programming. This finding highlighted the importance of incorporating termination status into the study of program effectiveness.

Current Study

The University of Cincinnati, Division of Criminal Justice was again contracted in 2006 by the ODRC to conduct a follow-up evaluation of the state's HWH and CBCF programs. This study is designed as a follow-up to the 2002 study, with several goals in mind. The current study seeks to examine the following key research questions:

- *What type of offenders benefit most from programming?*
- *Which programs are most effective at reducing recidivism?*
- *What models or program characteristics are most important in reducing recidivism?*

In answering these questions, this report will examine individual level characteristics of participants of HWH and CBCF programs. Like the 2002 study, outcome data examining how program participants compared to non-participants using multiple measures of recidivism will be presented. Data will also be examined by program termination status, as well as referral type. While this report will focus on program outcomes, a supplemental report will examine in-depth program characteristics to determine what characteristics are most important in reducing recidivism. Furthermore, a profile for each program, including descriptive and outcome data, as well as strengths and recommendations will be provided.

The current report will be organized into the following subsections: Section I provides a background to the current study; Section II will provide a summary of the methodology used for this study, highlighting some of the improvements over the 2002 study; Section III presents a description of the programs by facility type; Section IV outlines the results of the study, specifically recidivism outcome results for the CBCF and HWH programs; and Section V summarizes the primary findings for this study and identifies limitations of the research.

SECTION II: METHODOLOGY

This section of the report will highlight the methods used for data collection and analysis, including: 1) a description of study participants as well as the method used for matching treatment and comparison cases; 2) the procedures for both individual and program level data collection; 3) a description of key measures used in the study; 4) study design and analysis techniques; and 5) improvements over the original 2002 halfway house/CBCF study.

Participants/Matching Process

This study incorporates two treatment groups: offenders sentenced to an Ohio CBCF between February 1, 2006 and June 1, 2007[1], and offenders placed in an Ohio HWH facility within the same timeframe.   This study also uses two comparison samples: 1) parolee/PRC offenders released from a state institution during the same time frame, but not exposed to either HWH or CBCF intervention; and 2) offenders placed on Intensive Supervision Probation (ISP), which was used as a comparison group for probationers in both treatment samples[2]. The 2002

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[1] Program level data collection occurred from August 2006 to December 2006. The February 2006 to June 2007 dates represent a one year time from around the beginning and end of the program level data collection.
[2] ODRC provided the list of offenders participating in CBCF and HWH programs within the sampling timeframe as well as the list of prospective parolee and ISP comparison cases. Duplicate offenders were identified in both the treatment and comparison groups.   Whatever intervention the offender was admitted to *first* marked their designated group. For example, if an offender received both CBCF and ISP intervention within the sampling timeframe, s/he was kept in whichever group had the first admission date.

study used only parolees as comparison cases. The addition of ISP as a comparison sample

reflects an attempt to address this limitation.

Comparison cases were matched on the following factors: *gender* (male/female), *race*

(White/non-White), *sex offender status* (sex offender/non-sex offender), *county* (large, medium

and small) and *risk* (low, moderate, and high).[3] With regard to the matching process, the values

for the variables for the treatment case were stored and then all matching comparison cases were

selected with one randomly pulled and marked as "the" comparison case. The matching process

resulted in a one-for-one match between treatment and comparison cases, using the identified

matching variables. Since all CBCF and HWH analyses were conducted separately, the same

pool of ISP and parolee/PRC comparison cases were used for both treatment samples.

The CBCF offenders participated in one of 20 Ohio CBCF programs in operation in

2006. The treatment sample for each CBCF was derived using the date of each CBCF site visit,

and identifying all offenders admitted to the program six months before and after the date of the

site visit. Two comparison samples were used for the CBCF experimental cases. First, all

CBCF program participants were compared to a matched parolee comparison sample. In this

sample, there are 3,764 treatment cases and 3,764 matched parolee comparison cases. These

cases were derived from a larger sampling frame of 4,992 treatment cases and 7,274 comparison

cases. Secondly, the CBCF sample was compared to matched ISP offenders not exposed to

CBCF or HWH placement, as this sample consists of probationers sentenced to community-

based intervention rather than residential placement. This CBCF/ISP sample consists of 3,564

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[3] The Offender-Level Measures section of the report (to follow) will outline how county categories are defined, and Appendix A provides a full description of the development of the risk scores and cutoffs.

treatment cases and 3,564 matched ISP cases[4]. These cases originated from a sampling pool of 4,992 treatment cases and 3,843 comparison cases[5].

The HWH offenders participated in one of 44 Ohio HWH programs in operation in 2006. The HWH sample consists of 6,090 treatment cases and 6,090 matched comparison cases. Two types of comparison cases were used for the HWH experimental cases. Approximately 30 percent of the HWH participants in the experimental group were probationers[6]. For this group (N=1,704), ISP cases not placed in a HWH/CBCF facility were used for the comparison group. The sampling pool was 1,943 for the HWH probationers and 3,843 for the ISP cases. For the remaining 4,386 HWH offenders, parolees not exposed to HWH intervention were used for comparison. The sampling frame for the HWH/parolee sample was 4,542 HWH parolees and 7,274 potential parolees with no HWH intervention.

While like the CBCFs, HWH participants were matched to both parolees and ISP offenders, only one HWH experimental group was identified. HWHs serve an array of offender types. As such, within the HWH treatment sample, HWH probationers were matched to ISP offenders while HWH parolees were matched to parolee comparison cases. To the contrary, CBCFs primarily serve probationers and offenders on judicial release. As such, the entire CBCF treatment group was matched to the ISP group and the same pool of CBCF participants was matched again to a group of parolee/PRC offenders, resulting in two separate CBCF experimental groups with matched comparison cases for analysis. The purpose of having the ISP

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[4] CBCF treatment sample size varies based upon the comparison group due to available comparison matches.
[5] The original pool of ISP comparison cases was larger, but cases had to be eliminated from the pool due to case duplication.
[6] To differentiate probationers from parolees, the "REASONPLACEDID" variable from the CCIS database was used. Offenders placed as 1) a condition of probation; 2) for violation of probation; 3) as a judicial release; and 4) for treatment in lieu of incarceration were placed in the "probationer" group. Offenders placed as 1) a condition of parole; 2) for violation of parole; 3) transitional control; or 4) boot camp were designated to the "parolee" group. Approximately 150 offenders were coded in the "other", "pre-trial" or "readmitted" categories; these cases were eliminated from the treatment group.

comparison group for the CBCFs was to create a comparison group of probationers that were more similar to those offenders sentenced to a CBCF than parolees. The purpose of also having a parolee comparison group was to use a similar design to the 2002 study so that results from both studies could more easily be compared. Hence, all in all, there are three groups of offenders that will be analyzed separately: 1) CBCF/ISP comparison; 2) CBCF/Parolee comparison; and 3) HWH/parole and ISP comparison[7].

Procedures for Data Collection

In order to answer the aforementioned research questions, data were collected on both individual offenders and HWH and CBCF programs. Individual level demographic and criminal history data were provided by ODRC, while University of Cincinnati researchers collected the bulk of outcome data[8]. Program level data were collected by University of Cincinnati researchers during site visits to each of the CBCF and HWH facilities. The following section will detail the process for individual and program level data collection.

Individual-Level Data Collection

Individual level offender data for the CBCF, HWH and ISP samples were extracted from the Community Corrections Information System (CCIS) maintained by the ODRC. For the parolee/PRC sample, data came from the Department's Offender Tracking System (DOTS-PORTAL) database, ODRC's main inmate database. These data included demographic characteristics, the current offense, offense history, county of conviction, identified needs,

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[7] Since a significant number of treatment cases could not be matched (16% for HWH, 28% for CBCF/HWH, and 32% for the CBCF/ISP) the differences between the matched and unmatched samples were analyzed. Although there were several significant differences between these two pools, it had an overall minimal effect on the outcomes of the programs. The difference of recidivism rates between the matched only and all participants (matched + unmatched) ranged from -1.55% to 1.64%.

[8] ODRC provided outcome data related to new incarcerations to state correctional facilities within the 2-year follow-up time frame

services delivered, termination type, and employment. All offender background data were provided by ODRC.

Recidivism data for both the experimental and comparison groups were collected by University of Cincinnati researchers via the Ohio Law Enforcement Gateway (OHLEG) system. ODRC had access approved for a select group of UC researchers by the Ohio Attorney General's office in order to access offender files. Collection of the recidivism data began in April 2009 and ended in September 2009. Recidivism data collection occurred in two phases: 1) locating and printing offense records for the identified treatment and matched comparison cases from OHLEG; and 2) entering data from the offense record print outs into a database. All researchers were trained on both accessing records from OHLEG and coding the recidivism data.

Before accessing records from OHLEG, data coders were provided with a list of offender names, social security numbers, dates of birth, gender, and follow-up dates for the treatment and comparison cases. Follow-up dates for recidivism collection was individualized for each offender, depending upon his or her termination date from a program (for treatment cases), or admission date to parole or ISP (for comparison cases). A two-year follow-up timeframe was used. The lists used to collect the OHLEG data were categorized by program and sample. Coders were instructed to match cases from OHLEG on at least two of the three key identifiers (name, date of birth and social security number). Once cases were located in the OHLEG system, the record was printed out and stored in a locked cabinet.

Once all records were printed for a treatment site or matched comparison group, a second group of researchers were charged with coding the data. Data collected from the OHLEG records included: 1) misdemeanor conviction, 2) date of first misdemeanor conviction, 3) type of misdemeanor conviction (most serious)/citation number, 4) felony conviction, 5) date of first

21

felony conviction, 6) type of felony conviction (most serious)/citation number, 7)

probation/parole violation, 8) date of probation/parole violation, 9) probation/parole violation

citation number; 10) sex offense conviction, and 11) any arrest[9]. These data were coded directly

into a secure database, with a separate database created for each of the programs and each of the

programs' matched comparison group[10].

For incarceration outcome data, names selected for the treatment and comparison groups

via the matching process were sent to ODRC who provided information on which offenders

returned to ODRC within the two year follow-up timeframe[11]. Only new incarcerations in an

Ohio penal institution were included[12]. Likewise, conviction data was limited to crimes

identified within the OHLEG system.

Program-Level Data Collection

A list of all HWH and CBCF sites to be included in the evaluation was provided by

ODRC. In all, the University of Cincinnati research team visited 64 programs across the state of

Ohio (20 CBCF and 44 HWH programs)[13]. Site visits began in early August 2006, and were

concluded by December of 2006. Site visits to the facilities occurred weekly within this time

frame, and were typically conducted by 3 to 5 researchers. Data were typically collected at a

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[9] More detailed information was not collected on new arrests as concerns were expressed from previous users of OHLEG that arrest data coded within OHLEG had limited reliability.

[10] Data were organized by program so that quality assurance could easily be performed. Researchers were required to identify which program they selected for both pulling OHLEG cases and coding data. Five to ten percent of cases from each program and matched comparison group were audited to ensure correct coding of the cases.

[11] Attempts were made to identify reason for return to ODRC (technical violation versus new crime). While this information is provided to ODRC for parole/PRC violations, DRC is unable to reliably discern between a new crime and technical violation for probationers. To do so would involve accessing data from the local courts in each county. Reason for return/admission to prison data will therefore not be included in this report.

[12] Convictions and incarcerations outside of Ohio were not included in the recidivism data. While a limitation, this was true for both the treatment and comparison cases, and should therefore not impact the overall study findings.

[13] Programs within facilities or agencies were identified based upon whether there were separate treatment sites (e.g. Oriana, Alvis and Talbert House have several distinct programs located at separate treatment sites), and whether sites offered distinct program models or served separate populations (e.g. while housed in the same building, Volunteers of America-Cincinnati, has three distinct programs, each of which serve a different population of offenders). If a program served both males and females, these were only identified as separate programs if programming between the genders differed significantly.

program within one eight-hour day, although the time used to collect data varied depending on the size of the program and availability of groups for observation.   Follow-up phone calls were also used when necessary if key staff were absent the date of the site visit or follow-up information was needed.

All researchers selected to conduct site visits for this project were trained on the data collection materials, as well as effective practice in corrections. All research team staff was also required to be certified and trained on ethical practices of human subject research[14]. Interviews, surveys and group observations required completed consent forms from program directors, staff and offenders. These consent forms were maintained with the program file in a secure cabinet at the University of Cincinnati.

Every attempt was made to schedule a site visit on a day that key programming could be observed and key staff were available for interviews. Where this was not possible, a researcher was either sent back to a facility for additional group observation or interviews, or follow-up phone interviews were conducted. At each site, the following individuals were interviewed: a program and/or clinical director; treatment providers including therapists, case managers, group facilitators, intake staff, employment specialists, aftercare specialists, mental health specialists or any staff involved in program delivery; a sample of custody staff and supervisors; quality assurance/accreditation managers; and program participants. Staff were also provided with surveys to collect data on staff credentials and experience, as well as staff attitude toward offenders and correctional rehabilitation. Researchers were provided with structured interview

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[14] There is a certification process required by the University of Cincinnati Institutional Review Board for all staff hired for a research project.

guides for collecting the data[15]. Likewise, prior to the site visit, the program director was

provided with a checklist of materials for review to help prepare for the data collection process.

Materials included treatment manuals, assessments, policy and procedures, written information

on reinforcers and sanctions, admission and completion criteria, and any research studies

conducted on the program. This information was reviewed during the site visit or copies were

provided to research staff. Ten open and ten closed files were also reviewed for collateral

information to the staff interviews. A file review form was used to code non-identifying

program data from the files.

At the conclusion of the site visit, the research team would compile all materials from the

site visit and collectively complete a program summary form. The materials used for the program

summary form included interview guides, surveys, file review forms, program material, and

group observation forms. A database with 1,038 variables was created from the program

summary form that identifies each observation and measure captured during the site visits from

all data collection sources.

Evidence Based Correctional Program Checklist (CPC) and Core Correctional Practices

Two instruments were used to develop the program-level data collection tools for this

project: the Evidence Based Correctional Program Checklist (CPC) and the Core Correctional

Practices section of the Correctional Program Assessment Inventory-2000 (CPAI-2000). These

instruments are designed to ascertain how closely correctional programs meet the known

principles of effective intervention[16]. Several studies conducted by the University of Cincinnati,

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[15] The data collection instruments were adapted from the Evidence-Based Correctional Program Checklist (CPC) and the CPAI-2000. Since both tools are used to collect data for on-going process evaluations the specific tools will not be available as part of this report.

[16] The CPC is modeled after the Correctional Program Assessment Inventory developed by Gendreau and Andrews; however, the CPC includes a number of items not contained in the CPAI. In addition, items that were not found to be positively correlated with recidivism were deleted.

including the original 2002 HWH/CBCF study, were used to develop and validate the indicators on the CPC.[17] These studies yielded strong correlations with outcome between overall scores, domain areas, and individual items, (Holsinger, 1999; Lowenkamp & Latessa, 2003, Lowenkamp, 2003; Lowenkamp & Latessa, 2005a; Lowenkamp & Latessa, 2005b).   The data collection tools for the current study were designed to expand item definitions on these instruments so that in-depth program data could be collected.

The CPC measures two components of programs: *capacity*, or the degree to which the program has the capability of using evidence-based practices and *content*, the current assessment and treatment practices employed by the program. Program capacity evaluates the following areas: (1) program leadership and development, (2) staff characteristics and (3) quality assurance. Specifically, *program leadership and development* considers the educational and professional experience of the program director. Further, there are items that address the program director's involvement in the development of the program, as well as the selection of staff and delivery of services.   Items related to program funding and sustainability, as well as piloting of programs before full implementation are also considered. The *staff characteristics* domain identifies the educational and professional experience of the treatment staff. In addition, staff training as well as support and attitudes of the staff regarding the programming are assessed. Finally, this domain identifies whether or not there is clinical supervision provided to the staff.   Items under the *quality assurance* domain reflect the internal and external review strategies employed by a program to maintain the treatment model, including observation of service delivery and surveying client satisfaction with the program. Additional quality assurance

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[17] These studies involved over 40,000 offenders (both adult and juvenile), and over 400 correctional programs, ranging from institutional to community based.   All of the studies are available on our web site (www.uc.edu/criminaljustice). A large part of this research involved the identification of program characteristics that were correlated with outcome.

items include whether offenders are reassessed, as well as whether the program has undergone process and/or outcome evaluations, and the results of such assessments.

Program content examines offender assessment and treatment characteristics. *Offender assessment* considers whether or not the program is using an actuarial, standardized risk/need assessment that is valid for their target population and is used to identify appropriate offenders for programming. Likewise, the program should assess a range of key responsivity factors using a validated tool. The assessment section also evaluates whether the program has clear eligibility/exclusionary criteria. The items under the *treatment characteristics* domain examine: (1) whether the primary treatment targets of the program are criminogenic; (2) if the program model is centered around social learning or cognitive-behavioral theory; (3) that staff and offenders are appropriately matched to programming based on specific responsivity factors; (4) that dosage is appropriate based on the risk level of the offender; (5) that the types of rewards and punishers given as well as the process for doing so are appropriate; (6) that behavioral strategies are employed to change offender behavior; (7) whether the program trains family members and offers an aftercare component; and 8) the method for determining successful program completion.

Along with the use of the CPC, the research team was given permission to use the Core Correctional Practices (CCP) section from the CPAI-2000. The CPAI-2000 is an updated version of the original CPAI developed in 1989 by Gendreau and Andrews. One of the key enhancements of the CPAI-2000 is the addition of section G: Core Correctional Practices, which provides more in-depth analysis of specific interventions within a correctional program, such as group treatment. There are nine elements of core correctional practice, which include: 1) effective anti-criminal modeling; 2) effective reinforcement; 3) effective disapproval; 4) problem

solving techniques; 5) structured learning for skill building; 6) effective use of authority; 7)

advocacy and cognitive self change; 8) relationship practices and skills; and 9) structuring skills.

Each of the 45 CCP items was rated for all treatment groups that were observed[18]. Researchers

were instructed to observe the entirety of groups in order to accurately code the sessions using

the CCP criteria. For each of the group observations, data collection forms were completed and

a separate database was created to record all items measuring the nine elements of core

correctional practices.

Offender-Level Measures

Since individual-level data for the various samples included in the study was derived

from different ODRC data sources, common data had to be identified across all sources.

Demographic data available for analyses include age, race, gender, and marital status. *Age* was

coded as actual age in years; *race* was coded as White or non-White; and *marital status* was

coded as married or single/not married.

Criminal history and current offense information includes prior incarcerations, prior

convictions, offense type, offense level, sex offense and county of conviction. The variable *prior*

incarcerations was coded in three ways: 1) number of prior incarcerations; 2) as a dichotomous

variable with zero representing the absence of priors, and one representing the presence of priors,

and 3) as a categorical variable with zero representing no priors, one representing one prior, and

two representing more than one prior incarceration. *Prior convictions* and *sex offense* was

simply coded as a dichotomous variable, with zero representing no and one representing yes.

Current offense type was coded using the following categories: 1=violent crime/person; 2=sex;

3=drug; 4=property; 5=traffic/DUI; 6=other. *Current offense level* was coded as 1=felony 1;

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[18] In some cases, "not-applicable" or "no opportunity to observe" ratings were used.

2=felony 2; 3=felony 3; 4=felony 4; and 5=felony 5 or misdemeanor level offense. Finally, *county of conviction* was coded by each of Ohio's 88 counties and as a categorical variable into 1=Large: population above 600,000[19]; 2= Medium: population 250,000 to 600,000; and 3=Small: population below 250,000.

Few offender need variables were consistently available across datasets. All need variables were coded as a dichotomous yes/no variable with 1 indicating the need is present and 0 indicating the need is absent. Available need data included *substance abuse problem* (drug or alcohol), *current employment problem*, and *current emotional problem*. The manner in which the need data was measured varied from one data source to the next. In the parole database, need assessment information in the substance abuse, personal/emotional, and employment domain was used to ascertain whether the need was present or absent. On a four point Likert scale, the upper two "moderate to significant need" scales were coded as yes. To the contrary, the CCIS database codes drug and alcohol history and referral (which was collapsed for a substance abuse need variable), whether the offender was employed at arrest or referred to employment intervention, and whether counseling was needed. These CCIS variables were used to code substance abuse, employment and emotional need[20].

Like in the 2002 study, a risk tool had to be developed as there is no uniform risk assessment used for offenders across the state of Ohio. This risk tool was developed to include a number of theoretically and empirically important variables[21]. Weighted risk measures were used to develop the risk scale and cutoffs were established to designate low, moderate and high risk categories. These categories were used to match the treatment and comparison cases as well

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[19] Includes Cuyahoga, Hamilton and Franklin Counties.
[20] Some common offender background variables were not consistently available across datasets, such as education.
[21] Items on the risk assessment were also limited to those found in both the CCIS and the DOTS-PORTAL databases.

as analyze data by risk. Males and females were analyzed separately to determine if different factors predicted risk or reoffending; however, risk factors were similar for each gender, so the same variables were used to develop the male and female risk scales[22]. These factors included prior conviction, prior incarceration, substance abuse problem, employment problem, age category, offense level, and offense category. While risk factors were the same for men and women, separate cutoffs were established by gender. These cutoffs as well as the way in which the factors are coded and weighted to compute the risk measure can be found in Appendix A.

Design and Analyses

Several analyses were conducted in order to provide ODRC and participating programs with the most useful and interpretable information. Data were analyzed and presented separately for the CBCF and two comparison groups, and HWH and comparison cases. The first analyses used program-level data collected from site visits and from ODRC to provide a brief description of each program[23].

Next, descriptive statistics are presented on demographic variables as well as criminal history and need factors by experimental and comparison samples to identify any significant differences between these groups. Since cases were matched on gender, race, sex offender status, county size and risk category, differences will not exist between the experimental and comparison groups for these variables. However, data are also presented on additional variables not used for matching to identify differences in the samples via Pearson's Chi-square or t-tests. Additionally, descriptive statistics are presented on demographic and risk/need variables by

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[22] Numerous models were developed separately for males and females to determine which model had the highest correlation with recidivism, Nonetheless, the same factors (although weighted differently for males and females) were found to be predictive despite gender, and were therefore used to develop the risk scales.

[23] Program integrity indicators as well as more detailed qualitative program summaries that outline program strengths and recommendations for each site will be included in the supplemental report concentrating on effective program characteristics.

termination type. Multivariate logistic regression analyses are also conducted to identify

predictors of unsuccessful termination and recidivism[24]. From these analyses, adjusted

predicted probabilities are calculated to determine the likelihood of an event occurring (e.g. that

a female would be unsuccessfully terminated from a CBCF, versus a male offender).

Differences in the recidivism rates between the treatment and comparison samples for

each program are identified using cross-tabulations and Pearson's Chi Square. Data are

examined by risk level and data are explored for all offenders exposed to treatment as well as

successful completers only. Finally recidivism data are examined with various outcome

measures, including felony conviction, any conviction, and new incarceration. For HWH

treatment and comparison cases, differences by referral types are also examined. Due to the

matching procedure which rendered the treatment and comparison similar on several key

variables, multivariate analyses were not necessary to statistically control for sample differences.

Improvements from the Original 2002 Study

The current study serves as a follow-up to the 2002 HWH/CBCF study, and offers

several improvements by way of study design. Six key areas of improvement have been

identified: 1) prospective nature of the current study; 2) detailed program-level data; 3)

treatment sample selection; 4) additional comparison groups; 5) matching process; and 6) more

reliable recidivism data.

First, the current study uses a prospective study design rather than a retrospective design.

The 2009 study is a three year study that follows a group of offenders two years after termination

from a HWH or CBCF facility. Due to study timeline limitations in the 2002 study, a group of

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[24] Multivariate logistic regression is a statistical technique that allows one to determine the impact of a predictor
variable on a dichotomous outcome variable (only two categories) while controlling statistically for the impact of
the other predictors in the model. Here, several demographic and criminal risk factors/needs were used to predict
the likelihood of unsuccessful termination and recidivism.

offenders that participated in programming in 1999 had to be identified so that recidivism data using a 2-year follow-up period could be collected and analyzed within the study timeframe.

Second, the current study collected very detailed information about programming practices during the site visits. In the original study, the program director was interviewed and program staff were surveyed to ascertain data on program quality. Data collection for the current study involved all day site visits, multiple staff and offender interviews, review of program material and observation and coding of group practices. Having the detailed program level data will allow for subsequent analyses aimed at identifying specific program practices that impact recidivism.

Third, in the current study, rather than sampling a group of offenders from each treatment program, all offenders participating in each program within the one year time frame around the date of the site visit were included in the initial pool of experimental cases. This not only made the program samples more representative of the actual program populations, but it also increased the study's overall sample size and produced more stable findings once data were disaggregated by program, termination type, and risk level.

Fourth, additional comparison samples were used to assess program effectiveness. In the current study, CBCF cases are matched to both ISP and a parolee sample. The ISP match allows for probationers to be compared to probationers. The parolee match allows for both ODRC and CBCF programs to more accurately evaluate changes from the 2002 study, as this was the comparison group used then. Furthermore, in the current study probationers that participated in HWH intervention were matched to ISP offenders, and all other HWH offenders were matched to a parolee comparison sample rather than all HWH participants being compared to parolees[25].

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[25] See footnote 5 for a more detailed explanation of matching of HWH cases.

Not only were additional comparison samples used in the current study, but the process for matching offenders is also an improvement. In the current study, treatment cases could be matched one for one with comparison cases. While this process results in the loss of unmatched treatment cases, there is assurance that treatment and comparison cases are the same on the matched variables[26]. This limits the need for more complex multivariate analysis, designed to provide statistical control of differences between the treatment and comparison groups.

Finally, collection of recidivism data using OHLEG and ODRC is considered more reliable than the method used for collecting outcome data in the original study. In the original study, recidivism data was collected from the Bureau of Criminal Identification and Investigation (BCI&I) and ODRC's Department's Offender Tracking System (DOTS) checks. It is noted in the 2002 report that BCI&I rap sheets were difficult to interpret and code, particularly with regard to reconviction data, which was not used in the analyses. OHLEG provided the current study with a state-wide electronic system from which to code offender criminal behavior. Data within the system was relatively easy to interpret and code, allowing for reporting of reconviction, as well as other recidivism measures.

SECTION III: PROGRAM DESCRIPTION

The following section will provide a brief description of the CBCF and HWH programs identified by ODRC for the study. Initially, ODRC provided a list of CBCF and HWH programs which consisted of 44 total operations (19 CBCFs and 25 HWHs). Like with the 2002 study, separate programs being operated within facilities or agencies were distinguished so that 20

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[26] Some treatment cases were lost from the original pool of offenders sent from ODRC for the following reasons: 1) offenders participated in more than one intervention (see footnote 2); 2) researchers were unable to identify the offender in OHLEG; and 3) cases may have been dropped during the matching process if matches were unavailable.

CBCF programs and 44 HWH programs were identified, for a total of 64 programs[27]. Tables 1

and 2 provide information on treatment sample size, successful termination rates, length of stay,

percentage of low risk offenders served by the programs, bed capacity, and gender served, and

for CBCFs, whether the program used a Therapeutic Community model. For several of the

variables, data for the program descriptions were derived using both matched and unmatched

cases so that the sample of offenders was as representative of the program as possible. Data also

represent offenders participating in programming in 2006 and 2007, so rates may be different

now. Data are presented separately for the CBCF and HWH programs.

Table 1 provides descriptive information on the 20 CBCF programs examined in the

study. Sample size or the number of matched pairs for the CBCF/ISP group ranged from 39

cases to 409 cases, with a total of 3,564 treatment cases in this sample. Similarly, sample sizes

for the CBCF/parolee sample ranged from 54 cases to 465 cases, for a total of 3,764 treatment

cases[28]. The successful termination rate for CBCFs averaged 78.8 percent. The majority of

CBCFs had an acceptable termination rate that ranged between 65 and 85 percent[29]. Just one

program had a rate falling just below 65 percent, and 6 programs were above 85 percent.

Average length of stay was calculated for each program based on all CBCF participants

and successful completers only. As expected, the average length of stay was higher for

successful completers (139 days) than unsuccessful completers (125 days). Across CBCFs the

average length of stay ranged from 3 months to 5+ months. Regarding successful completers

only, the shortest average length of stay was 3.5 months and the longest was 6 months.

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[27] In the 2002 study, 52 separate programs were identified. The increase in programs in the present study is due to both new programs opening and further disaggregation of programs from the original study.

[28] The number of treatment cases differs in each sample based upon the available ISP or parolee cases for matching.

[29] Findings from the 2002 study supported that a program's termination rate should fall between 65 and 85 percent (Lowenkamp 2004). Programs with rates lower than this are terminating participants at too high a rate, and programs with rates above this tend to indiscriminately successfully complete participants.

CBCF data on the percentage of low risk offenders served suggest that the majority of programs serve few low risk offenders (7.0% on average)[30]. Rates ranged between 0.3 percent and 31.5 percent, the latter of which was an all female program which tends to serve higher portions of low risk individuals. Bed capacity for CBCFs varied widely. The smallest program served 25 offenders while the largest program served 216 offenders. The average bed capacity of a CBCF is just under 100 offenders. Only two of the 20 CBCFs served exclusively females, while half of the CBCFs served only male offenders. Hence, 8 of the 20 programs serve both males and females. Finally, among the CBCFs, five of the facilities use a Therapeutic Community (TC)/modified TC model.

Table 2 examines the same program demographics for the 44 HWH programs. The sample size/number of matched pairs for the HWH group ranged from 11 to 424 cases, with a total number of 6,090 cases in the treatment sample. Small HWH programs, identified as those with a sample size below 60, were collapsed into a "smaller programs" category; eight HWH programs (identified with an asterisk) met this criterion. The successful termination rate for HWHs averaged just 55.5 percent. There was a wide range of successful termination rates, with the lowest being 13.2 percent and the highest 88.7 percent. Seventy-five percent of the HWH programs had completion rates below 65 percent. Just two programs had rates above 85 percent.

The average length of stay for all HWH participants was 87 days. The average length of stay increased to 115 days when only successful completers were considered. The HWHs average length of stay ranged from 25 days to 210 days for all participants, and 29 to 303 days for successful completers[31].

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[30] This rate is based upon the risk tool and cutoff scores created for this study. While the study risk assessment tool significantly correlates with the LSI-R, classification cutoffs vary.

[31] The program with the shortest average length of stay is a central assessment facility and the program with the longest length of stay primarily treats sex offenders, whose programs typically require a longer length of stay.

Table 1: CBCF Program Demographics/Descriptions

	CBCF/ISP N[1]	CBCF/Parole N[1]	Successful Termination Rate[2]	Average LOS for All Participants[2]	Average LOS for Successful Completers[2]	% Low Risk Offenders Served[3]	Bed Capacity[4]	Serves Males	Serves Females	Therapeutic Community Model
EOCC Female	39	54	96.5%	157.1	159.0	31.5	25		X	
EOCC Male	100	99	88.3%	137.8	144.4	5.8	76	X		
Franklin	409	458	73.7%	132.0	147.3	7.1	200	X	X	
Licking-Muskingum	105	107	71.4%	120.2	136.7	7.6	57	X		
Lorain-Medina	137	148	79.5%	106.1	118.0	7.1	72	X	X	
Lucas	197	232	76.6%	95.0	106.5	3.7	126	X	X	
Mahoning	160	185	86.5%	103.4	110.3	9.0	70	X		
MonDay	308	297	83.6%	127	138.8	9.0	180	X	X	X
NEOCAP	233	229	86.0%	131	140.4	11.9	125	X	X	
Northwest CCC	105	103	74.8%	159.6	179.7	2.3	64	X		X
Oriana Cliff Skeen	121	64	67.2%	93.0	111.9	12.7	60		X	
Oriana Crossweah	107	105	79.5%	125.8	136.2	1.3	58	X		
Oriana Summit	226	282	61.7%	107.4	127.8	5.4	124	X		
River City	322	351	81.3%	138.2	151.2	8.4	216	X	X	X
SEPTA	112	86	68.5%	148.1	178.8	8.1	64	X		
STAR	102	96	76.8%	127.9	151.8	3.3	62	X		X
STARK	224	244	85.8%	115.8	121.9	11.6	105	X	X	
Talbert House CCC	208	267	89.9%	123.1	129.7	0.3	110	X		
West Central	178	174	77.9%	132.8	149.3	2.1	90	X		X
WORTH	171	183	74.4%	125.1	144.4	5.9	94	X	X	
ALL FACILITIES	**3564**	**3764**	**78.8%**	**125.3**	**139.2**	**7.0**	**98.9**	**18**	**10**	**5**

[1]N for the CBCF/ISP and CBCF/parole samples represent the total number of matched pairs or treatment cases in the study

[2]The successful termination rate and average length of stay (in days) was derived from CCIS for both matched and unmatched cases

[3]The percent of low risk offenders served was derived from matched and unmatched cases using the risk tool developed for the study

[4]The bed capacity represents capacity on the date of each 2006 site visit

With regard to the percentage of low risk offenders served, the average across HWH programs was just 10.4 percent low risk offenders. There was again a wide range, with programs serving between 2.1 percent and nearly 30 percent low risk. Programs that served exclusively females had a higher rate of low risk offenders.

Bed capacity in HWHs averaged 64 beds and ranged from 12 bed programs to 218 bed facilities. Seven of the 44 programs served exclusively females and nine of the programs served both males and females. The remaining HWHs (28 programs) served only male offenders. When comparing the CBCF data to the HWH data, one can see that CBCFs tend to be larger programs (average bed capacity 99 versus 64), and more of their programs serve female offenders (50% versus 36%). Likewise, CBCFs had an average successful termination rate of 79 percent versus 56 percent for the HWH programs. In fact, for CBCFs, 35 percent of programs fell outside the recommended 65 to 85 percent range (30 percent above the range and 5 percent below). To the contrary, for HWHs, nearly 80 percent of programs fell outside the recommended successful termination range, with only 5 percent of these falling above the range, and the remaining programs having successful completion rates below 65 percent[32]. With regard to time offenders spend in the program, CBCFs average a longer length of stay for all participants (125 days versus 87 days) as well as successful completers (139 days versus 115 days). While both CBCFs and HWHs are treating a low percentage of low risk offenders, the average rate is slightly lower for the CBCFs (7% versus 10%).

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[32] When considering the difference in successful completion rates between HWHs and CBCFs, it is important to note that CBCFs are minimum security locked facilities, making rates of absence without leave (AWOL) lower than that of HWHs, which are unlocked facilities.

Table 2: HWH Program Demographics/Descriptions

PROGRAM NAME	N[1]	Successful Termination Rate[2]	Average LOS for All Participants[2]	Average LOS for Successful Completers[2]	% Low Risk Offenders Served[3]	Bed Capacity[4]	Serves Males	Serves Females	Serves Transitional Control Offenders
Alternatives	424	58.0%	72.0	87.4	12.8	180	X	X	X
Alvis House Alum Creek	242	45.5%	70.6	98.2	7.8	104	X		X
Alvis House Breslin*	37	47.0%	78.2	114.7	29.5	20		X	X
Alvis House Cope*	54	25.4%	52.5	96.8	10.9	28	X	X	
Alvis House Dunning	67	57.8%	79.3	105.8	22.4	34		X	X
Alvis House Ohiolink*	47	58.5%	65.9	79.3	8.3	30	X	X	X
Alvis House Price	87	55.1%	119.3	157.8	9.2	25	X		X
Alvis House Veterans	69	62.8%	79.1	96.2	8.7	24	X		
ARCA	79	56.6%	104.0	140.5	20.6	28		X	
Booth House/Salvation Army	69	46.2%	59.3	91.2	5.7	15	X		
CATS Female RTP	61	88.7%	68.4	73.9	23.3	30		X	
CATS Male RTP	124	53.6%	65.6	86.7	3.9	38	X		
CATS Therapeutic Community	72	79.5%	113.6	127.1	2.8	28	X		
CCA RTC I	73	69.2%	99.2	118.0	14.7	49	X	X	X
CCA RTC II	145	76.6%	89.2	99.7	15.2	44	X		X
Cincinnati VOA Drug/Alcohol	173	21.9%	50.6	88.6	3.3	45	X		
Cincinnati VOA SAMI*	38	13.2%	56.9	136.7	2.1	12	X		
Cincinnati VOA Sex Offender Tx	76	37.0%	161.9	258.8	23.1	44	X		
Community Transition Center	161	69.9%	89.1	97.4	8.1	122	X	X	X
CompDrug	266	42.3%	81.5	117	7.8	112	X		X
Courage House*	20	64.0%	143.0	155.3	20.0	15		X	
Crossroads	135	60.4%	102.2	126.2	5.9	62	X		
CTCC Canton	192	49.5%	75.0	104	13.0	50	X		X
Dayton VOA	218	26.7%	89.8	164.6	8.7	85	X		X

Table 2 Con't: HWH Program Demographics/Descriptions

PROGRAM NAME	N[1]	Successful Termination Rate[2]	Average LOS for All Participants[2]	Average LOS for Successful Completers[2]	% Low Risk Offenders Served[3]	Bed Capacity[4]	Serves Males	Serves Females	Serves Transitional Control Offenders
Diversified	140	48.0%	85.0	122.4	2.1	47	X		
Fresh Start	181	61.9%	74.3	91.1	4.4	86	X	X	
Harbor Light—Corrections	398	47.7%	79.2	102.5	10.0	199	X	X	X
Harbor Light--Drug/Alcohol	74	89.4%	62.8	63.5	2.1	20	X		X
Mansfield VOA	102	33.9%	209.6	303.2	15.7	77	X		X
Nova House*	20	54.5%	101.6	139.4	5.0	16	X	X	
Oriana CCTC	274	52.0%	73.0	94.0	8.0	130	X		X
Oriana RCC	103	68.9%	76.5	89.9	26.9	80		X	X
Oriana RIP	272	47.9%	53.3	73.5	7.7	218	X		
Oriana SHARP*	40	58.3%	52.2	62.1	7.5	12	X		
Oriana TMRC	297	55.8%	79.6	99.8	10.7	124	X		X
Pathfinder	167	47.3%	83.0	111.0	13.8	59	X	X	X
SOS	130	55.5%	72.8	90.6	3.8	35	X		
Spencer House*	11	84.6%	154.9	166.9	9.1	16	X		
Talbert House Beekman	135	48.1%	81.1	108.2	5.8	48	X		X
Talbert House Cornerstone	76	73.5%	24.8	29.2	13.2	88	X		
Talbert House Pathways	86	71.2%	85.2	97.1	29.6	64		X	X
Talbert House Springrove	234	54.5%	97.7	120.8	7.2	108	X		X
Talbert House Turtle Creek	166	70.2%	127.2	139.5	10.2	75	X		X
Toledo VOA	255	52.2%	98.0	125.3	4.3	75	X		X
ALL PROGRAMS	**6090**	**55.5%**	**87.2**	**114.8**	**10.4**	**63.6**	**37**	**16**	**24**

*Due to the small sample size, these programs were collapsed into "small programs" for the outcome analyses

[1]N for the HWH sample represents the total number of matched pairs or treatment cases in the study

[2]The successful termination rate and average length of stay (in days) was derived from CCIS for both matched and unmatched cases

[3]The percent of low risk offenders served was derived from both matched and unmatched cases using the risk instrument developed for the study

[4]The bed capacity represents capacity on the date of each 2006 site visit

SECTION IV: RESULTS

The results section of the report is subdivided by program type into CBCF and HWH results. CBCF results are further broken down by comparison group; thus, data will be presented on CBCF participants and matched ISP cases as well as CBCF participants and matched parolees. CBCF findings will be presented first, followed by HWH findings.

This section of the report reviews: 1) offender demographic information as well as criminal history and risk/need information; and 2) recidivism outcome results for programs. The first section examines differences between the treatment and comparison groups, as well as demographic and risk/need differences between successful and unsuccessful program completers. Simple cross-tabulations were used for these analyses with Pearson's Chi Square detecting significant differences between groups for categorical variables, and independent sample t-tests revealing differences for metric variables. Also included in the results section are multivariate regression analyses depicting the individual level predictors of both successful completion and outcome for each group.

Following the presentation of offender demographics and risk/need variables, the results section will present outcome findings for each program in the study[33]. Three measures of recidivism are used: felony conviction, any conviction (misdemeanor or felony)[34] and new incarceration. Given that offenders were matched one-for-one on key demographic and risk variables, simple cross-tabulations noting the difference in recidivism rate between the treatment and matched comparison sample could be used for these analyses. Due to the array of offender

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[33] Eight programs were identified as "small programs" where outcome analyses were aggregated due to small sample sizes.
[34] Minor traffic violations were excluded as misdemeanor offenses.

types referred to HWHs, the HWH results section also includes an examination of outcome by referral type, using the same cross-tabulation method for analysis.

DESCRIPTIVE RESULTS

CBCF Descriptive Data

The first set of findings presented in this section include the individual measures that the treatment and comparison groups were matched on as well as other demographic and risk/need measures that offenders were not directly matched on. Once differences between the treatment and comparison groups are examined, differences across the same variables for successful and unsuccessful terminations will be explored. Note that the first two columns of each table display results for the CBCF/ISP group, while the second two columns examine the CBCF/parole group.

Demographics and Risk/Need Characteristics by Group Membership for CBCFs

For both samples, cases were matched on race and gender, which is why Table 3 shows no differences between the treatment and comparison groups for these variables. Males make up 81.3 percent of the sample for the CBCF/ISP group, and 85.6 percent for the CBCF/parolee sample. Regarding race, Whites comprise approximately two-thirds of the sample for both groups. Although the vast majority of offenders in these samples were single, both comparison groups had a slightly higher percentage of married offenders. With respect to age, although the majority of offenders fell into the 16 to 23 and 24 to 30 year old categories, there was a fairly even distribution across age categories. However, both the ISP and parole comparison groups were slightly older than their matched treatment groups. Significant differences were noted

between groups for the majority of variables excluded from the matching process[35], including marital status, mean age, and age category for the CBCF/ISP group only.

Table 4 denotes the risk/need variables by group membership for both CBCF groups. With the exception of the parole comparison sample, both CBCF treatment groups and the ISP sample averaged less than one prior incarceration. Similarly, the parole group was significantly more likely to have a prior conviction (73.4% versus 41.6%); for the CBCF/ISP sample, the difference in having a prior conviction was more subtle but still significant (43.2% versus 39.5%). Regarding offense level, in all samples but the parolees, over 40 percent of offenders were convicted on a felony 5 or misdemeanor level offense. To the contrary, parolees were most likely to be convicted of a Felony 3 offense (28.5%), followed by a felony 2 offense (22.7%). Differences are also seen with regard to offense categories. CBCF and ISP offenders were most likely to commit a drug related crime followed by a property crime. Parolees were more likely to engage in a violent/person offense (38.9% versus 18.4% for the matched CBCF cases) followed also by a property offense. As is typical, less than 3 percent of the cases were sex offenses (which was also used as a matching variable). Overall, while there were significant differences between both samples for each of the criminal history variables, CBCF and ISP cases looked fairly similar while parolees had more extensive criminal histories.

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[35] A dichotomous age variable was included on the risk/need tool, which was used to match treatment and comparison cases.

Table 3: Descriptive Statistics for both the CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	81.3 (2897)	81.3 (2897)	85.6 (3221)	85.6 (3221)
Female	18.7 (667)	18.7 (667)	14.4 (543)	14.4 (543)
Race				
White	68.3 (2434)	68.3 (2434)	63.1 (2375)	63.1 (2375)
Non-white	31.7 (1130)	31.7 (1130)	36.9 (1390)	36.9 (1390)
Marital Status*				
Married	11.8 (421)	14.1 (503)	11.4 (428)	16.5 (567)
Single/not married	88.2 (3137)	85.9 (3061)	88.6 (3329)	83.5 (2870)
Age Category**				
16 to 23	30.1 (1074)	24.6 (877)	29.7 (1118)	29.4 (1108)
24 to 30	26.7 (952)	27.7 (988)	26.9 (1014)	26.6 (999)
31-39	21.7 (773)	24.4 (869)	22.1 (831)	24.2 (911)
40+	21.5 (765)	23.3 (830)	21.3 (801)	19.8 (746)
Mean Age*	30.7	31.9	30.8	33.6
SD	9.6	10.1	9.6	9.8
Range	17-66	17-76	17-66	17-85

* significant difference at the .001 level for both the ISP and parole comparison groups

**Age Category is significantly different at the .001 level for the CBCF/ISP group, but not the CBCF/Parole group

Table 4: Descriptive Statistics for Risk/Need Factors for both the CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations*				
Mean (N)	0.6 (3558)	0.8 (3564)	0.7 (3775)	1.1 (3764)
SD	1.2	1.4	1.3	1.6
Range	0-37	0-23	0-12	0-14
	% (N)	% (N)	% (N)	% (N)
Previous Conviction*				
No	60.5 (2155)	56.8 (2024)	58.4 (2192)	26.6 (1001)
Yes	39.5 (1409)	43.2 (1540)	41.6 (1562)	73.4 (2762)
Offense Level*				
Felony 1	1.6 (56)	1.9 (67)	1.5 (57)	12.4 (467)
Felony 2	6.6 (237)	5.0 (177)	6.0 (227)	22.7 (851)
Felony 3	18.7 (667)	16.6 (590)	18.4 (692)	28.5 (1072)
Felony 4	31.6 (1128)	28.2 (1006)	32.4 (1218)	14.9 (560)
Felony 5/M	41.4 (1476)	48.4 (1724)	41.7 (1570)	21.6 (810)
Offense Category*				
Violent/person	20.2 (721)	18.4 (655)	18.4 (691)	38.9 (1463)
Sex	2.0 (73)	2.0 (73)	2.6 (97)	2.6 (97)
Drugs	37.5 (1336)	37.4 (1332)	35.2 (1324)	15.4 (580)
Property	22.8 (813)	27.8 (991)	27.0 (1015)	29.4 (1105)
Traffic/DUI	3.8 (136)	2.4 (85)	3.6 (134)	0.3 (12)
Other	13.6 (485)	12 (428)	13.4 (503)	13.5 (507)
Substance Abuse Problem*				
No	4.7 (167)	11.5 (441)	4.5 (171)	27.1 (1019)
Yes	95.3 (3397)	88.5 (3153)	95.5 (3593)	72.9 (2739)

Table 4 Con't: Descriptive Statistics for Risk/Need Factors for both the CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Employment Problem**	% (N)	% (N)	% (N)	% (N)
No	42.0 (1497)	40.3 (696)	39.1 (1473)	42.9 (1611)
Yes	58.0 (2067)	59.7 (1031)	60.9 (2291)	57.1 (2147)
Emotional Problem*				
No	65.8 (2345)	71.7 (2556)	66.6 (2508)	54.6 (2052)
Yes	34.2 (1219)	28.3 (1008)	33.4 (1256)	45.4 (1706)
Risk Categories				
Low	9.3 (331)	9.3 (331)	8.3 (313)	8.3 (313)
Moderate	76.8 (2737)	76.8 (2737)	67.6 (2538)	67.6 (2538)
High	13.9 (496)	13.9 (496)	24.1 (903)	24.1 (903)
Average Risk Scores***	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	33.6 (2897)	31.6 (2897)	35.6 (3221)	35.4 (3221)
Females	23.0 (667)	21.4 (667)	23.0 (543)	22.6 (543)
Overall	31.6 (3564)	29.7 (3564)	33.7 (3764)	33.5 (3764)

* significant difference at the .001 level for both the ISP and parole comparison groups

**Employment Problem is significantly different at the .001 level for the CBCF/Parole group, but not the CBCF/ISP group

***Risk Level is significantly different at the .001 level for the CBCF/ISP group, but not the CBCF/Parole group

Table 4 examines dynamic needs as well as risk categories and scores. CBCF treatment cases in both groups had a significantly higher rate of substance abuse problem (95.3% of treatment cases in both samples versus 88.5% in the ISP sample and 72.9% in the parole sample). In terms of employment, approximately 60 percent of offenders were coded as having employment problems across samples, with the parole sample being slightly lower at 57.1 percent. The final dynamic need examined was current emotional problem. Here, ISP had a lower need rate than their matched treatment group (28.3% versus 34.2%). To the contrary, the parole comparison group had a higher rate of emotional problems (45.4% versus 33.4%). With regard to risk, cases were matched on risk categories, so no differences exist within group between the treatment and comparison samples. In both groups, the majority of offenders are classified as moderate risk: 76.8 percent for the CBCF/ISP group and 67.6 percent for the CBCF/parole group. Not surprisingly, the CBCF/parole group has a higher proportion of high risk cases than the CBCF/ISP group[36]. Finally, with regard to the average risk score, for the CBCF/ISP group, both the male and female mean risk score was slightly higher for the treatment group, as well as the overall risk score (31.6 versus 29.7). There were no significant mean risk score differences for the CBCF/parole sample. In sum, while most differences between groups were small, the table as a whole suggests significant differences between the treatment and comparison samples across all measures except risk categories and average risk score for the CBCF/parole sample. Note that the study's large sample size contributes to an increased finding of significant differences between variables, which oftentimes does not reflect true substantive differences between the groups[37].

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[36] It is important to note that although differences in risk categories exist between the CBCF/ISP group and CBCF/parole group, all outcome analyses were conducted separately rendering these differences inconsequential.
[37] A p-value of .001 was used to identify significant differences due to the large sample size.

Demographics and Risk/Need Characteristics by Termination Status for CBCFs

The next two tables examine demographic and risk/need differences in CBCF treatment cases for successful and unsuccessful program termination[38]. While these tables only examine CBCF treatment cases, cases vary among both samples (CBCF/ISP and CBCF/parole) depending on how cases were matched. Furthermore, the treatment sample size varies for both groups based again upon the matching process; there are 3,564 treatment cases in the CBCF/ISP group and 3,764 treatment cases in the CBCF/parole group.

Table 5 presents the demographic data for CBCFs by termination type. With regard to gender, no significant gender differences were noted between successful and unsuccessful completers in both the CBCF/ISP and CBCF/parole groups. Similarly, while married program participants were slightly more likely to successfully complete programming (12.4% versus 9.5%), differences were not significant. Whites were significantly more likely to successfully complete a CBCF in both samples (69.7% versus 62.5% in the CBCF/ISP sample, and 64.5% versus 58.1% in the CBCF/parole sample).   Not surprisingly, both groups also showed that older offenders were significantly more likely to be successful program graduates; note that 41.5 percent of unsuccessful discharges in the CBCF/ISP group were offenders age 16 to 23 (40.4% in the CBCF/parole sample).

The CBCF risk/need characteristics for both groups can be found in Table 6. There were no significant differences in the number of prior incarcerations between completers and non-completers. Similarly, there were not significant differences in offense levels relative to

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[38] Termination status was dichotomized so that any case in the CCIS database marked successful was identified as a successful completer, and any case marked anything other than successful was marked as an unsuccessful completer.

Table 5: Descriptive Statistics for both the CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	80.9 (4604)	82.9 (1190)	84.9 (2496)	87.9 (725)
Female	19.1 (1088)	17.1 (246)	15.1 (443)	12.1 (100)
Race*				
White	69.7 (3970)	62.5 (898)	64.5 (1896)	58.1 (479)
Non-white	30.3 (1722)	37.5 (538)	35.5 (1044)	41.9 (345)
Marital Status				
Married	12.4 (353)	9.5 (68)	12.0 (351)	9.3 (76)
Single/not married	87.6 (2488)	90.5 (649)	88.0 (2582)	90.7 (748)
Age Category*				
16 to 23	27.3 (776)	41.5(298)	26.7 (784)	40.4 (333)
24 to 30	27.6 (786)	23.1 (166)	27.5 (810)	24.8 (205)
31-39	22.2 (631)	19.8 (142)	22.9 (674)	19.1 (157)
40+	22.9 (653)	15.6 (112)	22.9 (672)	15.7 (129)
Mean Age*	31.2	28.7	31.4	28.7
SD	9.6	9.2	9.7	9.1
Range	17-66	17-60	17-66	17-60

*Significant difference at the .001 level for both the ISP and parole comparison groups

**Age Category is significantly different at the .001 level for the CBCF/ISP group, but not the CBCF/Parole group

Table 6: Descriptive Statistics for Risk/Need Factors for CBCF/ISP and CBCF/Parole by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	.59 (2841)	.65 (717)	.72 (2932)	.83 (826)
SD	1.2	1.1	1.3	1.3
Range	0-12	0-7	0-12	0-8
	% (N)	% (N)	% (N)	% (N)
Previous Conviction*				
No	62.8 (1786)	51.4 (369)	61.1 (1795)	48.7 (403)
Yes	37.2 (1060)	48.6 (349)	38.9 (1141)	51.3 (425)
Offense Level				
Felony 1	1.7 (48)	1.1 (8)	1.7 (49)	1.0 (8)
Felony 2	7.0 (198)	5.4 (39)	6.6 (193)	4.2 (35)
Felony 3	19.1 (545)	17.0 (122)	18.9 (558)	16.4 (136)
Felony 4	31.0 (883)	34.1 (245)	31.9 (938)	33.9 (279)
Felony 5/M	41.2 (1172)	42.3 (304)	40.9 (1202)	44.5 (366)
Offense Category*				
Violent/person	20.5 (583)	19.2 (138)	18.7 (551)	17.7 (142)
Sex	2.2 (62)	1.5 (11)	2.8 (83)	1.7 (14)
Drugs	38.4 (1092)	34.0 (244)	36.6 (1073)	30.2 (248)
Property	21.9 (624)	26.3 (189)	25.1 (740)	33.5 (275)
Traffic/DUI	4.1(117)	2.6 (19)	3.9 (115)	2.3 (19)
Other	12.9 (368)	16.3 (117)	12.8 (378)	15.2 (126)
Substance Abuse Problem				
No	4.6 (132)	4.9 (35)	4.8 (140)	3.7 (31)
Yes	95.4 (2741)	95.1 (683)	95.2 (2800)	96.3 (793)

Table 6 Con't: Descriptive Statistics for Risk/Need Factors for CBCF/ISP and CBCF/Parole by Termination Status

	CBCF/ISP		CBCF/Parole	
Variable	Successful	Unsuccessful	Successful	Unsuccessful
Employment Problem*	% (N)	% (N)	% (N)	% (N)
No	50.0 (1424)	10.2 (73)	47.6 (1402)	9.0 (75)
Yes	50.0 (1422)	89.8 (645)	52.4 (1538)	91.0 (749)
Emotional Problem*				
No	67.6 (1923)	58.8 (422)	68.6 (2016)	59.6 (489)
Yes	32.4 (923)	41.2 (296)	31.4 (924)	40.4 (335)
Risk Categories*				
Low	10.7 (304)	3.8 (27)	9.8 (289)	2.9 (24)
Moderate	78.6 (2236)	69.8 (501)	70.8 (2080)	56.2 (465)
High	10.8 (306)	26.5 (190)	19.3 (567)	40.9 (339)
Average Risk Scores*	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	32.2 (2302)	39.3 (595)	33.8 (2495)	41.6 (728)
Females	22.5 (544)	25.2 (123)	22.3 (441)	26.0 (100)
Overall	30.3 (2846)	36.9 (718)	32.0 (2936)	39.6 (828)

* Significant difference at the .001 level for both the ISP and parole comparison groups

**Significantly different at the .001 level for the CBCF/Parole group, but not the CBCF/ISP group

***Significantly different at the .001 level for the CBCF/ISP group, but not the CBCF/Parole group

completion status. Successful completers, however, were less likely to have a previous

conviction in both groups, and less likely to have been convicted of a property offense. With

regard to the dynamic needs, the vast majority of participants had a substance abuse problem, but

there were no significant differences in termination rates based on this need. Yet, of the

unsuccessful completers, 90 percent in both groups had identified employment problems versus

just 50 to 52 percent of successful completers. Offenders with emotional problems were also

less likely to complete the CBCF program. With regard to risk categories, not surprisingly, of

those unsuccessfully terminated, just 3.8 percent in the CBCF/ISP group were low risk (only

2.9% for the CBCF/Parole group) compared to approximately 10 percent of successful

completers in both groups. Moderate risk offenders were also more likely to successfully

complete the program, while high risk offenders were more likely to be unsuccessfully

terminated. In terms of average risk scores, overall, successful completers in the CBCF/ISP

group scored 7 points lower on the risk assessment while completers in the CBCF/parole group

scored 8 points lower, differences which were significant.

Predictors of Unsuccessful Termination and Recidivism for CBCFs

To better understand what offender characteristics impact unsuccessful termination and

recidivism, multivariate models were used to estimate predictors of these outcomes. Information

from the multivariate models was used to calculate adjusted probabilities, which provides one

with the odds of an event occurring while holding all other factors constant. The first model

includes gender, race and risk categories, while the second model explores the individual factors

that comprised the risk score to estimate how predictive these variables were of termination

status and recidivism. Termination status will be reviewed first, followed by the predictors of

three measures of recidivism.

Figure 1 shows the adjusted probabilities of unsuccessful termination using gender, race and risk as predictors[39]. In this model, race and risk were significant predictors of unsuccessful termination, while gender was not. The figure suggests that Non-Whites were more likely to be unsuccessfully terminated from CBCF programs by 5 percentage points, when controlling for gender and risk. Likewise, low risk offenders had an 8 percent probability of unsuccessful termination, while moderate risk offenders had an 18 percent likelihood, and high risk participants a 38 percent chance of unsuccessful termination.

The second model examines the adjusted probability of unsuccessful termination from a CBCF for all of the individual risk factors that comprise the risk score, including: prior incarcerations (0 to 1 or 2+); prior conviction (yes/no); age category (40 or above/below 40); substance abuse problem (yes/no); employment problem (yes/no); offense type (property or any other type); offense level (felony 1-2 or felony 3-5/misdemeanor). Also included in the model, but not the risk measure, was sex offender status, gender and race. In this model, there were five significant predictors of unsuccessful termination. Figure 2 shows that employment problems resulted in a 28 percentage point increase in the likelihood of unsuccessful termination. Other significant, but less strong predictors were being a Non-White (4 percentage point increase), having a previous conviction (6 percentage point increase), being under age 40 (7 percentage point increase) and current offense being a property offense (5 percentage point increase) in the probability of unsuccessful termination.

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[39] Note that only the significant predictors are displayed in the next four figures.

Figure 1: Significant Predictors of Unsuccessful Termination from CBCFs
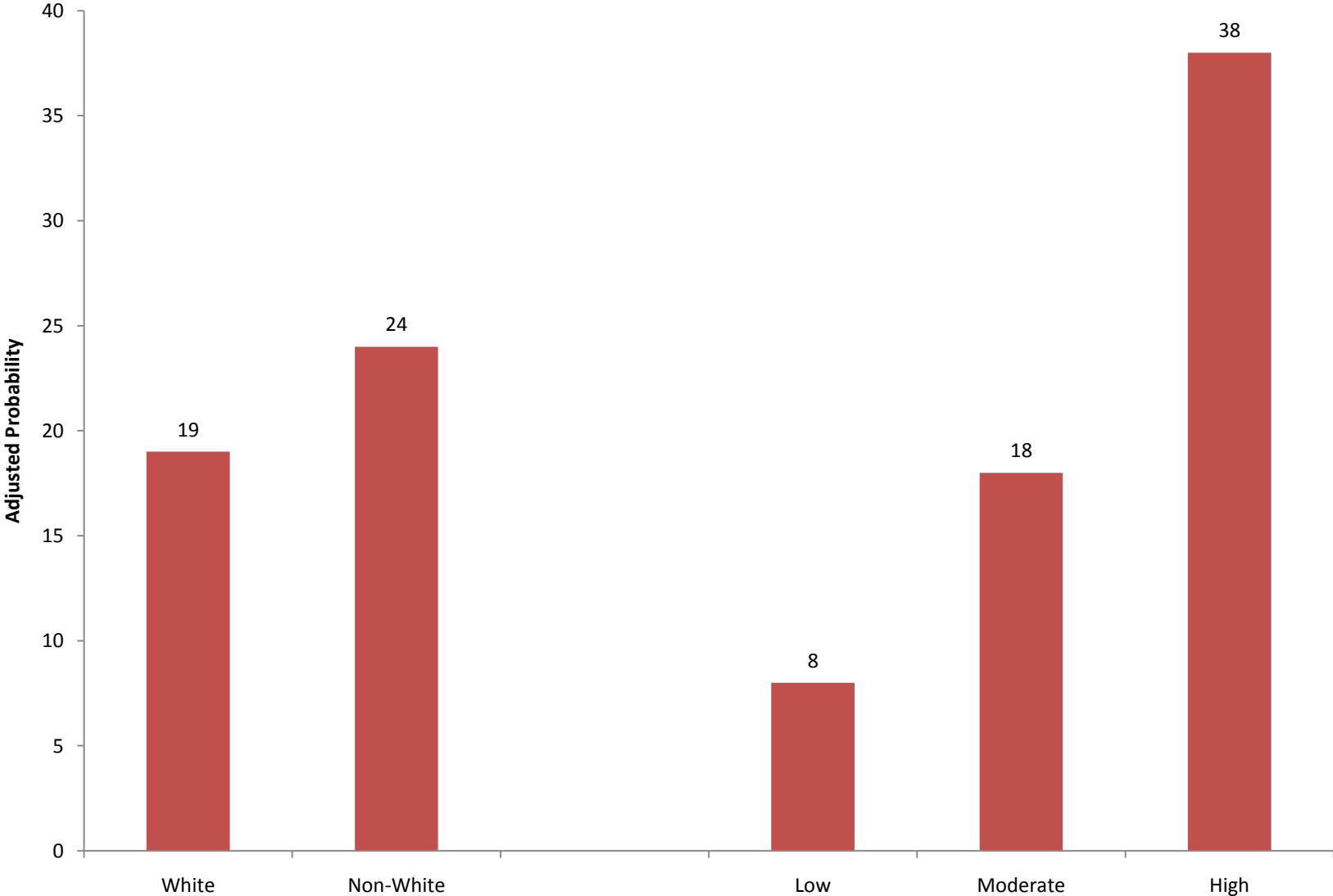
Also examined were the significant predictors of recidivism, measured via new felony conviction, any misdemeanor or felony conviction and new incarceration[40]. The same two multivariate models described above were used to predict each measure of recidivism. The first model explored the impact of gender, race and risk category on recidivism. All three variables had a significant impact on likelihood of both a new felony conviction and any conviction; however, only risk categories were significant in predicting a new incarceration. With regard to a new felony conviction, Figure 3 demonstrates that females have a 14 percent likelihood of a felony conviction, whereas males have a 34 percent likelihood of the same. Also, Non-Whites are more likely to have a felony conviction by 7 percentage points and the difference between the probability of a felony conviction for low versus high risk offenders is 23 percentage points. With respect to any conviction (misdemeanor or felony), males are again more likely to recidivate (by 17 percentage points). Likewise, Non-White offenders have a higher likelihood of any conviction by 7 percentage points. Additionally, the probability of any new conviction increases incrementally with each risk category. Finally, with regard to recidivism measured via new incarceration, there was a difference of 35 percentage points between a low risk offender's likelihood of incarceration and a high risk offender's probability.

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[40] New incarceration only involves incarceration to ODRC, which could be the result of either a new crime or technical violation.

Figure 2: Significant Predictors of Unsuccessful Termination from CBCFs—Individual Risk Factors
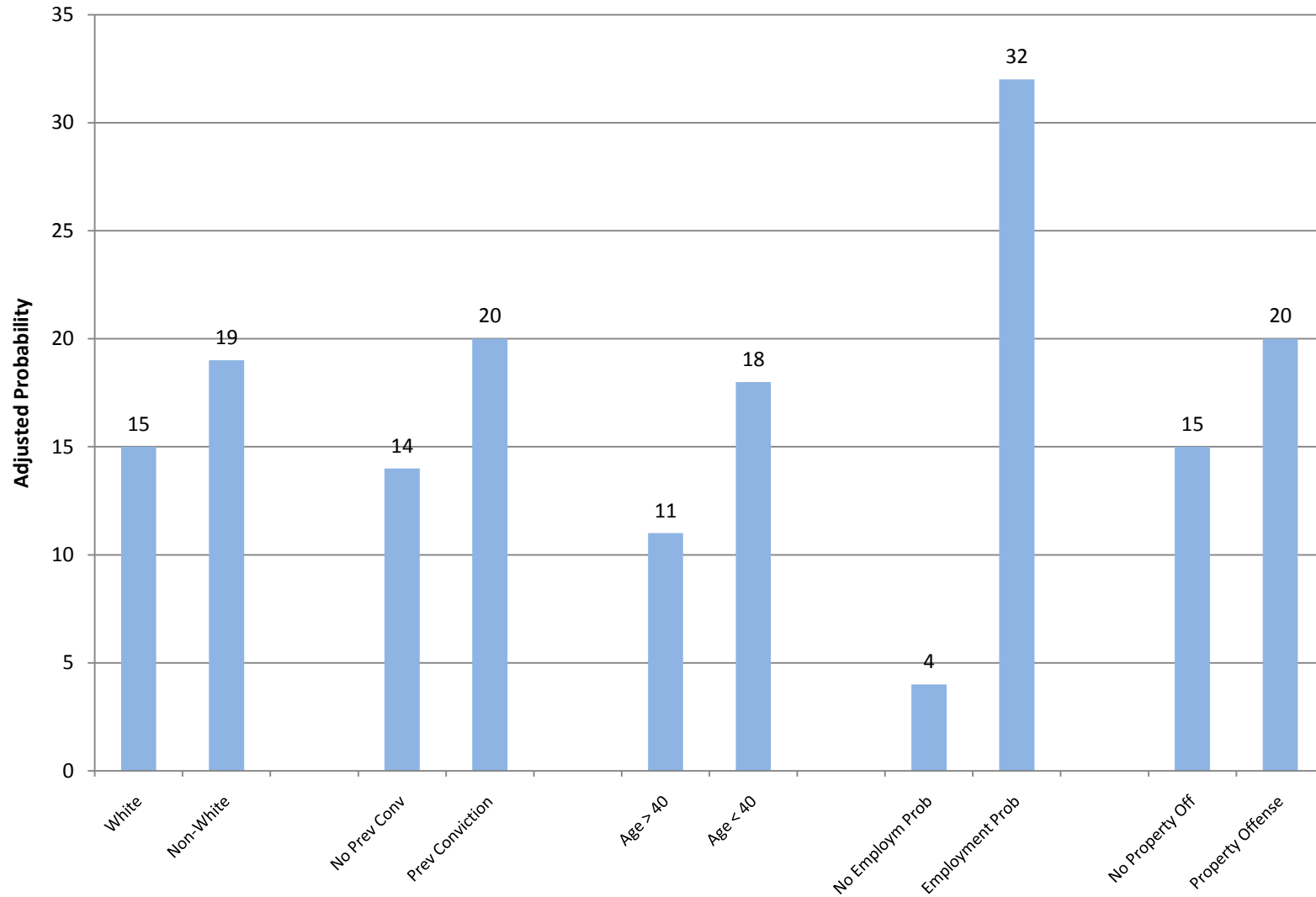
Figure 3: Significant Predictors of Recidivism for CBCFs
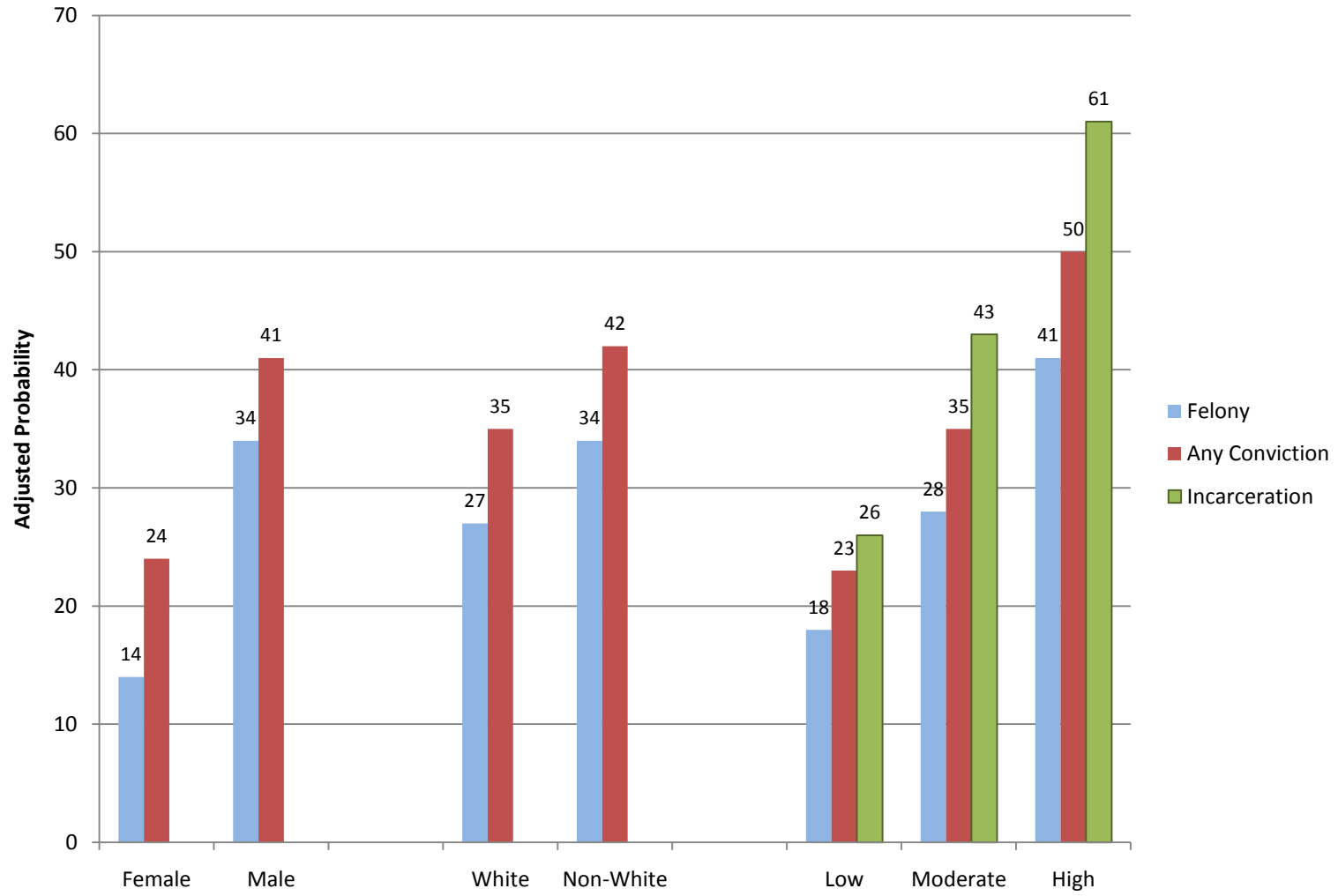
The multivariate model examining the individual risk factors used in the composite risk score in addition to gender, race and sex offender status was also used to predict the three measures of recidivism.   With regard to felony conviction, Figure 4 shows that there were six significant predictors of recidivism: being male, Non-White, less than 40 years old, instant offense was a property offense, substance abuse problem and employment problem. Of these, two predictors affected the probability of a new felony conviction by more than 10 percentage points: females had a 12 percent likelihood of having a new felony conviction, versus males who had a 35 percent probability, and CBCF offenders with a substance abuse problem had a 30 percent likelihood of a felony conviction versus an 18 percent probability for offenders without a current substance abuse problem. Results were similar when any new conviction was used as the outcome variable. Here, the same six predictors were significant, in addition to having 2 or more prior incarcerations. Three predictors had at least a 10 percentage point difference: Males (21 percentage point increase); substance abuse problem (15 percentage point increase) and property offense (11 percentage point increase) in the probability of having any new conviction.

Figure 4: Significant Predictors of Recidivism for CBCFs—Individual Risk Factors
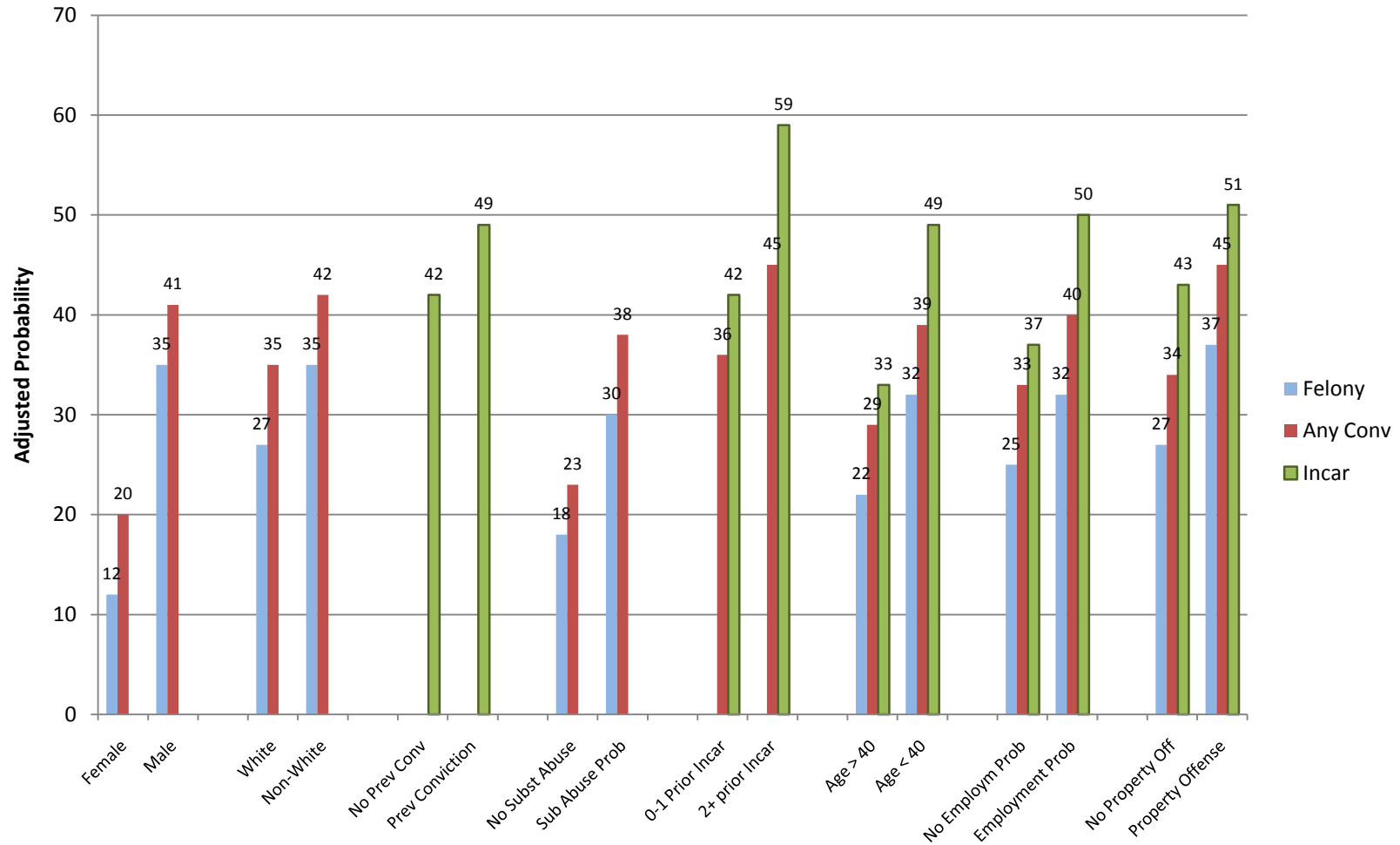
Lastly, this model was used to estimate the adjusted probability of a new incarceration using the same variables. Figure 4 indicates that 5 variables were significant in predicting a new incarceration: having a previous conviction, 2 or more prior incarcerations, property offense, age less than 40, and employment problem. Of these, three predictors affected the probability of incarceration by more than 10 percentage points: 2 or more prior incarcerations increased the probability of a new incarceration by 17 percentage points; being less than 40 made an offender 16 percentage points more likely to be incarcerated; and CBCF offenders with an employment problem had a 50 percent probability of incarceration versus 37 percent for those without an employment problem.

HWH Descriptive Data

The first set of findings presented in this section is demographic variables examining differences between the treatment and comparison groups. Next, risk/need measures are presented for differences by group membership. Finally, differences across the same demographic and risk/need variables for successful and unsuccessful terminations will be explored. Once demographic and risk/need data are presented, outcome results for HWH participants will be explored.

Demographics and Risk/Need Characteristics by Group Membership for HWHs

Like the CBCFs, HWH cases were matched on gender and race, so no differences are found in Table 7 between the treatment and comparison sample for these variables. Females represent just 11.1 percent of the HWH/comparison cases, but there is nearly an even split between Whites and Non-Whites in the samples. With regard to marital status, the treatment group has a slightly higher proportion of offenders who are single (89.9% versus 85.7%). In terms of age, there are subtle but significant differences in age categories, but no significant

Table 7: Descriptive Statistics for HWHs by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	88.9 (5415)	88.9 (5415)
Female	11.1 (675)	11.1 (675)
Race		
White	49.8 (3034)	49.8 (3034)
Non-white	50.2 (3056)	50.2 (3056)
Marital Status*		
Married	10.1 (616)	14.3 (820)
Single/not married	89.9 (5462)	85.7 (4934)
Age Category*		
16 to 23	27.5 (1673)	26.2 (1596)
24 to 30	22.1 (1346)	25.1 (1530)
31-39	26.7 (1623)	25.1 (1530)
40+	23.8 (1448)	23.5 (1434)
Mean Age	34.5	34.0
SD	10.0	10.4
Range	17-77	17-85

* significant difference at the .001 level

differences in the mean age of the treatment and comparison group (34.5 versus 34.0 years old).

Table 8 presents differences in the HWH treatment and comparison sample related to risk/need factors. The treatment group had a slightly higher average number of prior incarcerations (1.7 versus 1.2). However, a substantially higher number of offenders in the comparison sample had a prior conviction (65.5% versus 44.9%). Regarding offense level, while there is a significant difference between samples, there are no substantive differences; the bulk of offenders in the treatment and comparison samples were convicted of a felony 5 or misdemeanor level offense (27.1% and 26.1%) as their instant offense. Furthermore, HWH treatment cases

59

were more likely to be convicted on a drug offense or major traffic offense, while comparison cases had a higher rate of property offenses.

With regard to dynamic needs, a higher proportion of treatment cases (87.9%) versus comparison cases (75.0%) had a current substance abuse problem. To the contrary, more comparison cases were identified with a current employment problem (58.6% versus 50.3%) as well as with an emotional issue (39.4% versus 30.3%). Cases were also matched on risk categories, which is why no differences are found between samples. The bulk of offenders are classified as moderate risk (66.0%), followed by high risk (24.0%) and then low risk (10.0%). There were no significant differences in the overall average risk scores (32.8% versus 32.7%) or for risk scores broken down by gender.

Demographics and Risk/Need Characteristics by Termination Status for HWHs

Differences in HWH treatment cases with regard to successful or unsuccessful termination status were explored in Tables 9 and 10. Table 9 shows that females were more likely to successfully complete HWH placement than males (13.7% versus 8.0%). Furthermore, white offenders were slightly more likely to successfully complete treatment than all other races combined (51.9% versus 47.4%). In terms of marital status, while there were a much larger proportion of single versus married offenders in the sample, being married made a participant more likely to successfully complete the HWH (12.0% versus 7.9%). Unsuccessful completers were however younger, whether age was measured categorically or via average age. While some of the differences were subtle, significant differences between the treatment and comparison groups were found in all the demographic variables.

Table 8: Descriptive Statistics for Risk/Need Factors for HWHs by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.7 (6077)	1.2 (6090)
SD	1.8	1.8
Range	0-37	0-37
Previous Conviction*	**% (N)**	**% (N)**
No	58.1 (3536)	34.5 (2102)
Yes	41.9 (2553)	65.5 (3987)
Offense Level*		
Felony 1	13.3 (808)	10.9 (665)
Felony 2	18.9 (1151)	19.0 (1155)
Felony 3	23.5 (1431)	25.5 (1550)
Felony 4	17.2 (1049)	18.6 (1132)
Felony 5/M	27.1 (1651)	26.1 (1584)
Offense Category*		
Violent/person	34.4 (2095)	34.6 (2107)
Sex	4.8 (291)	4.8 (291)
Drugs	29 (1764)	22.9 (1394)
Property	20.6 (1253)	24.8 (1511)
Traffic/DUI	2.2 (134)	0.7 (44)
Other	9.1 (553)	12.2 (743)
Substance Abuse Problem*		
No	12.1 (739)	25.0 (1522)
Yes	87.9 (5351)	75.0 (4568)
Employment Problem*		
No	49.7 (3028)	41.4 (2165)
Yes	50.3 (3062)	58.6 (3066)
Emotional Problem*		
No	69.7 (4245)	60.6 (3685)
Yes	30.3 (1845)	39.4 (2402)
Risk Categories		
Low	10.0 (609)	10.0 (609)
Moderate	66.0 (4020)	66.0 (4020)
High	24.0 (1461)	24.0 (1461)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	34.0 (5409)	33.9 (5409)
Females	23.0 (674)	22.9 (674)
Overall	32.8 (6090)	32.7 (6090)

* significant difference at the .001 level

Table 9: Descriptive Statistics for HWHs by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender*		
Male	86.3 (2838)	92.0 (2578)
Female	13.7 (450)	8.0 (224)
Race*		
White	51.9 (1703)	47.4 (1329)
Non-white	48.1 (1582)	52.6 (1476)
Marital Status*		
Married	12.0 (394)	7.9 (222)
Single/not married	88.0 (2887)	92.1 (2575)
Age Category*		
16 to 23	22.7 (745)	33.1 (928)
24 to 30	22.3 (733)	21.9 (614)
31-39	28.1 (924)	24.9 (699)
40+	26.9 (883)	20.1 (564)
Mean Age*	35.7	33.2
SD	9.9	9.8
Range	18-72	17-77

* significant difference at the .001 level

Table 10 explores the HWH risk/need factors with respect to termination status. Here, successful completers had a slightly lower mean prior incarceration rate (1.6 versus 1.9 priors). Likewise, successful HWH completers were less likely to have prior convictions (38.8%) versus unsuccessful completers (45.6%). With regard to offense level for the current offense, unsuccessful completers were more likely to have felony level 1, 2 or 3 offenses. Unsuccessful completers were also more likely to be convicted of a violent offense, sex offense, or property offense than successful completers. With respect to the dynamic needs, no differences were seen regarding substance abuse or emotional problems; however, 67.6 percent of unsuccessful completers had a current employment problem versus just 35.6 percent of successful completers.

Finally, as expected, low risk offenders were more likely to successfully complete programming (14.5% versus 4.8%) and high risk offenders were less likely to successfully complete HWH placement (17.3% versus 31.9%). Furthermore, the overall average risk score was 30.0 for successful completers versus 36.0 for unsuccessful completers.

Predictors of Unsuccessful Termination and Recidivism for HWHs

As with the CBCF programs, to better understand what HWH participant characteristics impact unsuccessful termination and recidivism, multivariate models were used to estimate predictors of these outcomes, and data from these models were used to calculate adjusted predicted probabilities. The first model again includes gender, race and risk categories, while the second model examines the individual factors that comprise the risk score. Figure 5 shows the adjusted probabilities of unsuccessful termination using gender, race and risk as predictors[41]. In this model, gender and risk category were significant predictors of unsuccessful terminations, while race was not. The figure suggests that males were more likely to be unsuccessfully terminated from HWH programs by 9 percentage points, when controlling for race and risk category. Likewise, low risk offenders had a 26 percent probability of unsuccessful termination, while moderate risk offenders had a 43 percent likelihood, and high risk participants a 62 percent chance of unsuccessful termination.

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[41] Note that only the significant predictors are displayed in the next four figures.

Table 10: Descriptive Statistics for Risk/Need Factors for HWHs by Termination Status

Variable	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.6 (3283)	1.9 (2794)
SD	1.7	1.9
Range	0-37	0-31
Previous Conviction*	% (N)	% (N)
No	61.2 (2014)	54.4 (1522)
Yes	38.8 (1276)	45.6 (1277)
Offense Level*		
Felony 1	12.7 (417)	13.9 (391)
Felony 2	17.2 (566)	20.9 (586)
Felony 3	22.9 (750)	24.2 (679)
Felony 4	18.7 (615)	15.5 (435)
Felony 5/M	28.6 (937)	25.5 (714)
Offense Category*		
Violent/person	31.7 (1040)	37.6 (1056)
Sex	4.0 (131)	5.7 (160)
Drugs	32.2 (1055)	25.2 (708)
Property	19.5 (641)	21.8 (612)
Traffic/DUI	3.2 (106)	1.0 (28)
Other	9.5 (312)	8.6 (241)
Substance Abuse Problem		
No	12.4 (409)	11.8 (331)
Yes	87.6 (2879)	88.2 (2471)
Employment Problem*		
No	64.4 (2121)	32.4 (910)
Yes	35.6 (1168)	67.6 (1891)
Emotional Problem		
No	71.0 (2333)	68.2 (1910)
Yes	29.0 (956)	31.8 (891)
Risk Categories*		
Low	14.5 (476)	4.8 (133)
Moderate	68.2 (2245)	63.4 (1775)
High	17.3 (569)	31.9 (892)
Average risk scores*	Mean (N)	Mean (N)
Males	31.3 (2839)	37.0 (2576)
Females	22.0 (451)	24.9 (224)
Overall	30.0 (3290)	36.0 (2800)

* significant difference at the .00l level

The second model examines all of the individual risk factors that comprise the risk score, including prior incarcerations, prior conviction, age category, substance abuse problem, employment problem, offense type, and offense level, as well as sex offender status, gender and race. Of the 10 variables in this model, there were 7 significant predictors of unsuccessful termination for HWH participants (see Figure 6): gender, previous conviction, previous incarceration, age, offense type, offense level, and employment problem. Those whose predicted probability increased the likelihood on unsuccessful termination by more than 10 percentage points were male (14 percentage point increase), less than 40 years old (15 percentage point increase), with employment problems (33 percentage point increase).

Also examined were the significant predictors of recidivism (Figure 7), measured via new felony conviction, any misdemeanor or felony conviction and new incarceration[42]. The same two multivariate models described above were used to predict each measure of recidivism. The first model explored the impact of gender, race and risk category on recidivism. Like with the CBCFs, all three variables had a significant impact on likelihood of both a new felony conviction

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[42] New incarceration could be the result of either a new crime or technical violation.

Figure 5: Significant Predictors of Unsuccessful Termination from HWHs
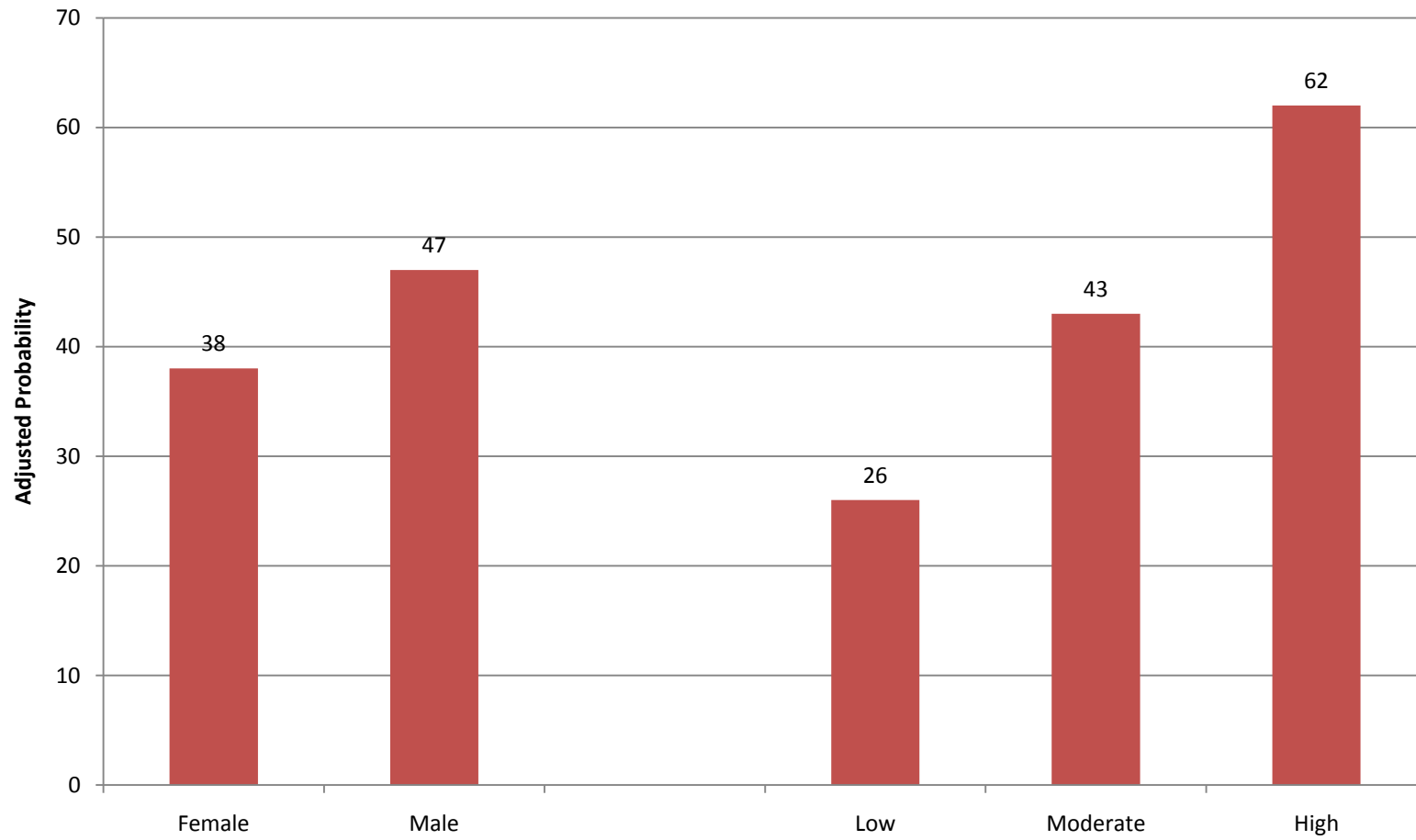
Figure 6: Significant Predictors of Unsuccessful Termination from HWHs—Individual Risk Factors
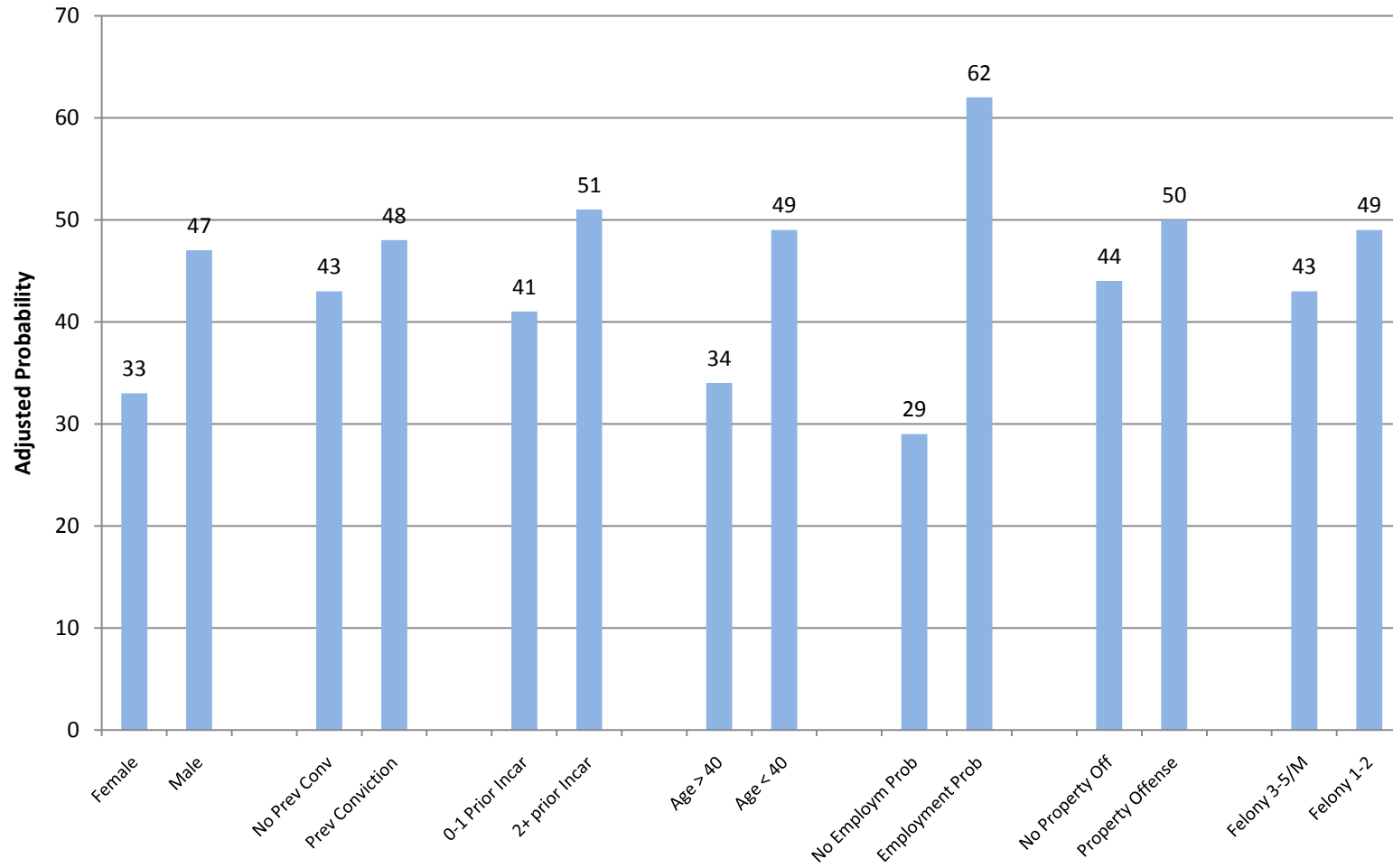
Figure 7: Significant Predictors of Recidivism for HWHs
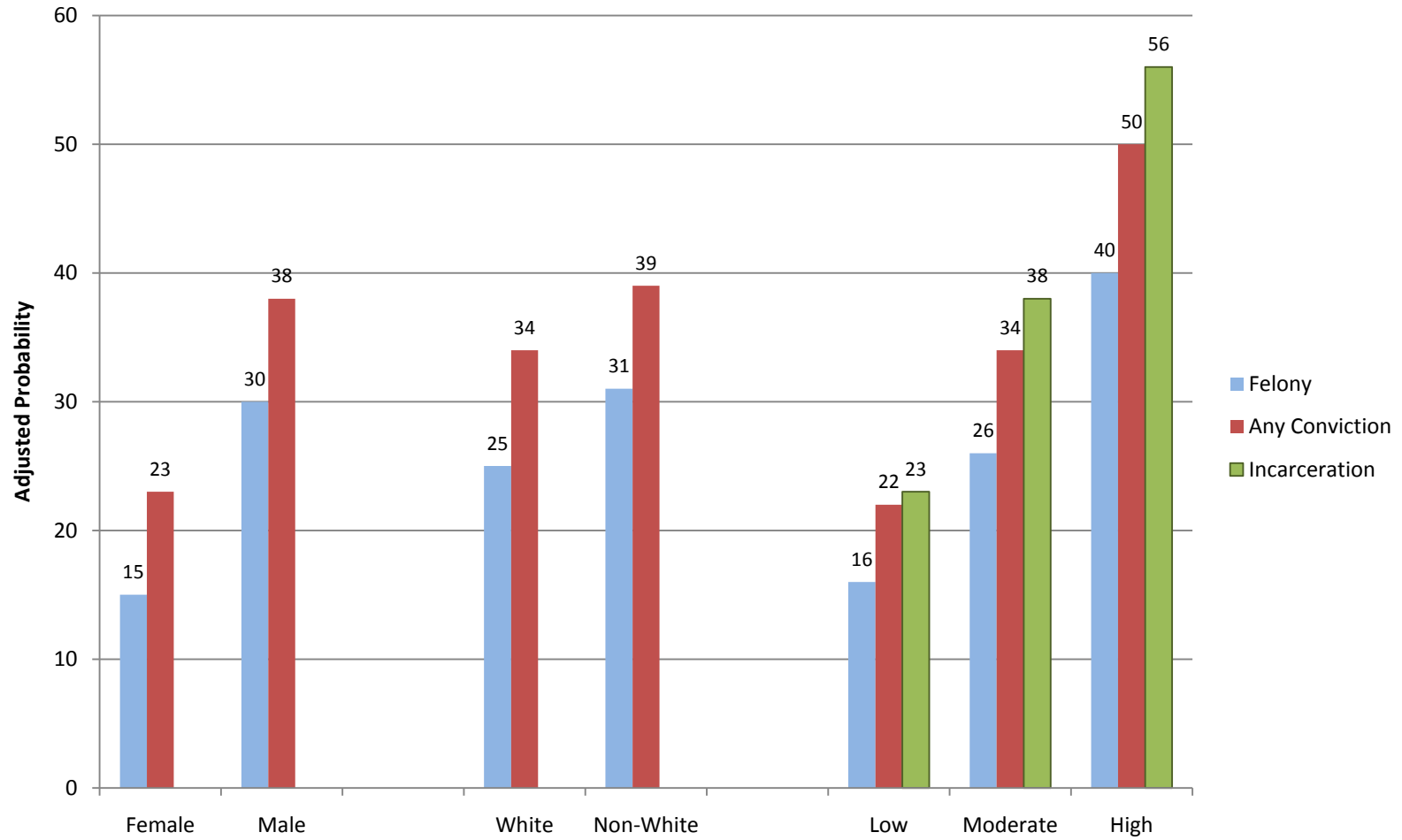
and any conviction; however, only risk categories were significant in predicting a new incarceration. With regard to a new felony conviction, Figure 7 demonstrates that females have a 15 percent likelihood of a felony conviction, whereas males have a 30 percent likelihood of the same. Also, Non-Whites are more likely to have a felony conviction by 6 percentage points, and the difference between the probabilities of a felony conviction for a low versus high risk offender is 24 percentage points. With respect to any conviction (misdemeanor or felony), males are again more likely to recidivate (by 15 percentage points), and Non-White offenders have a higher likelihood of any conviction by 5 percentage points. Likewise, the probability of any new conviction increases incrementally with each risk category (22% probability for low, 34% for moderate and 50% for high). Finally, with regard to recidivism measured via new incarceration, there was a difference of 33 percentage points between a low risk offender's likelihood of incarceration and a high risk offender's probability.

The multivariate model examining the individual risk factors used in the composite risk score in addition to gender, race and sex offender status was also used to predict the three measures of recidivism for HWH cases. With regard to felony conviction, Figure 8 shows that there were 7 significant predictors of recidivism: being male, Non-White, less than 40 years old, having more than one prior incarceration, instant offense was a property offense and was a Felony 3 or lower, as well as employment problem. Of these, one predictor affected the probability of a new felony conviction by more than 10 percentage points (females had a 13% likelihood of having a new felony conviction, versus males who had a 30% probability). Results were similar when any new conviction was used as the outcome variable. Here, 6 of the 7 predictors were still significant (offense level was no longer significant), while substance abuse problem emerged as a significant predictor of any new conviction. Of these, two predictors had

Figure 8: Significant Predictors of Recidivism for HWHs—Individual Risk Factors
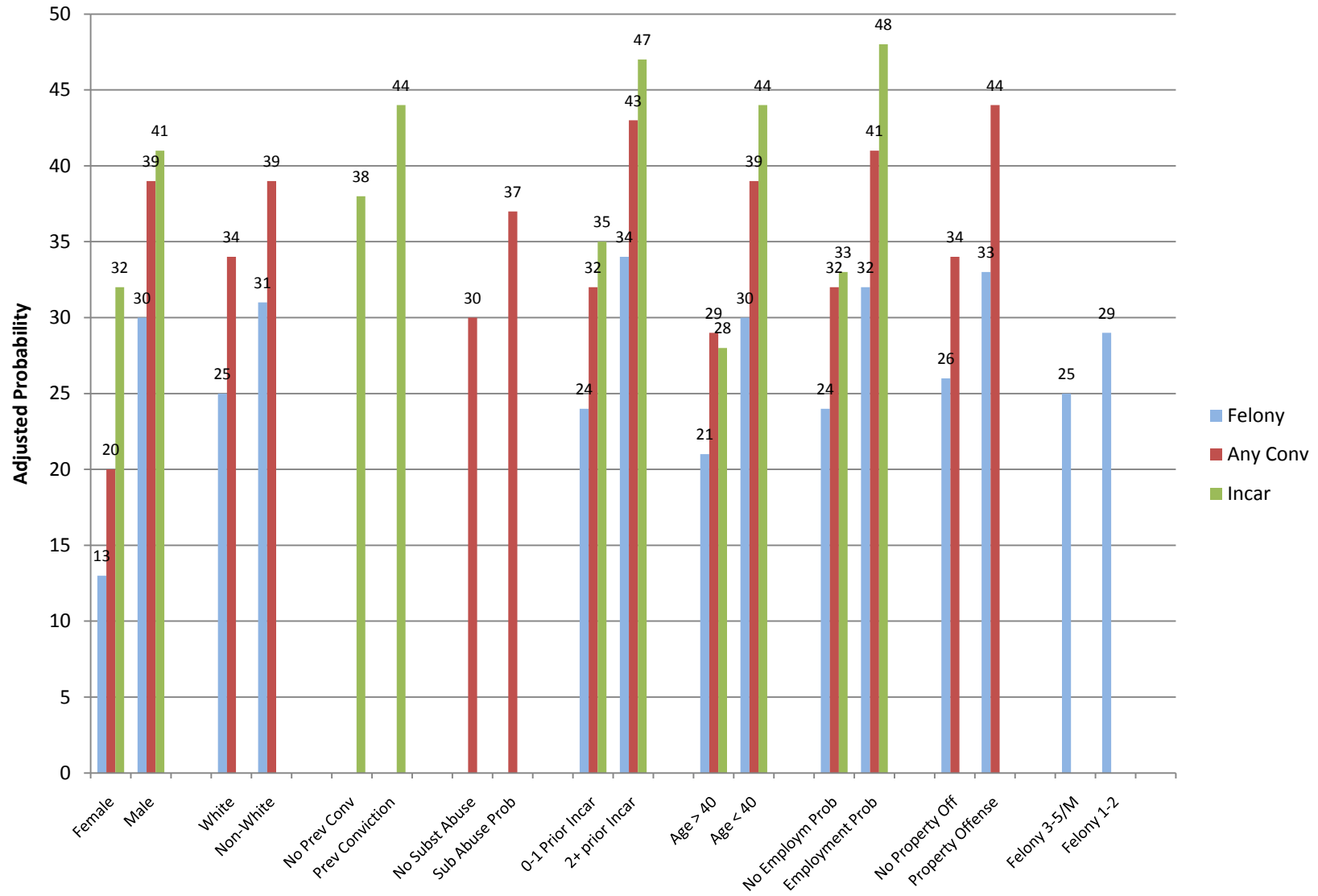
at least a 10 percentage point difference: Males (19 percentage point increase); and 2 or more

prior incarcerations (11 percentage point increase).

Lastly, this model was used to estimate the adjusted probability of a new incarceration

using the same variables. Five variables were significant in predicting a new incarceration: male,

having a previous conviction, 2 or more prior incarcerations, age less than 40, and employment

problem (see Figure 8). Of these, three predictors affected the probability of incarceration by

more than 10 percentage points: 2 or more prior incarcerations increased the probability of a

new incarceration by 12 percentage points; being less than 40 made an offender 16 percentage

points more likely to be incarcerated; and HWH offenders with an employment problem had a 48

percent probability of incarceration versus a 33 percent likelihood for those without an

employment problem.

OUTCOME RESULTS

CBCF Recidivism Results

In order to explore the effectiveness of Ohio's CBCF programs at reducing criminal

behavior among participants, outcome data were examined in multiple ways. As with earlier

analyses, three measures of recidivism were used: new felony conviction, any new conviction

(misdemeanor or felony) and new incarceration. Likewise, how CBCFs compared to an ISP

sample and a separate parole sample was explored. Outcome will be reported for all CBCF

participants and their matched comparison groups, as well as for successful program completers

only. Finally, like the original study, outcome data will be presented by risk category.   Since

cases could be matched one for one on key demographic and risk variables, no adjusted

probabilities were needed. Instead, cross-tabulations were used to report differences in failure

rates between the treatment and comparison groups.

The next 12 tables are organized as follows. Data are reported by program for all offenders, and then broken down by low, moderate, and high risk offenders. Each section presents the sample size (N), failure rate of the comparison group (C), failure rate of the treatment group (TX), and difference in the failure rate between the treatment and comparison group (Diff) [43]. In the difference column, negative numbers favor the comparison group, while positive numbers favor the treatment group. Instances where the treatment group had a lower recidivism rate than the matched comparison group are bolded and highlighted in gray. The last row of the table presents the average findings for all facilities. Note that sample sizes (N) represent both the CBCF and matched comparison cases, and for the low and high risk categories, sample sizes can become small, rendering the data less stable.

CBCF/ISP Outcomes for All Participants

The following 6 tables explore the mean rate of recidivism for each of the 20 CBCF programs and their matched ISP comparison cases. All program participants are examined in the first three tables (Tables 11-13), and successful completers only in Tables 14 through 16. Table 11 presents the mean rate of *new felony convictions* for *all CBCF participants* and their matched ISP cases. For all facilities, the ISP comparison group had a lower overall failure rate than the CBCFs (27.2% versus 29.8%). When broken down by risk, ISP outperforms CBCFs for both low and moderate risk offenders, but CBCFs produced a 4.5 percent reduction in recidivism for high risk cases. For low risk cases, only four programs were able to reduce the rate of new felony convictions (one of which had a very low sample size), but for high risk cases, 8 programs were effective at reducing felony convictions, and another 4 had the same failure rate as their matched comparison group.

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[43] Failure rate can simply be defined as the percentage of offenders that recidivated.

Table 11: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--All Participants--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	78	2.6	5.1	-2.5	30	0.0	6.7	-6.7	48	4.2	4.2	0	0	N/A	N/A	N/A
EOCC Male	200	25.0	22.0	3.0	14	14.3	0.0	14.3	160	20.0	23.8	-3.8	26	61.5	23.1	38.4
Franklin	818	31.1	34.2	-3.1	70	11.4	20.0	-8.6	610	29.2	29.8	-0.6	138	49.3	60.9	-11.6
Licking-Muskingum	210	25.7	41.9	-16.2	22	0.0	0.0	0.0	156	25.6	44.9	-19.3	32	43.8	56.3	-12.5
Lorain-Medina	274	25.5	19.0	6.5	28	0.0	7.1	-7.1	210	21.9	21.9	0.0	36	66.7	11.1	55.6
Lucas	394	32.0	29.9	2.1	22	9.1	9.1	0.0	310	27.1	32.3	-5.2	62	64.5	25.8	38.7
Mahoning	320	26.3	28.8	-2.5	36	5.6	11.1	-5.5	260	26.2	29.2	-3.0	24	58.3	50.0	8.3
MonDay	616	21.1	32.1	-11	76	7.9	28.9	-21.0	482	19.1	29.9	-10.8	58	55.2	55.2	0.0
NEOCAP	466	24.5	15.9	8.6	70	11.4	11.4	0.0	362	24.9	16.0	8.9	34	47.1	23.5	23.6
Northwest CCC	210	22.9	28.6	-5.7	6	33.3	0.0	33.3	158	22.8	26.6	-3.8	46	21.7	39.1	-17.4
Oriana Cliff Skeen	242	12.4	13.2	-0.8	48	0.0	4.2	-4.2	172	16.3	14.0	2.3	22	9.1	27.3	-18.2
Oriana Crossweah	214	24.3	27.1	-2.8	4	0.0	0.0	0.0	162	23.5	27.2	-3.7	48	29.2	29.2	0.0
Oriana Summit	452	33.6	38.1	-4.5	34	0.0	17.6	-17.6	348	35.1	39.1	-4.0	70	42.9	42.9	0.0
River City	644	35.7	35.7	0.0	66	18.2	9.1	9.1	498	35.7	37.8	-2.1	80	50.0	45.0	5.0
SEPTA	224	29.5	33.9	-4.4	22	27.3	18.2	9.1	176	26.1	35.2	-9.1	26	53.8	38.5	15.3
STAR	204	32.4	40.2	-7.8	8	0.0	25.0	-25	148	27.0	33.8	-6.8	48	54.2	62.5	-8.3
STARK	448	26.3	25.9	0.4	72	8.3	13.9	-5.6	308	26.0	24.0	2.0	68	47.1	47.1	0.0
Talbert House CCC	416	28.4	26.9	1.5	2	0.0	0.0	0.0	332	24.1	26.5	-2.4	82	46.3	29.3	17.0
West Central	356	27.0	38.2	-11.2	10	0.0	20.0	-20.0	282	24.8	36.9	-12.1	64	40.6	46.9	-6.3
WORTH	342	22.8	29.2	-6.4	22	9.1	9.1	0.0	292	21.2	28.1	-6.9	28	50.0	57.1	-7.1
ALL FACILITIES	**7128**	**27.2**	**29.8**	-2.6	**662**	**8.5**	**13.3**	-4.8.0	**5474**	**25.8**	**29.4**	-3.6	**992**	**47.4**	**42.9**	**4.5**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 12 presents the mean rate of *any new conviction* for *all CBCF participants* and their matched ISP cases. For all facilities, the ISP comparison group again had a lower overall failure rate than the CBCFs (32.6% versus 36.4%). Here, 6 CBCFs were effective at reducing the rate of any new convictions. When broken down by risk, ISP outperforms CBCFs for both low and moderate risk offenders but CBCFs produce a slight overall treatment effect for high risk offenders (1.4%). Again, 8 programs were effective at reducing felony convictions for high risk offenders, versus just four programs for low and moderate risk offenders.

Results for all CBCF participants are even less promising when using new incarceration as the outcome variable. Table 13 shows that just three programs were effective at reducing the rate of new incarcerations over the matched ISP comparison cases, with an average increase in failure rate of 8.9 percent. Just three programs showed a treatment effect for low risk offenders, and only two for moderate risk offenders. Programs did show increased effectiveness for high risk offenders, with 8 of the programs demonstrating a positive treatment effect.

CBCF/ISP Outcomes for Successful Completers Only

The next three tables present CBCF/ISP findings by each recidivism measure for successful completers only[44]. Table 14 examines the mean rate of *new felony convictions* for *successful completers* and their matched ISP cases. Unlike data examined on all participants, here the CBCF treatment group had a lower overall failure rate than the ISP sample (25.3% versus 26.4%). When broken down by risk, ISP only outperforms CBCFs for low risk offenders. For moderate risk offenders, treatment effects for CBCF and ISP offenders were fairly comparable (overall CBCF treatment effect of 0.1%). However, the majority of CBCF programs were effective at reducing the rate of new felony convictions (11 programs) for high risk CBCF

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[44] Data on successful completers more closely reflects findings from the original 2002 study as only outcome data on successful completers was reported.

Table 12: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--All Participants--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	78	5.1	7.7	-2.6	30	6.7	6.7	0.0	48	4.2	8.3	-4.1	0	N/A	N/A	N/A
EOCC Male	200	29.0	27.0	**2.0**	14	14.3	14.3	0.0	160	25.0	28.8	-3.8	26	61.5	23.1	**38.4**
Franklin	818	37.4	42.3	-4.9	70	17.1	31.4	-14.3	610	35.4	37.4	-2.0	138	56.5	69.6	-13.1
Licking-Muskingum	210	30.5	42.9	-12.4	22	9.1	0.0	**9.1**	156	30.8	46.2	-15.4	32	43.8	56.3	-12.5
Lorain-Medina	274	33.6	25.5	**8.1**	28	0.0	14.3	-14.3	210	32.4	25.7	**6.7**	36	66.7	33.3	**33.4**
Lucas	394	35.0	32.5	**2.5**	22	9.1	18.2	-9.1	310	31.0	34.8	-3.8	62	64.5	25.8	**38.7**
Mahoning	320	31.9	36.9	-5.0	36	20.0	17.1	-2.9	260	32.3	37.7	-5.4	24	58.3	50.0	**8.3**
MonDay	616	25.3	38.3	-13.0	76	7.9	31.6	-23.7	482	24.5	37.3	-12.8	58	55.2	55.2	0.0
NEOCAP	466	29.6	24.0	**5.6**	70	20.0	17.1	**2.9**	362	29.8	25.4	**4.4**	34	47.1	23.5	**23.6**
Northwest CCC	210	26.7	35.2	-8.5	6	33.3	33.3	0.0	158	26.6	32.9	-6.3	46	26.1	43.5	-17.4
Oriana Cliff Skeen	242	20.7	19.0	**1.7**	48	8.3	8.3	0.0	172	24.4	20.9	**3.5**	22	18.2	27.3	-9.1
Oriana Crossweah	214	31.8	35.5	-3.7	4	50.0	0.0	**50.0**	162	30.9	32.1	-1.2	48	33.3	50.0	-16.7
Oriana Summit	452	37.6	46.9	-9.3	34	0.0	17.6	-17.6	348	40.2	48.3	-8.1	70	42.9	54.3	-11.4
River City	644	41.6	46.0	-4.4	66	18.2	15.2	**3.0**	498	42.2	47.8	-5.6	80	57.5	60.0	-2.5
SEPTA	224	33.0	36.6	-3.6	22	27.3	27.3	0.0	176	28.4	37.5	-9.1	26	69.2	38.5	**30.7**
STAR	204	35.3	46.1	-10.8	8	0.0	25.0	-25.0	148	31.1	39.2	-8.1	48	54.2	70.8	-16.6
STARK	448	32.6	32.6	0.0	72	11.1	19.4	-8.3	308	32.5	31.8	**0.7**	68	55.9	50.0	**5.9**
Talbert House CCC	416	36.5	34.6	**1.9**	2	0.0	0.0	0.0	332	33.7	34.3	-0.6	82	48.8	36.6	**12.2**
West Central	356	31.5	41.0	-9.5	10	0.0	20.0	-20.0	282	28.4	39.0	-10.6	64	50.0	53.1	-3.1
WORTH	342	29.2	34.5	-5.3	22	9.1	9.1	0.0	292	28.8	33.6	-4.8	28	50.0	64.3	-14.3
ALL FACILITIES	**7128**	**32.6**	**36.4**	-3.8	**662**	**13.1**	**15.8**	-2.7	**5474**	**31.7**	**36**	-4.3	**992**	**51.4**	**50**	**1.4**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 13: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--All Participants--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	78	23.1	20.5	**2.6**	30	13.3	13.3	0.0	48	29.2	25.0	**4.2**	0	N/A	N/A	N/A
EOCC Male	200	30.0	23.0	**7.0**	14	14.3	0.0	**14.3**	160	25.0	23.8	**1.2**	26	69.2	30.8	**38.4**
Franklin	818	38.4	40.6	-2.2	70	20.0	28.6	-8.6	610	35.1	38.4	-3.3	138	62.3	56.5	**5.8**
Licking-Muskingum	210	33.3	56.2	-22.9	22	0.0	9.1	-9.1	156	28.2	60.3	-32.1	32	81.3	68.8	**12.5**
Lorain-Medina	274	36.5	35.8	**0.7**	28	14.3	21.4	-7.1	210	33.3	39.0	-5.7	36	72.2	27.8	**44.4**
Lucas	394	38.1	44.7	-6.6	22	18.2	36.4	-18.2	310	32.3	42.6	-10.3	62	74.2	58.1	**16.1**
Mahoning	320	28.8	39.4	-10.6	36	11.1	16.7	-5.6	260	28.5	40.8	-12.3	24	58.3	58.3	0.0
MonDay	616	29.9	47.7	-17.8	76	13.2	52.6	-39.4	482	29.0	45.6	-16.6	58	58.6	58.6	0.0
NEOCAP	466	35.6	43.3	-7.7	70	22.9	31.4	-8.5	362	35.9	43.6	-7.7	34	58.8	64.7	-5.9
Northwest CCC	210	37.1	54.3	-17.2	6	33.3	66.7	-33.4	158	29.1	49.4	-20.3	46	65.2	69.6	-4.4
Oriana Cliff Skeen	242	30.6	47.9	-17.3	48	29.2	25.0	**4.2**	172	30.2	53.5	-23.3	22	36.4	54.5	-18.1
Oriana Crossweah	214	32.7	42.1	-9.4	4	50.0	0.0	**50.0**	162	28.4	37.0	-8.6	48	45.8	62.5	-16.7
Oriana Summit	452	39.8	51.3	-11.5	34	11.8	17.6	-5.8	348	39.7	50.6	-10.9	70	54.3	71.4	-17.1
River City	644	39.8	39.8	0.0	66	21.2	24.2	-3.0	498	37.8	39.0	-1.2	80	67.5	57.5	**10.0**
SEPTA	224	33.0	46.4	-13.4	22	18.2	18.2	0.0	176	30.7	48.9	-18.2	26	61.5	53.8	**7.7**
STAR	204	38.2	45.1	-6.9	8	0.0	25.0	-25.0	148	36.5	40.5	-4.0	48	50.0	62.5	-12.5
STARK	448	34.8	42.4	-7.6	72	19.4	22.2	-2.8	308	32.5	40.3	-7.8	68	61.8	73.5	-11.7
Talbert House CCC	416	33.7	40.9	-7.2	2	0.0	0.0	0.0	332	30.1	39.8	-9.7	82	48.8	46.3	**2.5**
West Central	356	36.0	55.6	-19.6	10	0.0	40.0	-40.0	282	31.9	52.5	-20.6	64	59.4	71.9	-12.5
WORTH	342	30.4	46.2	-15.8	22	0.0	18.2	-18.2	292	29.5	45.9	-16.4	28	64.3	71.4	-7.1
ALL FACILITIES	7128	35	43.9	-8.9	662	16.9	26.6	-9.7	5474	32.5	43.1	-10.6	992	60.5	59.7	**0.8**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 14: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--Successful Completers--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	76	2.6	5.3	-2.7	30	0	6.7	-6.7	46	4.3	4.3	0	0	N/A	N/A	N/A
EOCC Male	174	25.3	17.2	**8.1**	14	14.3	0.0	**14.3**	142	21.1	19.7	**1.4**	18	66.7	11.1	**55.6**
Franklin	620	31.0	28.4	**2.6**	58	10.3	13.8	-3.5	482	30.3	26.6	**3.7**	80	50.0	50.0	0.0
Licking-Muskingum	154	19.5	31.2	-11.7	22	0.0	0.0	0.0	120	23.3	38.3	-15.0	12	16.7	16.7	0.0
Lorain-Medina	226	25.7	17.7	**8.0**	24	0.0	8.3	-8.3	174	23.0	20.7	**2.3**	28	64.3	7.1	**57.2**
Lucas	310	31.0	26.5	**4.5**	22	9.1	9.1	0.0	244	26.2	30.3	-4.1	44	68.2	13.6	**54.6**
Mahoning	276	26.8	26.8	0.0	36	5.6	11.1	-5.5	222	27.0	27.9	-0.9	18	66.7	44.4	**22.3**
MonDay	516	21.3	28.3	-7.0	64	6.3	28.1	-21.8	412	19.9	26.2	-6.3	40	60.0	50.0	**10.0**
NEOCAP	406	23.2	14.8	**8.4**	70	11.4	11.4	0.0	320	24.4	15.6	**8.8**	16	50.0	12.5	**37.5**
Northwest CCC	154	19.5	22.1	-2.6	6	33.3	0.0	**33.3**	126	17.5	22.2	-4.7	22	27.3	27.3	0.0
Oriana Cliff Skeen	160	16.3	6.3	**10.0**	40	0.0	5.0	-5.0	108	22.2	3.7	**18.5**	12	16.7	33.3	-16.6
Oriana Crossweah	170	23.5	28.2	-4.7	4	0.0	0.0	0.0	138	23.2	29.0	-5.8	28	28.6	28.6	0.0
Oriana Summit	298	36.2	31.5	**4.7**	28	0.0	14.3	-14.3	230	40.0	33.9	**6.1**	40	40.0	30.0	**10.0**
River City	526	35.4	29.3	**6.1**	62	19.4	6.5	**12.9**	410	34.6	30.2	**4.4**	54	59.3	48.1	**11.2**
SEPTA	164	30.5	29.3	**1.2**	20	30.0	10.0	**20.0**	132	28.8	33.3	-4.5	12	50.0	16.7	**33.3**
STAR	152	31.6	28.9	**2.7**	8	0.0	25.0	-25.0	122	29.5	29.5	0.0	22	54.5	27.3	**27.2**
STARK	392	23.5	22.4	**1.1**	72	8.3	13.9	-5.6	272	25.7	22.1	**3.6**	48	33.3	37.5	-4.2
Talbert House CCC	374	27.8	25.7	**2.1**	2	0.0	0.0	0.0	306	24.8	25.5	-0.7	66	42.4	27.3	**15.1**
West Central	282	27.0	36.9	-9.9	10	0.0	20.0	-20	234	26.5	34.2	-7.7	38	36.8	57.9	-21.1
WORTH	262	16.8	22.9	-6.1	16	12.5	12.5	0.0	232	16.4	23.3	-6.9	14	28.6	28.6	0.0
ALL FACILITIES	**5692**	**26.4**	**25.3**	**1.1**	**608**	**8.6**	**11.8**	-3.2	**4472**	**26**	**25.9**	**0.1**	**612**	**47.4**	**34**	**13.4**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

cases above matched ISP cases. Many of these programs showed highly favorable treatment effects, ranging from 10 percent to 57 percent, with an overall reduction in recidivism of 13.4 percent. This finding clearly supports the risk principle, which suggests that higher risk offenders benefit most from intensive interventions.

Table 15 presents the mean rate of *any new convictions* for *successful program completers* and their matched ISP cases. The overall failure rate for all facilities was fairly comparable between the CBCF treatment group and ISP comparison cases (.03% overall treatment effect with nine programs showing positive results). The risk principle is also apparent in this table, with just 5 programs showing positive results for low risk offenders, 8 programs showing a treatment effect for the moderate risk and 10 programs outperforming the comparison group for high risk offenders, with an average reduction of 9.8 percent over matched comparison cases.

The final CBCF/ISP comparisons can be found in Table 16. This table examines rates of *new incarceration* for *successful CBCF completers.* CBCFs failed to produce an overall treatment effect. However, when risk is taken into account, ISP outperformed the CBCFs for both low and moderate risk offenders; yet 4 programs did show positive effects for low risk, and 7 programs for the moderate risk population. For high risk offenders, over half the programs showed positive treatment affects, with an overall reduction in new incarcerations of 12 percent over the ISP sample. Together, the 6 CBCF/ISP tables appear to support the risk principle, particularly when successful completers only were examined. Furthermore, as expected, treatment effects increased drastically when only successful completers were examined.

Table 15: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--Successful Completers--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
EOCC Female	76	5.3	5.3	0.0	30	6.7	6.7	0.0	46	4.3	4.3	0.0	0	N/A	N/A	N/A
EOCC Male	174	28.7	21.8	**6.9**	14	14.3	14.3	0.0	142	25.4	23.9	**1.5**	18	66.7	11.1	**55.6**
Franklin	620	36.8	37.1	-0.3	58	17.2	20.7	-3.5	482	36.5	35.3	**1.2**	80	52.5	60.0	-7.5
Licking-Muskingum	154	23.4	32.5	-9.1	22	9.1	0.0	**9.1**	120	26.7	40.0	-13.3	12	16.7	16.7	0.0
Lorain-Medina	226	32.7	23.0	**9.7**	24	0.0	16.7	-16.7	174	32.2	23.0	**9.2**	28	64.3	28.6	**35.7**
Lucas	310	34.8	29.0	**5.8**	22	9.1	18.2	-9.1	244	31.1	32.8	-1.7	44	68.2	13.6	**54.6**
Mahoning	276	33.3	34.1	-0.8	36	11.1	22.2	-11.1	222	34.2	35.1	-0.9	18	66.7	44.4	**22.3**
MonDay	516	26.0	34.5	-8.5	64	6.3	31.1	-24.8	412	25.7	33.5	-7.8	40	60.0	50.0	**10.0**
NEOCAP	406	29.1	22.2	**6.9**	70	20.0	17.1	**2.9**	320	30.0	23.8	**6.2**	16	50.0	12.5	**37.5**
Northwest CCC	154	23.4	31.2	-7.8	6	33.3	33.3	0.0	126	20.6	30.2	-9.6	22	36.4	36.4	0.0
Oriana Cliff Skeen	160	22.5	8.8	**13.7**	40	5.0	5.0	0.0	108	27.8	7.4	**20.4**	12	33.3	33.3	0.0
Oriana Crossweah	170	31.8	34.1	-2.3	4	50.0	0.0	**50.0**	138	30.4	31.9	-1.5	28	35.7	50.0	-14.3
Oriana Summit	298	39.6	42.3	-2.7	28	0.0	14.3	-14.3	230	44.3	44.3	0.0	40	40.0	50.0	-10.0
River City	526	41.4	39.2	**2.2**	62	19.4	12.9	**6.5**	410	41.5	41.0	**0.5**	54	66.7	55.6	**11.1**
SEPTA	164	34.1	30.5	**3.6**	20	30.0	20.0	**10.0**	132	31.8	33.3	-1.5	12	66.7	16.7	**50.0**
STAR	152	35.5	35.5	0.0	8	0.0	25.0	-25.0	122	34.4	34.4	0.0	22	54.5	45.5	**9.0**
STARK	392	30.1	29.1	**1.0**	72	11.1	19.4	-8.3	272	33.1	29.4	**3.7**	48	41.7	41.7	0.0
Talbert House CCC	374	35.3	33.2	**2.1**	2	0.0	0.0	0.0	306	34.0	33.3	**0.7**	66	42.4	33.3	**9.1**
West Central	282	32.6	39.0	-6.4	10	0.0	20.0	-20.0	234	30.8	35.9	-5.1	38	52.6	63.2	-10.6
WORTH	262	24.4	28.2	-3.8	16	12.5	12.5	0.0	232	25.0	29.3	-4.3	14	28.6	28.6	0.0
ALL FACILITIES	**5692**	**32**	**31.7**	**0.3**	**608**	**12.2**	**17.1**	**-4.9**	**4472**	**32.1**	**32.3**	**-0.2**	**612**	**51.3**	**41.5**	**9.8**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 16: Mean Recidivism Rates for the CBCF/ISP Sample by Risk--Successful Completers--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	76	23.7	18.4	**5.3**	30	13.3	13.3	0.0	46	30.4	21.7	**8.7**	0	N/A	N/A	N/A
EOCC Male	174	28.7	17.2	**11.5**	14	14.3	0.0	**14.3**	142	25.4	19.7	**5.7**	18	66.7	11.1	**55.6**
Franklin	620	37.1	31.9	**5.2**	58	20.7	24.1	-3.4	482	34.4	31.5	**2.9**	80	65.0	40.0	**25.0**
Licking-Muskingum	154	28.6	45.5	-16.9	22	0.0	9.1	-9.1	120	28.3	53.3	-25.0	12	83.3	33.3	**50.0**
Lorain-Medina	226	36.3	28.3	**8.0**	24	16.7	16.7	0.0	174	33.3	31.0	**2.3**	28	71.4	21.4	**50.0**
Lucas	310	36.1	39.4	-3.3	22	18.2	36.4	-18.2	244	31.1	37.7	-6.6	44	72.7	50.0	**22.7**
Mahoning	276	28.3	34.1	-5.8	36	11.1	16.7	-5.6	222	27.9	35.1	-7.2	18	66.7	55.6	**11.1**
MonDay	516	28.7	41.1	-12.4	64	12.5	43.8	-31.3	412	28.2	40.3	-12.1	40	60.0	45.0	**15**
NEOCAP	406	35.0	37.9	-2.9	70	22.9	31.4	-8.5	320	36.9	38.8	-1.9	16	50.0	50.0	0.0
Northwest CCC	154	29.9	44.2	-14.3	6	33.3	66.7	-33.4	126	23.8	41.3	-17.5	22	63.6	54.5	**9.1**
Oriana Cliff Skeen	160	27.5	30.0	-2.5	40	25.0	15.0	**10.0**	108	25.9	35.2	-9.3	12	50.0	33.3	**16.7**
Oriana Crossweah	170	30.6	36.5	-5.9	4	50.0	0.0	**50.0**	138	27.5	33.3	-5.8	28	42.9	57.1	-14.2
Oriana Summit	298	40.9	36.2	**4.7**	28	7.1	14.3	-7.2	230	44.3	35.7	**8.6**	40	45.0	55.0	-10.0
River City	526	38.8	31.9	**6.9**	62	22.6	25.8	-3.2	410	37.1	31.2	**5.9**	54	70.4	44.4	**26.0**
SEPTA	164	31.7	34.1	-2.4	20	20.0	10.0	**10.0**	132	30.3	37.9	-7.6	12	66.7	33.3	**33.4**
STAR	152	39.5	38.2	**1.3**	8	0.0	25.0	-25.0	122	41.0	37.7	**3.3**	22	45.5	45.5	0.0
STARK	392	34.2	36.2	-2.0	72	19.4	22.2	-2.8	272	33.8	35.3	-1.5	48	58.3	62.5	-4.2
Talbert House CCC	374	33.7	39.0	-5.3	2	0.0	0.0	0.0	306	32.0	37.9	-5.9	66	42.4	45.5	-3.1
West Central	282	33.3	49.6	-16.3	10	0.0	40.0	-40.0	234	29.9	47.0	-17.1	38	63.2	68.4	-5.2
WORTH	262	26.0	41.2	-15.2	16	0.0	25.0	-25.0	232	26.7	41.4	-14.7	14	42.9	57.1	-14.2
ALL FACILITIES	**5692**	**33.5**	**36.2**	-2.7	**608**	**16.8**	**24**	-7.2	**4472**	**32.2**	**36.4**	-4.2	**612**	**59.2**	**47.1**	**12.1**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

CBCF/Parolee Outcomes for All Participants[45]

        Tables 17 through 22 present the results of the CBCF treatment and matched parolee comparison cases. This sample is slightly larger than the CBCF/ISP sample, due to a larger pool of prospective parolee matches (7,528 cases versus 7,128 respectively).   Findings for all participants will be presented first for each of the three recidivism measures, followed by findings for successful completers only.

        Table 17 depicts the mean rate of *new felony convictions* for *all CBCF participants* and their matched parolee cases. For all facilities, the parole comparison group again had a lower overall failure rate than the CBCFs (25.4% versus 30.6%). When broken down by risk, parolees continued to outperform CBCFs regardless of risk level. However, more CBCFs demonstrate a positive treatment effect with high risk cases (9 programs) despite the overall rate of new felony convictions for high risk still favoring the parolees (-2.4%). Table 18 presents findings for the CBCF/parole sample with *all participants* when *any new conviction* is used as the recidivism measure. These results are a bit more favorable than the CBCF treatment effects for new felony conviction. Overall, parolees still outperform CBCF participants slightly with an average failure rate of 34.8 percent versus 36.8 percent; however, 9 programs show positive results relative to the matched comparison cases. Additionally, when examined by risk, the risk principle is again apparent as positive treatment effects are demonstrated for low risk offenders in 4 programs, for moderate risk offenders in 6 programs, and for high risk offenders in 11 programs. Furthermore, the risk principle can be seen via the average difference between the comparison and treatment groups when low risk offenders (-8.6%), moderate risk (-4.0%) and high risk (1.5%) samples are compared.

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[45] Comparison sample is referred to as "parolees" but includes all ex-inmates released to community supervision (e.g. Post-Release Control).

Table 17: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--All Participants--Measured by New Felony Conviction

PROGRAM	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
EOCC Female	108	3.7	3.7	0.0	34	0.0	5.9	-5.9	70	2.9	2.9	0.0	4	50.0	0.0	**50.0**
EOCC Male	198	23.2	25.3	-2.1	14	14.3	0.0	**14.3**	140	20.0	24.3	-4.3	44	36.4	36.4	0.0
Franklin	916	28.2	38.2	-10.0	70	0.0	20	-20.0	622	25.7	33.1	-7.4	224	43.8	58.0	-14.2
Licking-Muskingum	214	21.5	43.9	-22.4	22	9.1	0.0	**9.1**	130	20.0	46.2	-26.2	62	29.0	54.8	-25.8
Lorain-Medina	296	31.8	23.6	**8.2**	26	7.7	7.7	0.0	196	27.6	24.5	**3.1**	74	51.4	27.0	**24.4**
Lucas	464	27.6	31.5	-3.9	14	14.3	0.0	**14.3**	314	19.7	30.6	-10.9	136	47.1	36.8	**10.3**
Mahoning	370	34.1	28.1	**6.0**	36	11.1	11.1	0.0	286	35.7	29.4	**6.3**	48	41.7	33.3	**8.4**
MonDay	594	28.3	39.4	-11.1	66	9.1	33.3	-24.2	418	27.8	34.4	-6.6	110	41.8	61.8	-20.0
NEOCAP	458	15.3	15.3	0.0	70	2.9	11.4	-8.5	322	13.0	14.9	-1.9	66	39.4	21.2	**18.2**
Northwest CCC	206	24.3	29.1	-4.8	6	33.3	0.0	**33.3**	140	18.6	25.7	-7.1	60	36.7	40.0	-3.3
Oriana Cliff Skeen	128	12.5	14.1	-1.6	36	0.0	5.6	-5.6	76	13.2	15.8	-2.6	16	37.5	25.0	**12.5**
Oriana Crossweah	210	24.8	31.4	-6.6	4	0.0	0.0	0.0	126	19.0	31.7	-12.7	80	35.0	32.5	**2.5**
Oriana Summit	564	31.6	39.4	-7.8	34	11.8	17.6	-5.8	382	30.9	39.3	-8.4	148	37.8	44.6	-6.8
River City	702	28.8	37.3	-8.5	66	6.1	9.1	-3.0	502	27.1	37.5	-10.4	134	46.3	50.7	-4.4
SEPTA	172	30.2	43.0	-12.8	22	18.2	18.2	0.0	100	30.0	42.0	-12.0	50	36.0	56.0	-20.0
STAR	192	29.2	41.7	-12.5	8	25.0	25	0.0	118	15.3	35.6	-20.3	66	54.5	54.5	0.0
STARK	488	32.0	29.9	**2.1**	58	3.4	17.2	-13.8	306	32.7	26.8	**5.9**	124	43.5	43.5	0.0
Talbert House CCC	534	30.7	31.5	-0.8	2	0.0	0.0	0.0	356	23.6	27.0	-3.4	176	45.5	40.9	**4.6**
West Central	348	27.0	38.5	-11.5	10	0.0	20.0	-20.0	220	19.1	38.2	-19.1	118	44.1	40.7	**3.4**
WORTH	366	23.0	27.3	-4.3	28	0.0	7.1	-7.1	266	21.1	21.8	-0.7	72	38.9	55.6	-16.7
ALL FACILITIES	**7528**	**25.4**	**30.6**	-5.2	**626**	**6.1**	**13.7**	-7.6	**5090**	**24.3**	**30.5**	-6.2	**1812**	**42.5**	**44.9**	-2.4

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 18: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--All Participants--Measured by Any New Conviction

PROGRAM	All LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
EOCC Female	108	11.1	9.3	**1.8**	34	0.0	5.9	-5.9	70	14.3	11.4	**2.9**	4	50.0	0.0	**50.0**
EOCC Male	198	36.4	30.3	**6.1**	14	14.3	14.3	0.0	140	30.0	28.6	**1.4**	44	63.6	40.9	**22.7**
Franklin	916	35.7	47.9	-12.2	70	0.0	31.4	-31.4	622	31.2	40.2	-9.0	224	55.4	67.9	-12.5
Licking-Muskingum	214	28.0	44.9	-16.9	22	9.1	0.0	**9.1**	130	26.2	47.7	-21.5	62	38.7	54.8	-16.1
Lorain-Medina	296	39.2	29.7	**9.5**	26	7.7	15.4	-7.7	196	35.7	27.6	**8.1**	74	59.5	40.5	**19.0**
Lucas	464	38.4	34.5	**3.9**	14	14.3	14.3	0.0	314	29.9	33.1	-3.2	136	60.3	39.7	**20.6**
Mahoning	370	41.6	36.2	**5.4**	36	11.1	22.2	-11.1	286	44.1	37.1	**7.0**	48	50.0	41.7	**8.3**
MonDay	594	37.4	45.1	-7.7	66	15.2	36.4	-21.2	418	37.3	41.1	-3.8	110	50.9	65.5	-14.6
NEOCAP	458	22.3	23.1	-0.8	70	5.7	17.1	-11.4	322	21.7	23.0	-1.3	66	42.4	30.3	**12.1**
Northwest CCC	206	30.1	35.9	-5.8	6	33.3	33.3	0.0	140	22.9	32.9	-10.0	60	46.7	43.3	**3.4**
Oriana Cliff Skeen	128	23.4	18.8	**4.6**	36	22.2	5.6	**16.6**	76	21.1	23.7	-2.6	16	37.5	25.0	**12.5**
Oriana Crossweah	210	34.3	41.0	-6.7	4	0.0	0.0	0.0	126	27.0	38.1	-11.1	80	47.5	47.5	0.0
Oriana Summit	564	38.3	48.2	-9.9	34	17.6	17.6	0.0	382	37.7	48.2	-10.5	148	44.6	55.4	-10.8
River City	702	37.3	47.3	-10.0	66	9.1	15.2	-6.1	502	36.7	47.0	-10.3	134	53.7	64.2	-10.5
SEPTA	172	41.9	45.3	-3.4	22	27.3	27.3	0.0	100	42.0	44.0	-2.0	50	48.0	56.0	-8.0
STAR	192	37.5	47.9	-10.4	8	50.0	25.0	**25.0**	118	23.7	42.4	-18.7	66	60.6	60.6	0.0
STARK	488	45.9	36.9	**9.0**	58	10.3	24.1	-13.8	306	46.4	34.0	**12.4**	124	61.3	50.0	**11.3**
Talbert House CCC	534	40.8	39.3	**1.5**	2	0.0	0.0	0.0	356	32.0	34.8	-2.8	176	59.1	48.9	**10.2**
West Central	348	38.5	42.0	-3.5	10	0.0	20.0	-20.0	220	30.0	40.0	-10.0	118	57.6	47.5	**10.1**
WORTH	366	37.2	32.8	**4.4**	28	14.3	7.1	**7.2**	266	33.1	27.8	**5.3**	72	61.1	61.1	0.0
ALL FACILITIES	*7528*	**34.8**	**36.8**	-2.1	*626*	**10.9**	**19.5**	-8.6	*5090*	**33.1**	**37.1**	-4.0	*1812*	**54.0**	**52.5**	**1.5**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 19 compares the rates of *new incarceration* for *all CBCF participants.* Like with

the CBCF/ISP group, there are few positive treatment results for CBCF programs. Overall, only

one program showed improvement over matched parolees, and the average failure rate was

substantially higher for CBCF cases (45.4%) than comparison cases (29.0%). Interestingly,

more programs appeared effective with low risk offenders than either the moderate or high risk

population; however, the overall mean difference in recidivism rates between the treatment and

comparison groups by risk was slightly lower for the moderate versus low risk offenders (-15.2

versus -16.3 respectively), but was the highest for the high risk group (-19.3%).

CBCF/Parolee Outcomes for Successful Completers Only

Just as with the CBCF/ISP sample, CBCF/parole results presented in the next three tables

for successful completers only are much more favorable for the CBCFs. Table 20 examines the

mean rate of *new felony convictions* for *successful completers only* and their matched parolee

cases. Although the difference in the overall rates of recidivism favor the comparison group

slightly (-0.5%), nearly half of the programs demonstrated a positive treatment effect. When

broken down by risk, both the number of programs producing positive effects and the average

treatment effect for all facilities becomes continuously higher as the risk categories increase. For

offenders classified as high risk, three quarters of the programs demonstrated a treatment effect,

with an average reduction of 8 percent across programs. Favorable results continue when *any*

new conviction is used as the outcome measure for *successful completers only*. Table 21 finds a

slight positive overall treatment effect, irrespective of risk (.08%). While only 4 programs were

effective in treating low risk offenders, 8 programs showed positive effects with a moderate risk

population and 15 of the 20 programs had a treatment effect for high risk offenders. Likewise,

for the high risk population, recidivism was reduced by an average of 12 percentage points.

Table 19: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--All Participants--Measured by New Incarceration

PROGRAM	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
EOCC Female	108	3.7	27.8	-24.1	34	0.0	11.8	-11.8	70	5.7	34.3	-28.6	4	0	50	-50.0
EOCC Male	198	38.4	26.3	**12.1**	14	0.0	0.0	0.0	140	38.6	22.9	**15.7**	44	50.0	45.5	**4.5**
Franklin	916	26.4	42.4	-16.0	70	11.4	28.6	-17.2	622	21.2	37.9	-16.7	224	45.5	58.9	-13.4
Licking-Muskingum	214	24.3	61.7	-37.4	22	18.2	9.1	**9.1**	130	27.7	63.1	-35.4	62	19.4	77.4	-58.0
Lorain-Medina	296	37.2	39.2	-2.0	26	15.4	23.1	-7.7	196	32.7	38.8	-6.1	74	56.8	45.9	**10.9**
Lucas	464	29.3	44.0	-14.7	14	0.0	28.6	-28.6	314	23.6	38.2	-14.6	136	45.6	58.8	-13.2
Mahoning	370	36.2	36.8	-0.6	36	27.8	16.7	**11.1**	286	36.4	38.5	-2.1	48	41.7	41.7	0.0
MonDay	594	26.9	49.5	-22.6	66	6.1	54.5	-48.4	418	29.7	43.5	-13.8	110	29.1	69.1	-40.0
NEOCAP	458	21.0	44.1	-23.1	70	0.0	31.4	-31.4	322	21.7	44.7	-23	66	39.4	54.5	-15.1
Northwest CCC	206	35.9	57.3	-21.4	6	66.7	66.7	0.0	140	27.1	51.4	-24.3	60	53.3	70.0	-16.7
Oriana Cliff Skeen	128	17.2	42.2	-25.0	36	0.0	22.2	-22.2	76	23.7	50.0	-26.3	16	25.0	50.0	-25.0
Oriana Crossweah	210	29.5	45.7	-16.2	4	50.0	0.0	**50.0**	126	25.4	38.1	-12.7	80	35.0	60.0	-25.0
Oriana Summit	564	29.4	55.3	-25.9	34	23.5	17.6	**5.9**	382	26.7	50.8	-24.1	148	37.8	75.7	-37.9
River City	702	26.8	40.2	-13.4	66	3.0	24.2	-21.2	502	26.3	38.2	-11.9	134	40.3	55.2	-14.9
SEPTA	172	29.1	55.8	-26.7	22	27.3	18.2	**9.1**	100	30.0	58.0	-28.0	50	28.0	68.0	-40
STAR	192	42.7	46.9	-4.2	8	25.0	25.0	0.0	118	32.2	42.4	-10.2	66	63.6	57.6	**6.0**
STARK	488	33.6	50.0	-16.4	58	3.4	20.7	-17.3	306	35.9	46.4	-10.5	124	41.9	72.6	-30.7
Talbert House CCC	534	35.2	40.8	-5.6	2	0.0	0.0	0.0	356	30.3	38.2	-7.9	176	45.5	46.6	-1.1
West Central	348	32.8	57.5	-24.7	10	0.0	40.0	-40.0	220	30.0	52.7	-22.7	118	40.7	67.8	-27.1
WORTH	366	23.5	44.8	-21.3	28	7.1	14.3	-7.2	266	21.1	41.4	-20.3	72	38.9	69.4	-30.5
ALL FACILITIES	7528	29.0	45.4	-16.5	626	9.3	25.6	-16.3	5090	27.3	42.5	-15.2	1812	41.7	61.0	-19.3

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 20: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--Successful Completers--Measured by New Felony Conviction

PROGRAM	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
EOCC Female	104	3.8	3.8	0.0	34	0.0	5.9	-5.9	66	3.0	3.0	0.0	4	50.0	0.0	**50.0**
EOCC Male	172	24.4	20.9	**3.5**	14	14.3	0.0	**14.3**	128	21.9	20.3	**1.6**	30	40.0	33.3	**6.7**
Franklin	674	28.2	31.5	-3.3	58	0.0	13.8	-13.8	490	26.5	29.8	-3.3	126	47.6	46.0	**1.6**
Licking-Muskingum	138	21.7	29.0	-7.3	22	9.1	0.0	**9.1**	94	21.3	38.3	-17	22	36.4	18.2	**18.2**
Lorain-Medina	240	31.7	20.0	**11.7**	24	8.3	8.3	0.0	164	28.0	22.0	**6.0**	52	53.8	19.2	**34.6**
Lucas	358	29.1	27.4	**1.7**	14	14.3	0.0	**14.3**	248	20.2	28.2	-8.0	96	54.2	29.2	**25.0**
Mahoning	324	32.7	25.9	**6.8**	36	11.1	11.1	0.0	248	33.9	28.2	**5.7**	40	45.0	25.0	**20.0**
MonDay	486	26.7	35.4	-8.7	56	7.1	32.1	-25.0	354	25.4	29.9	-4.5	76	47.4	63.2	-15.8
NEOCAP	390	12.8	13.8	-1.0	70	2.9	11.4	-8.5	284	13.4	14.8	-1.4	36	27.8	11.1	**16.7**
Northwest CCC	148	20.3	21.6	-1.3	6	33.3	0.0	**33.3**	110	18.2	20.0	-1.8	32	25.0	31.3	-6.3
Oriana Cliff Skeen	84	14.3	7.1	**7.2**	32	0.0	6.3	-6.3	44	13.6	4.5	**9.1**	8	75.0	25.0	**50.0**
Oriana Crossweah	166	20.5	32.5	-12	4	0.0	0.0	0.0	108	16.7	35.2	-18.5	54	29.6	29.6	0.0
Oriana Summit	356	31.5	34.8	-3.3	28	7.1	14.3	-7.2	256	32.8	35.9	-3.1	72	36.1	38.9	-2.8
River City	560	26.4	29.6	-3.2	62	6.5	6.5	0.0	412	24.3	29.6	-5.3	86	51.2	46.5	**4.7**
SEPTA	110	34.5	29.1	**5.4**	20	20.0	10.0	**10.0**	74	32.4	37.8	-5.4	16	62.5	12.5	**50.0**
STAR	140	28.6	31.4	-2.8	8	25.0	25.0	0.0	94	19.1	31.9	-12.8	38	52.6	31.6	**21.0**
STARK	412	32.5	27.2	**5.3**	58	3.4	17.2	-13.8	268	34.3	24.6	**9.7**	86	46.5	41.9	**4.6**
Talbert House CCC	482	30.3	29.5	**0.8**	2	0.0	0.0	0.0	326	23.9	25.2	-1.3	154	44.2	39.0	**5.2**
West Central	262	25.2	35.9	-10.7	10	0.0	20.0	-20.0	182	17.6	34.1	-16.5	70	48.6	42.9	**5.7**
WORTH	266	22.6	21.1	**1.5**	20	0.0	10.0	-10.0	210	21.9	18.1	**3.8**	36	38.9	44.4	-5.5
ALL FACILITIES	**5872**	**24.9**	**25.4**	-0.5	**578**	**5.9**	**12.1**	-6.2	**4160**	**24.2**	**26.8**	-2.6	**1134**	**45.1**	**37.4**	**7.7**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 21: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--Successful Completers--Measured by Any New Conviction

PROGRAM	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
EOCC Female	104	11.5	7.7	**3.8**	34	0.0	5.9	-5.9	66	15.2	9.1	**6.1**	4	50.0	0.0	**50.0**
EOCC Male	172	38.4	25.6	**12.8**	14	14.3	14.3	0.0	128	32.8	25.0	**7.8**	30	73.3	33.3	**40.0**
Franklin	674	33.2	40.4	-7.2	58	0.0	20.7	-20.7	490	30.6	38.4	-7.8	126	58.7	57.1	**1.6**
Licking-Muskingum	138	23.2	30.4	-7.2	22	9.1	0.0	**9.1**	94	23.4	40.4	-17.0	22	36.4	18.2	**18.2**
Lorain-Medina	240	39.2	25.8	**13.4**	24	8.3	16.7	-8.4	164	36.6	24.4	**12.2**	52	61.5	34.6	**26.9**
Lucas	358	38.5	30.2	**8.3**	14	14.3	14.3	0.0	248	29.8	30.6	-0.8	96	64.6	31.3	**33.3**
Mahoning	324	40.1	33.3	**6.8**	36	11.1	22.2	-11.1	248	42.7	34.7	**8.0**	40	50.0	35.0	**15.0**
MonDay	486	35.0	41.2	-6.2	56	10.7	35.7	-25.0	354	33.9	36.7	-2.8	76	57.9	65.8	-7.9
NEOCAP	390	20.5	21.5	-1	70	5.7	17.1	-11.4	284	22.5	22.5	0.0	36	33.3	22.2	**11.1**
Northwest CCC	148	27.0	31.1	-4.1	6	33.3	33.3	0.0	110	23.6	29.1	-5.5	32	37.5	37.5	0.0
Oriana Cliff Skeen	84	26.2	7.1	**19.1**	32	25.0	6.3	**18.7**	44	18.2	4.5	**13.7**	8	75.0	25.0	**50.0**
Oriana Crossweah	166	28.9	39.8	-10.9	4	0.0	0.0	0.0	108	22.2	38.9	-16.7	54	44.4	44.4	0.0
Oriana Summit	356	39.3	45.5	-6.2	28	14.3	14.3	0.0	256	40.6	46.1	-5.5	72	44.4	55.6	-11.2
River City	560	34.6	39.3	-4.7	62	9.7	12.9	-3.2	412	34.0	39.8	-5.8	86	55.8	55.8	0.0
SEPTA	110	43.6	30.9	**12.7**	20	30.0	20.0	**10.0**	74	43.2	37.8	**5.4**	16	62.5	12.5	**50.0**
STAR	140	35.7	38.6	-2.9	8	50.0	25.0	**25.0**	94	27.7	38.3	-10.6	38	52.6	42.1	**10.5**
STARK	412	45.6	34.5	**11.1**	58	10.3	24.1	-13.8	268	46.3	32.1	**14.2**	86	67.4	48.8	**18.6**
Talbert House CCC	482	40.2	37.3	**2.9**	2	0.0	0.0	0.0	326	31.3	33.1	-1.8	154	59.7	46.8	**12.9**
West Central	262	36.6	38.9	-2.3	10	0.0	20.0	-20.0	182	28.6	36.3	-7.7	70	62.9	48.6	**14.3**
WORTH	266	36.1	26.3	**9.8**	20	0.0	10.0	-10.0	210	33.3	24.8	**8.5**	36	72.2	44.4	**27.8**
ALL FACILITIES	**5872**	**35.1**	**34.3**	**0.8**	**578**	**10**	**17.6**	**-7.6**	**4160**	**32.6**	**33.5**	**-0.9**	**1134**	**57.1**	**45.3**	**11.8**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

The final CBCF/parole comparisons can be found in Table 22. This table examines rates of *new incarceration* for *successful CBCF completers.* CBCFs failed to produce an overall treatment effect across programs, irrespective of risk. Only 3 programs were effective at reducing new incarcerations overall. While this number more than doubled for the high risk population, the average failure rate still favored the comparison group (43.6% versus 48.1%).

HWH Recidivism Results

Tables 23 through 28 present the results of the HWH treatment and matched comparison cases. Recall that for the HWH outcome analyses, 8 of the smaller programs were collapsed into a "small programs" category, leaving 37 separate "program" analyses. The bottom row labeled "all programs" presents the average findings across all facilities. As with the CBCFs, findings for all participants will be presented first for each of the three recidivism measures, followed by findings for successful completers only.

HWH Outcomes for All Participants

Table 23 depicts the mean rate of *new felony convictions* for *all HWH participants* and their matched comparison cases. For all facilities, the HWH treatment group had a slightly lower overall failure rate than the comparison cases (29.1% versus 27.6%). When broken down by risk, the comparison group outperformed HWHs with low risk offenders, but HWHs again showed a slight treatment effect with moderate risk offenders (0.8% difference) and a higher treatment effect (4.8% difference) with the high risk groups. Even when all offenders exposed to programming are analyzed, well over half of the programs produced a positive treatment effect, reducing the rate of new felony convictions.

Table 24 shows the findings for the HWH/parole sample with *all participants* when *any new conviction* is used as the recidivism measure. These results are a bit less favorable than the

Table 22: Mean Recidivism Rates for the CBCF/Parole Sample by Risk--Successful Completers--Measured by New Incarceration

PROGRAM	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	DIFF
EOCC Female	104	3.8	25.0	-21.2	34	0.0	11.8	-11.8	66	6.1	30.3	-24.2	4	0.0	50.0	-50.0
EOCC Male	172	40.7	20.9	**19.8**	14	0.0	0.0	0.0	128	42.2	20.3	**21.9**	30	53.3	33.3	**20.0**
Franklin	674	25.5	32.6	-7.1	58	10.3	24.1	-13.8	490	21.6	31.0	-9.4	126	47.6	42.9	**4.7**
Licking-Muskingum	138	24.6	46.4	-21.8	22	18.2	9.1	**9.1**	94	27.7	55.3	-27.6	22	18.2	45.5	-27.3
Lorain-Medina	240	38.3	30.8	**7.5**	24	16.7	16.7	0.0	164	34.1	30.5	**3.6**	52	61.5	38.5	**23.0**
Lucas	358	27.4	38.5	-11.1	14	0.0	28.6	-28.6	248	21.8	34.7	-12.9	96	45.8	50.0	-4.2
Mahoning	324	34.0	31.5	**2.5**	36	27.8	16.7	**11.1**	248	33.9	33.1	**0.8**	40	40.0	35.0	**5.0**
MonDay	486	25.5	41.6	-16.1	56	3.6	46.4	-42.8	354	27.7	36.7	-9.0	76	31.6	60.5	-28.9
NEOCAP	390	20.0	38.5	-18.5	70	0.0	31.4	-31.4	284	23.2	40.1	-16.9	36	33.3	38.9	-5.6
Northwest CCC	148	33.8	47.3	-13.5	6	66.7	66.7	0.0	110	27.3	41.8	-14.5	32	50.0	62.5	-12.5
Oriana Cliff Skeen	84	11.9	23.8	-11.9	32	0.0	12.5	-12.5	44	13.6	31.8	-18.2	8	50.0	25.0	**25.0**
Oriana Crossweah	166	27.7	41.0	-13.3	4	50.0	0.0	**50.0**	108	24.1	35.2	-11.1	54	33.3	55.6	-22.3
Oriana Summit	356	28.7	39.3	-10.6	28	14.3	14.3	0.0	256	27.3	36.7	-9.4	72	38.9	58.3	-19.4
River City	560	25.0	30.7	-5.7	62	3.2	25.8	-22.6	412	23.8	30.1	-6.3	86	46.5	37.2	**9.3**
SEPTA	110	30.9	36.4	-5.5	20	30.0	10.0	**20.0**	74	29.7	45.9	-16.2	16	37.5	25.0	**12.5**
STAR	140	40.0	40.0	0.0	8	25.0	25.0	0.0	94	31.9	40.4	-8.5	38	63.2	42.1	**21.1**
STARK	412	33.5	43.2	-9.7	58	3.4	20.7	-17.3	268	38.1	41.8	-3.7	86	39.5	62.8	-23.3
Talbert House CCC	482	34.9	38.6	-3.7	2	0.0	0.0	0.0	326	30.7	36.2	-5.5	154	44.2	44.2	0.0
West Central	262	32.8	49.6	-16.8	10	0.0	40.0	-40.0	182	29.7	47.3	-17.6	70	45.7	57.1	-11.4
WORTH	266	24.1	38.3	-14.2	20	0.0	20.0	-20.0	210	22.9	37.1	-14.2	36	44.4	55.6	-11.2
ALL FACILITIES	**5872**	**28.2**	**36.7**	**-8.6**	**578**	**8.3**	**23.2**	**-14.9**	**4160**	**27.3**	**35.9**	**-8.6**	**1134**	**43.6**	**48.1**	**-4.5**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 23: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
AH Alum Creek	484	33.9	27.7	6.2	38	0.0	26.3	-26.3	310	33.5	25.2	8.3	136	44.1	33.8	10.3
AH Dunning	134	16.4	14.9	1.5	38	5.3	0.0	5.3	66	12.1	15.2	-3.1	30	40.0	33.3	6.7
AH Price	174	40.2	32.2	8.0	16	12.5	0.0	12.5	100	38.0	38.0	0.0	58	51.7	31.0	20.7
AH Veterans	138	29.0	30.4	-1.4	12	16.7	0.0	16.7	98	30.6	32.7	-2.1	28	28.6	35.7	-7.1
Alternatives	848	35.0	34.2	0.8	106	13.2	22.6	-9.4	570	37.7	31.9	5.8	172	39.5	48.8	-9.3
ARCA	158	11.4	24.1	-12.7	32	6.3	0.0	6.3	98	10.2	28.6	-18.4	28	21.4	35.7	-14.3
Booth H/Salv A	138	44.9	40.6	4.3	8	0.0	0.0	0.0	106	47.2	43.4	3.8	24	50.0	41.7	8.3
CATS female RTP	122	13.1	9.8	3.3	24	8.3	0.0	8.3	82	9.8	9.8	0.0	16	37.5	25.0	12.5
CATS male RTP	248	37.9	36.3	1.6	10	20.0	40.0	-20.0	154	32.5	29.9	2.6	84	50.0	47.6	2.4
CATS male TC	144	37.5	23.6	13.9	4	50.0	0.0	50.0	102	35.3	23.5	11.8	38	42.1	26.3	15.8
CCA RTC I	146	12.3	11.0	1.3	22	0.0	0.0	0.0	100	10.0	16.0	-6.0	24	33.3	0.0	33.3
CCA RTC II	290	31.0	15.9	15.1	44	4.5	4.5	0.0	198	32.3	12.1	20.2	48	50.0	41.7	8.3
Cinti VOA D/A	346	37.0	42.8	-5.8	12	16.7	16.7	0.0	230	28.7	33.9	-5.2	104	57.7	65.4	-7.7
Cinti VOA SOT	152	25.0	32.9	-7.9	36	11.1	27.8	-16.7	108	27.8	35.2	-7.4	8	50.0	25.0	25.0
Comm Trans Ctr	322	24.2	28.6	-4.4	26	15.4	15.4	0.0	212	16.0	26.4	-10.4	84	47.6	38.1	9.5
CompDrug	532	27.8	24.4	3.4	42	4.8	23.8	-19.0	326	25.2	20.9	4.3	164	39.0	31.7	7.3
Crossroads	270	24.4	37.8	-13.4	16	12.5	12.5	0.0	202	20.8	33.7	-12.9	52	42.3	61.5	-19.2
CTCC Canton	384	31.8	35.9	-4.1	50	4.0	16.0	-12.0	238	31.9	36.1	-4.2	96	45.8	45.8	0.0
Dayton VOA	436	27.1	32.1	-5.0	38	15.8	21.1	-5.3	300	24.0	28.0	-4.0	98	40.8	49.0	-8.2
Diversified	280	38.6	34.3	4.3	6	33.3	33.3	0.0	150	36.0	28.0	8.0	124	41.9	41.9	0.0
Fresh Start	362	38.7	21.5	17.2	14	0.0	0.0	0.0	258	37.2	17.1	20.1	90	48.9	37.8	11.1
Harbor Light--Corr	796	33.9	31.7	2.2	80	10.0	25.0	-15.0	544	32.0	30.1	1.9	172	51.2	39.5	11.7
Harbor Light--D/A	148	35.1	21.6	13.5	4	0.0	50.0	-50.0	122	34.4	19.7	14.7	22	45.5	27.3	18.2
Mansfield VOA	204	25.5	17.6	7.9	32	18.8	6.3	12.5	144	22.2	19.4	2.8	28	50.0	21.4	28.6
Oriana CCTC	548	33.2	39.1	-5.9	44	4.5	22.7	-18.2	330	30.9	33.9	-3.0	174	44.8	52.9	-8.1
Oriana RCC	206	17.5	15.5	2.0	56	10.7	7.1	3.6	118	18.6	15.3	3.3	32	25.0	31.3	-6.3
Oriana RIP	544	32.0	35.3	-3.3	42	0.0	28.6	-28.6	360	28.3	31.7	-3.4	142	50.7	46.5	4.2
Oriana TMRC	594	28.3	28.6	-0.3	64	9.4	15.6	-6.2	416	28.4	28.4	0.0	114	38.6	36.8	1.8
Pathfinder	340	21.0	19.2	1.8	46	0.0	4.3	-4.3	234	17.9	18.8	-0.9	54	51.9	33.3	18.6
Small Programs	534	25.5	21.7	3.8	58	17.2	6.9	10.3	332	19.9	20.5	-0.6	144	41.7	30.6	11.1

Table 23 Con't: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
SOS	260	29.2	40.0	-10.8	10	0.0	20.0	-20.0	180	18.9	34.4	-15.5	70	60.0	57.1	**2.9**
TH Beekman	270	32.6	43.7	-11.1	16	25.0	0.0	**25.0**	170	30.6	40.0	-9.4	84	38.1	59.5	-21.4
TH Cornerstone	152	35.5	27.6	**7.9**	20	20.0	10.0	**10.0**	98	30.6	30.6	0.0	34	58.8	29.4	**29.4**
TH Pathways	172	17.2	3.4	**12.8**	62	6.5	0.0	**6.5**	100	18.0	6.0	**12.0**	10	60.0	0.0	**60.0**
TH Springrove	468	27.8	29.1	-1.3	34	0.0	11.8	-11.8	362	27.6	27.1	**0.5**	72	41.7	47.2	-5.5
TH Turtle Creek	332	28.9	33.7	-4.8	34	0.0	17.6	-17.6	236	24.6	35.6	-11.0	62	61.3	35.5	**25.8**
Toledo VOA	510	37.3	23.1	**14.2**	22	27.3	9.1	**18.2**	286	28.7	18.9	**9.8**	202	50.5	30.7	**19.8**
ALL PROGRAMS	**12180**	**29.1**	**27.6**	**1.5**	**1218**	**9.0**	**13.8**	-4.8	**8040**	**28.0**	**27.2**	**0.8**	**2922**	**45.7**	**40.9**	**4.8**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 24: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
AH Alum Creek	484	41.3	39.3	2.0	38	5.3	26.3	-21.0	310	40.6	33.5	7.1	136	52.9	55.9	-3
AH Dunning	134	23.9	29.9	-6.0	38	15.8	5.3	10.5	66	15.2	33.3	-18.1	30	53.3	53.3	0.0
AH Price	174	47.1	41.4	5.7	16	25.0	25.0	0.0	100	44.0	44.0	0.0	58	58.6	41.4	17.2
AH Veterans	138	31.9	34.8	-2.9	12	16.7	0.0	16.7	98	34.7	36.7	-2.0	28	28.6	42.9	-14.3
Alternatives	848	40.6	38.0	2.6	106	15.1	24.5	-9.4	570	42.5	35.8	6.7	172	50.0	53.5	-3.5
ARCA	158	17.7	27.8	-10.1	32	6.3	0.0	6.3	98	16.3	34.7	-18.4	28	35.7	35.7	0.0
Booth H/Salv A	138	53.6	46.4	7.2	8	0.0	0.0	0.0	106	56.6	47.2	9.4	24	58.3	58.3	0.0
CATS female RTP	122	21.3	11.5	9.8	24	8.3	0.0	8.3	82	19.5	12.2	7.3	16	50.0	25.0	25.0
CATS male RTP	248	44.4	38.7	5.7	10	20.0	40.0	-20.0	154	36.4	32.5	3.9	84	61.9	50.0	11.9
CATS male TC	144	45.8	29.2	16.6	4	50.0	0.0	50.0	102	43.1	27.5	15.6	38	52.6	36.8	15.8
CCA RTC I	146	24.7	16.4	8.3	22	9.1	0.0	9.1	100	22.0	20.0	2.0	24	50.0	16.7	33.3
CCA RTC II	290	40.0	26.9	13.1	44	9.1	18.2	-9.1	198	44.4	23.2	21.2	48	50.0	50.0	0.0
Cinti VOA D/A	346	46.2	54.9	-8.7	12	16.7	50.0	-33.3	230	38.3	47.8	-9.5	104	67.3	71.2	-3.9
Cinti VOA SOT	152	26.3	36.8	-10.5	36	11.1	33.3	-22.2	108	29.6	38.9	-9.3	8	50.0	25.0	25.0
Comm Trans Ctr	322	30.4	39.8	-9.4	26	15.4	30.8	-15.4	212	21.7	38.7	-17.0	84	57.1	45.2	11.9
CompDrug	532	36.8	36.1	0.7	42	4.8	28.6	-23.8	326	35.6	31.3	4.3	164	47.6	47.6	0.0
Crossroads	270	28.9	42.2	-13.3	16	37.5	37.5	0.0	202	22.8	36.6	-13.8	52	50.0	65.4	-15.4
CTCC Canton	384	42.2	49.0	-6.8	50	12.0	24.0	-12.0	238	42.9	48.7	-5.8	96	56.3	62.5	-6.2
Dayton VOA	436	34.4	40.8	-6.4	38	15.8	26.3	-10.5	300	30.7	37.3	-6.6	98	53.1	57.1	-4.0
Diversified	280	45.7	42.9	2.8	6	33.3	33.3	0.0	150	41.3	34.7	6.6	124	51.6	53.2	-1.6
Fresh Start	362	44.2	26.0	18.2	14	0.0	0.0	0.0	258	41.1	22.5	18.6	90	60.0	40.0	20.0
Harbor Light--Corr	796	39.9	33.9	6.0	80	12.5	25.0	-12.5	544	37.9	32.4	5.5	172	59.3	43.0	16.3
Harbor Light--D/A	148	44.6	31.1	13.5	4	0.0	50.0	-50.0	122	45.9	31.1	14.8	22	45.5	27.3	18.2
Mansfield VOA	204	32.4	17.6	14.8	32	18.8	6.3	12.5	144	30.6	19.4	11.2	28	57.1	21.4	35.7
Oriana CCTC	548	40.5	44.2	-3.9	44	9.1	27.3	-18.2	330	37.0	38.2	-1.2	174	55.2	59.8	-4.6
Oriana RCC	206	24.3	21.4	2.9	56	21.4	14.3	7.1	118	25.4	16.9	8.5	32	25.0	50.0	-25.0
Oriana RIP	544	37.9	44.9	-7.0	42	4.8	28.6	-23.8	360	35.6	41.1	-5.5	142	53.5	59.2	-5.7
Oriana TMRC	594	39.1	38.0	1.1	64	12.5	15.6	-3.1	416	38.5	38.9	-0.4	114	56.1	47.4	8.7
Pathfinder	334	24.1	24.1	0.0	46	0.0	4.3	-4.3	234	21.4	24.8	-3.4	54	55.6	37.0	18.6
Small Programs	534	33.7	32.2	1.5	58	20.7	13.8	6.9	332	28.3	29.5	-1.2	144	51.4	45.8	5.6

92

Table 24 Con't: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
SOS	260	33.8	53.1	-19.3	10	0.0	40.0	-40.0	180	24.4	47.8	-23.4	70	62.9	68.6	-5.7
TH Beekman	270	41.5	56.3	-14.8	16	25.0	12.5	**12.5**	170	35.3	54.1	-18.8	84	57.1	69.0	-11.9
TH Cornerstone	152	42.1	35.5	**6.6**	20	40.0	20.0	**20.0**	98	34.7	34.7	0.0	34	64.7	47.1	**17.6**
TH Pathways	172	21.8	16.1	**5.7**	62	9.7	6.5	**3.2**	100	24.0	20.0	**4.0**	10	60.0	40.0	**20.0**
TH Springrove	468	33.3	41.9	-8.6	34	0.0	17.6	-17.6	362	32.6	39.8	-7.2	72	52.8	63.9	-11.1
TH Turtle Creek	332	39.2	47.6	-8.4	34	0.0	35.3	-35.3	236	37.3	46.6	-9.3	62	67.7	58.1	**9.6**
Toledo VOA	510	44.7	30.6	**14.1**	22	36.4	9.1	**27.3**	286	34.3	27.3	**7.0**	202	60.4	37.6	**22.8**
ALL PROGRAMS	*12180*	**36.2**	**35.6**	**0.6**	*1218*	**12.8**	**19**	-6.2	*8040*	**34.9**	**35**	-0.1	*2922*	**54.9**	**50.9**	**4.0**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

HWH treatment effects for new felony conviction. Here, there is essentially a null effect when the overall failure rate of the control group is compared to HWH participants (36.2% versus 35.6%). However, the majority of the programs (21 out of 37) still showed positive results relative to the matched comparison cases. Additionally, when examined by risk, the risk group does produce an overall treatment effect.

Table 25 compares the rates of *new incarceration* for *all HWH participants.* Like with the CBCF groups, there are few positive treatment results for HWH programs. Overall, only three programs showed improvement over matched comparison cases, and the average failure rate was substantially higher for HWH cases (38.8%) than comparison cases (30.0%). Interestingly, like with CBCFs, more programs appeared effective with low risk offenders (6) than either the moderate (4) or high risk (4) group for decreasing rates of new incarceration[46].

HWH Outcomes for Successful Completers Only

As expected, HWH results presented in the next three tables for successful completers only are much more favorable for the HWHs. Table 26 examines the mean rate of *new felony convictions* for *successful completers only* and their matched parolee cases. The difference in the overall rate of recidivism favors the treatment group (22.1% versus 27.9%). Likewise, just 9 programs showed a negative treatment effect, irrespective of risk. When broken down by risk, both the number of programs producing positive effects and the average treatment effect for all facilities becomes increasingly higher with each risk category. For offenders classified as high risk, 25 of the programs demonstrated a substantial treatment effect, with an average reduction in new felony convictions of 14.1 percent across programs. Favorable results continue when *any new conviction* is used as the outcome measure. Table 27 again depicts a positive overall

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[46] This could also be a function of the small low risk sample sizes for many of the programs, creating drastic changes in the percentages for slight changes in the number of offenders failing.

Table 25: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
AH Alum Creek	*484*	28.1	36.4	-8.3	*38*	0.0	31.6	-31.6	*310*	24.5	33.5	-9.0	*136*	44.1	44.1	0.0
AH Dunning	*134*	22.4	28.4	-6.0	*38*	5.3	5.3	0.0	*66*	27.3	39.4	-12.1	*30*	33.3	33.3	0.0
AH Price	*174*	32.2	44.8	-12.6	*16*	12.5	12.5	0.0	*100*	30.0	48.0	-18.0	*58*	41.4	48.3	-6.9
AH Veterans	*138*	30.4	40.6	-10.2	*12*	16.7	0.0	**16.7**	*98*	32.7	38.8	-6.1	*28*	28.6	64.3	-35.7
Alternatives	*848*	33.0	40.6	-7.6	*106*	18.9	26.4	-7.5	*570*	31.6	36.1	-4.5	*172*	46.5	64.0	-17.5
ARCA	*158*	22.8	24.1	-1.3	*32*	6.3	0.0	**6.3**	*98*	18.4	22.4	-4.0	*28*	57.1	57.1	0.0
Booth H/Salv A	*138*	40.6	40.6	0.0	*8*	0.0	0.0	0.0	*106*	43.4	41.5	**1.9**	*24*	41.7	50.0	-8.3
CATS female RTP	*122*	24.6	19.7	**4.9**	*24*	8.3	8.3	0.0	*82*	24.4	17.1	**7.3**	*16*	50.0	50.0	0.0
CATS male RTP	*248*	31.5	47.6	-16.1	*10*	0.0	20.0	-20.0	*154*	31.2	41.6	-10.4	*84*	35.7	61.9	-26.2
CATS male TC	*144*	31.9	34.7	-2.8	*4*	50.0	0.0	**50.0**	*102*	29.4	33.3	-3.9	*38*	36.8	42.1	-5.3
CCA RTC I	*146*	26.0	42.5	-16.5	*22*	9.1	9.1	0.0	*100*	24.0	48.0	-24.0	*24*	50.0	50.0	0.0
CCA RTC II	*290*	29.0	37.9	-8.9	*44*	0.0	36.4	-36.4	*198*	33.3	35.4	-2.1	*48*	37.5	50.0	-12.5
Cinti VOA D/A	*346*	37.0	43.9	-6.9	*12*	16.7	16.7	0.0	*230*	30.4	38.3	-7.9	*104*	53.8	59.6	-5.8
Cinti VOA SOT	*152*	27.6	38.2	-10.6	*36*	5.6	27.8	-22.2	*108*	35.2	38.9	-3.7	*8*	25.0	75.0	-50.0
Comm Trans Ctr	*322*	31.1	35.4	-4.3	*26*	15.4	15.4	0.0	*212*	22.6	34.0	-11.4	*84*	57.1	45.2	**11.9**
CompDrug	*532*	30.5	39.5	-9.0	*42*	14.3	19.0	-4.7	*326*	26.4	35.0	-8.6	*164*	42.7	53.7	-11.0
Crossroads	*270*	28.1	46.7	-18.6	*16*	12.5	12.5	0.0	*202*	25.7	45.5	-19.8	*52*	42.3	61.5	-19.2
CTCC Canton	*384*	32.3	50.0	-17.7	*50*	12.0	24.0	-12.0	*238*	32.8	52.1	-19.3	*96*	41.7	58.3	-16.6
Dayton VOA	*436*	33.5	39.4	-5.9	*38*	10.5	10.5	0.0	*300*	32.7	37.3	-4.6	*98*	44.9	57.1	-12.2
Diversified	*280*	30.7	42.1	-11.4	*6*	33.3	33.3	0.0	*150*	21.3	33.3	-12.0	*124*	41.9	53.2	-11.3
Fresh Start	*362*	37.0	37.0	0.0	*14*	0.0	14.3	-14.3	*258*	34.1	34.1	0.0	*90*	51.1	48.9	**2.2**
Harbor Light--Corr	*796*	26.9	48.0	-21.1	*80*	10.0	22.5	-12.5	*544*	26.5	44.9	-18.4	*172*	36.0	69.8	-33.8
Harbor Light--D/A	*148*	37.8	28.4	**9.4**	*4*	0.0	50.0	-50.0	*122*	36.1	23.0	**13.1**	*22*	54.5	54.5	0.0
Mansfield VOA	*204*	19.6	41.2	-21.6	*32*	12.5	25.0	-12.5	*144*	19.4	38.9	-19.5	*28*	28.6	71.4	-42.8
Oriana CCTC	*548*	32.8	47.1	-14.5	*44*	4.5	31.8	-27.3	*330*	34.5	43.0	-8.5	*174*	36.8	58.6	-21.8
Oriana RCC	*206*	21.4	28.2	-6.8	*56*	10.7	17.9	-7.2	*118*	27.1	30.5	-3.4	*32*	18.8	37.5	-18.7
Oriana RIP	*544*	32.7	48.5	-15.8	*42*	14.3	19.0	-4.7	*360*	28.3	43.3	-15.0	*142*	49.3	70.4	-21.1
Oriana TMRC	*594*	26.3	46.8	-20.5	*64*	12.5	34.4	-21.9	*416*	24.0	43.8	-19.8	*114*	42.1	64.9	-22.8
Pathfinder	*334*	21.0	41.9	-20.9	*46*	4.3	26.1	-21.8	*234*	20.5	44.4	-23.9	*54*	37.0	44.4	-7.4
Small Programs	*534*	34.1	41.9	-7.8	*58*	17.2	20.7	-3.5	*332*	33.7	42.2	-8.5	*144*	41.7	50.0	-8.3

Table 25 Con't: Mean Recidivism Rates for the HWH Sample by Risk--All Participants--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
SOS	*260*	29.2	36.9	-7.7	*10*	0.0	40.0	-40.0	*180*	20	28.9	-8.9	*70*	57.1	57.1	0.0
TH Beekman	*270*	32.6	51.9	-19.3	*16*	25.0	25.0	0.0	*170*	32.9	44.7	-11.8	*84*	33.3	71.4	-38.1
TH Cornerstone	*152*	35.5	23.7	**11.8**	*20*	40.0	10.0	**30.0**	*98*	30.6	22.4	**8.2**	*34*	47.1	35.3	**11.8**
TH Pathways	*172*	21.8	23.0	-1.2	*62*	12.9	9.7	**3.2**	*100*	24.0	24.0	0.0	*10*	60.0	80.0	-20.0
TH Springrove	*468*	29.1	34.6	-5.5	*34*	0.0	11.8	-11.8	*362*	29.3	30.9	-1.6	*72*	41.7	63.9	-22.2
TH Turtle Creek	*332*	32.5	38.6	-6.1	*34*	5.9	23.5	-17.6	*236*	29.7	38.1	-8.4	*62*	58.1	48.4	**9.7**
Toledo VOA	*510*	34.1	44.3	-10.2	*22*	18.2	9.1	**9.1**	*286*	30.1	44.1	-14.0	*202*	41.6	48.5	-6.9
ALL PROGRAMS	***12180***	**30.0**	**38.8**	-8.8	***1218***	**11**	**20**	-9	***8040***	**28.7**	**38.3**	-9.6	***2922***	**43.1**	**55.9**	-12.8

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 26: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
AH Alum Creek	228	34.2	18.4	**15.8**	26	0.0	15.4	-15.4	162	33.3	21.0	**12.3**	40	60.0	10.0	**50.0**
AH Dunning	80	17.5	17.5	0.0	30	6.7	0.0	**6.7**	28	7.1	21.4	-14.3	22	45.5	36.4	**9.1**
AH Price	100	42.0	32.0	**10.0**	12	16.7	0.0	**16.7**	54	37.0	40.7	-3.7	34	58.8	29.4	**29.4**
AH Veterans	90	28.9	28.9	0.0	12	16.7	0.0	**16.7**	66	30.3	27.3	**3.0**	12	33.3	66.7	-33.4
Alternatives	492	31.0	23.6	**7.4**	72	8.3	22.2	-13.9	354	33.5	22.0	**11.5**	66	42.4	33.3	**9.1**
ARCA	90	15.6	17.8	-2.2	24	8.3	0.0	**8.3**	52	15.4	23.1	-7.7	14	28.6	28.6	0.0
Booth H/Salv A	68	38.2	26.5	**11.7**	8	0.0	0.0	0.0	52	42.3	26.9	**15.4**	8	50.0	50.0	0.0
CATS female RTP	106	15.1	9.4	**5.7**	22	9.1	0.0	**9.1**	70	11.4	11.4	0.0	14	42.9	14.3	**28.6**
CATS male RTP	144	33.3	27.8	**5.5**	10	20.0	40.0	-20.0	100	34.0	24.0	**10.0**	34	35.3	35.3	0.0
CATS male TC	120	35.0	23.3	**11.7**	4	50.0	0.0	**50.0**	90	31.1	22.2	**8.9**	26	46.2	30.8	**15.4**
CCA RTC I	108	14.8	5.6	**9.2**	22	0.0	0.0	0.0	72	11.1	8.3	**2.8**	14	57.1	0.0	**57.1**
CCA RTC II	226	31.9	15.0	**16.9**	44	4.5	4.5	0.0	142	35.2	11.3	**23.9**	40	50.0	40.0	**10.0**
Cinti VOA D/A	78	25.6	20.5	**5.1**	10	20.0	20.0	0.0	58	20.7	17.2	**3.5**	10	60.0	40.0	**20.0**
Cinti VOA SOT	58	20.7	24.1	-3.4	24	16.7	33.3	-16.6	34	23.5	17.6	**5.9**	N/A	N/A	N/A	N/A
Comm Trans Ctr	226	24.8	27.4	-2.6	22	9.1	9.1	0.0	152	19.7	25.0	-5.3	52	46.2	42.3	**3.9**
CompDrug	232	26.7	24.1	**2.6**	28	0.0	28.6	-28.6	156	25.6	19.2	**6.4**	48	45.8	37.5	**8.3**
Crossroads	162	21.0	30.9	-9.9	16	12.5	12.5	0.0	126	19.0	31.7	-12.7	20	40.0	40.0	0.0
CTCC Canton	196	21.4	29.6	-8.2	40	5.0	15.0	-10.0	120	20.0	26.7	-6.7	36	44.4	55.6	-11.2
Dayton VOA	120	21.7	13.3	**8.4**	22	18.2	0.0	**18.2**	86	20.9	16.3	**4.6**	12	33.3	16.7	**16.6**
Diversified	136	35.3	29.4	**5.9**	4	0.0	0.0	0.0	76	34.2	21.1	**13.1**	56	39.3	42.9	-3.6
Fresh Start	228	36.8	19.3	**17.5**	12	0.0	0.0	0.0	164	35.4	15.9	**19.5**	52	50.0	34.6	**15.4**
Harbor Light--Corr	378	33.3	19.0	**14.3**	56	7.1	21.4	-14.3	274	35.8	16.1	**19.7**	48	50.0	33.3	**16.7**
Harbor Light--D/A	128	32.8	20.3	**12.5**	4	0.0	50.0	-50.0	108	33.3	18.5	**14.8**	16	37.5	25.0	**12.5**
Mansfield VOA	70	22.9	14.3	**8.6**	22	9.1	0.0	**9.1**	44	22.7	18.2	**4.5**	4	100.0	50.0	**50.0**
Oriana CCTC	298	31.5	32.9	-1.4	38	5.3	26.3	-21.0	196	33.7	30.6	**3.1**	64	40.6	43.8	-3.2
Oriana RCC	146	19.2	15.1	**4.1**	46	13.0	4.3	**8.7**	80	17.5	20.0	-2.5	20	40.0	20.0	**20.0**
Oriana RIP	264	32.6	27.3	**5.3**	32	0.0	25.0	-25.0	186	33.3	25.8	**7.5**	46	52.2	34.8	**17.4**
Oriana TMRC	326	24.5	19.6	**4.9**	50	8.0	16.0	-8.0	236	26.3	20.3	**6.0**	40	35.0	20.0	**15.0**
Pathfinder	170	21.2	17.6	**3.6**	28	0.0	7.1	-7.1	120	20.0	20.0	0.0	22	54.5	18.2	**36.3**
Small Programs	248	21.8	18.5	**3.3**	44	22.7	4.5	**18.2**	154	15.6	19.5	-3.9	50	40.0	28.0	**12.0**

Table 26 Con't: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by New Felony Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
SOS	140	24.3	31.4	-7.1	6	0.0	0.0	0.0	108	16.7	31.5	-14.8	26	61.5	38.5	**23.0**
TH Beekman	136	27.9	30.9	-3.0	12	33.3	0.0	**33.3**	98	28.6	30.6	-2.0	26	23.1	46.2	-23.1
TH Cornerstone	112	33.9	21.4	**12.5**	20	20.0	10.0	**10.0**	76	31.6	26.3	**5.3**	16	62.5	12.5	**50.0**
TH Pathways	112	14.3	1.8	**12.5**	48	4.2	0.0	**4.2**	64	21.9	3.1	**18.8**	N/A	N/A	N/A	N/A
TH Springrove	260	23.8	24.6	-0.8	26	0.0	7.7	-7.7	212	25.5	24.5	**1.0**	22	36.4	45.5	-9.1
TH Turtle Creek	238	25.2	25.2	0.0	34	0.0	17.6	-17.6	168	23.8	27.4	-3.6	36	55.6	22.2	**33.4**
Toledo VOA	266	38.3	15.0	**23.3**	22	27.3	9.1	**18.2**	152	30.3	14.5	**15.8**	92	54.3	17.4	**36.9**
ALL PROGRAMS	**6580**	**27.9**	**22.1**	**5.8**	**952**	**8.6**	**11.8**	**-3.2**	**4490**	**27.5**	**21.7**	**5.8**	**1138**	**46.4**	**32.3**	**14.1**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Table 27: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
AH Alum Creek	228	37.7	26.3	11.4	26	0.0	15.4	-15.4	162	37.0	25.9	11.1	40	65.0	35.0	30.0
AH Dunning	80	27.5	32.5	-5.0	30	20.0	6.7	13.3	28	7.1	35.7	-28.6	22	63.6	63.6	0.0
AH Price	100	52.0	42.0	10.0	12	33.3	33.3	0.0	54	48.1	48.1	0.0	34	64.7	35.3	29.4
AH Veterans	90	31.1	33.3	-2.2	12	16.7	0.0	16.7	66	33.3	33.3	0.0	12	33.3	66.7	-33.4
Alternatives	492	36.2	26.8	9.4	72	8.3	22.2	-13.9	354	38.4	26.0	12.4	66	54.5	36.4	18.1
ARCA	90	20.0	20.0	0.0	24	8.3	0.0	8.3	52	19.2	26.9	-7.7	14	42.9	28.6	14.3
Booth H/Salv A	68	44.1	29.4	14.7	8	0.0	0.0	0.0	52	50.0	30.8	19.2	8	50.0	50.0	0.0
CATS female RTP	106	22.6	11.3	11.3	22	9.1	0.0	9.1	70	20.0	14.3	5.7	14	57.1	14.3	42.8
CATS male RTP	144	37.5	29.2	8.3	10	20.0	40	-20.0	100	38.0	26.0	12.0	34	41.2	35.3	5.9
CATS male TC	120	45.0	28.3	16.7	4	50.0	0.0	50.0	90	40.0	26.7	13.3	26	61.5	38.5	23.0
CCA RTC I	108	24.1	7.4	16.7	22	9.1	0.0	9.1	72	19.4	11.1	8.3	14	71.4	0.0	71.4
CCA RTC II	226	38.9	23.9	15.0	44	9.1	18.2	-9.1	142	45.1	19.7	25.4	40	50.0	45.0	5.0
Cinti VOA D/A	78	41.0	35.9	5.1	10	20.0	60.0	-40.0	58	41.4	24.1	17.3	10	60.0	80.0	-20.0
Cinti VOA SOT	58	24.1	31.0	-6.9	24	16.7	41.7	-25.0	34	29.4	23.5	5.9	N/A	N/A	N/A	N/A
Comm Trans Ctr	226	31.0	38.1	-7.1	22	9.1	27.3	-18.2	152	25.0	35.5	-10.5	52	57.7	50.0	7.7
CompDrug	232	37.9	31.9	6.0	28	0.0	35.7	-35.7	156	41.0	26.9	14.1	48	50.0	45.8	4.2
Crossroads	162	28.4	35.8	-7.4	16	37.5	37.5	0.0	126	22.2	34.9	-12.7	20	60.0	40.0	20.0
CTCC Canton	196	32.7	39.8	-7.1	40	15.0	20.0	-5.0	120	31.7	36.7	-5.0	36	55.6	72.2	-16.6
Dayton VOA	120	33.3	20.0	13.3	22	18.2	9.1	9.1	86	30.2	23.3	6.9	12	83.3	16.7	66.6
Diversified	136	41.2	36.8	4.4	4	0.0	0.0	0.0	76	36.8	28.9	7.9	56	50.0	50.0	0.0
Fresh Start	228	40.4	21.9	18.5	12	0.0	0.0	0.0	164	37.8	19.5	18.3	52	57.7	34.6	23.1
Harbor Light--Corr	378	39.2	20.6	18.6	56	10.7	21.4	-10.7	274	42.3	17.5	24.8	48	54.2	37.5	16.7
Harbor Light--D/A	128	42.2	31.3	10.9	4	0.0	50.0	-50.0	108	44.4	31.5	12.9	16	37.5	25.0	12.5
Mansfield VOA	70	31.4	14.3	17.1	22	9.1	0.0	9.1	44	36.4	18.2	18.2	4	100.0	50.0	50.0
Oriana CCTC	298	40.3	38.9	1.4	38	10.5	26.3	-15.8	196	38.8	36.7	2.1	64	62.5	53.1	9.4
Oriana RCC	146	27.4	21.9	5.5	46	21.7	13.0	8.7	80	27.5	20.0	7.5	20	40.0	50.0	-10.0
Oriana RIP	264	37.9	35.6	2.3	32	0.0	25.0	-25	186	39.8	36.6	3.2	46	56.5	39.1	17.4
Oriana TMRC	326	37.4	30.1	7.3	50	12.0	16.0	-4.0	236	39.8	33.1	6.7	40	55.0	30.0	25.0
Pathfinder	170	24.4	22.1	2.3	28	0.0	7.1	-7.1	120	25.0	25.0	0.0	22	54.5	27.3	27.2
Small Programs	248	27.4	25.0	2.4	44	22.7	9.1	13.6	154	23.4	24.7	-1.3	50	44.0	40.0	4.0

Table 27 Con't: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by Any New Conviction

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
SOS	140	31.4	50.0	-18.6	6	0.0	33.3	-33.3	108	25.9	48.1	-22.2	26	61.5	61.5	0.0
TH Beekman	136	36.8	39.7	-2.9	12	33.3	16.7	**16.6**	98	30.6	38.8	-8.2	26	61.5	53.8	**7.7**
TH Cornerstone	112	42.9	28.6	**14.3**	20	40.0	20.0	**20.0**	76	36.8	28.9	**7.9**	16	75.0	37.5	**37.5**
TH Pathways	112	16.1	10.7	**5.4**	48	8.3	8.3	0.0	64	21.9	12.5	**9.4**	N/A	N/A	N/A	N/A
TH Springrove	260	30.0	32.3	-2.3	26	0.0	7.7	-7.7	212	32.1	32.1	0.0	22	45.5	63.6	-18.1
TH Turtle Creek	238	35.3	42.0	-6.7	34	0.0	35.3	-35.3	168	36.9	40.5	-3.6	36	61.1	55.6	**5.5**
Toledo VOA	266	45.9	23.3	**22.6**	22	36.4	9.1	**27.3**	152	34.2	23.7	**10.5**	92	67.4	26.1	**41.3**
ALL PROGRAMS	**6580**	**35.3**	**29.5**	**5.8**	**952**	**12.4**	**17.4**	**-5.0**	**4490**	**34.7**	**28.6**	**6.1**	**1138**	**56.6**	**42.0**	**14.6**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

treatment effect for HWHs, regardless of risk breakdown (5.8% difference). Furthermore, nearly

three quarters of programs produced positive treatment effects for both moderate and high risk

offenders.

Finally, Table 28 examines rates of *new incarceration* for *successful HWH completers.*

Unlike when all HWH participants were examined, successful completers generally fared better

then matched comparison cases with respect to new incarcerations. An overall treatment effect

of 5.5 percent was produced, with just 8 programs increasing the likelihood of a new

incarceration. The risk principle is again apparent with the comparison group outperforming the

treatment group with a low risk population (-2.1% difference), but the treatment group again

producing lower average recidivism rates for both moderate (5.8%) and high (10.4%) risk

offenders.

Halfway House Outcome by Referral Type

The following analyses explore recidivism rates by HWH referral type. Like with the

other outcome analyses, three measures of recidivism were examined (new felony conviction,

any conviction and new incarceration). Likewise, data were examined by risk category. Cross-

tabulations were used to examine the difference between the treatment cases and matched

comparison cases relative to the referral type.[47] Five referral categories were examined: 1)

Condition of Probation; 2) Violation of Probation; 3) Condition of Parole/PRC; 4) Violation of

Parole/PRC; 5) Transitional Control; and 6) Other.   Figure 9 shows that the majority of referrals

to HWH come from Transitional Control (35%) followed by Condition of Parole/PRC (23.4%).

Another 12 percent of referrals are specific to parole/PRC violations. Approximately 17 percent

of referrals are classified as Condition of Probation, with another 10 percent related to a

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[47] The same matched comparison cases were used for these analyses as with all other analyses (see footnote 6 for more detailed explanation).

probation violation. The Other category (2.6%) consists of judicial releases, boot camp, treatment in lieu of conviction and readmissions.

Table 29 presents the mean recidivism rates for all HWH participants by referral type and risk; Table 30 presents the same data, but on successful completers only. Average recidivism scores for the treatment and matched comparison group are presented, along with differences in rates of recidivism. Like the other outcome tables, findings favoring the treatment group are positive numbers that are bolded and highlighted in the difference column. Mean recidivism scores for all HWH facilities by recidivism measure and risk are also included in the tables for comparison purposes. The sample size (N) is comprised of both the treatment and comparison cases.

Findings from Table 29 suggest that for all participants, effects increase with increase in risk. High risk Transitional Control offenders showed substantial effects relative to comparison cases when placed in a HWH. High risk offenders placed due to a violation of probation also showed significant decreases in reoffending across recidivism measures. Offender referred due to a condition of Parole/PRC generally showed slight effects for moderate and high risk offenders. However, offenders referred for violation of parole/PRC showed negative effects across recidivism measures. Some effects were seen for moderate and high risk offenders referred for a probation violation.

Table 28: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
AH Alum Creek	228	19.3	18.4	0.9	26	0.0	15.4	-15.4	162	18.5	19.8	-1.3	40	35	15	20
AH Dunning	80	20.0	15.0	5.0	30	6.7	0.0	6.7	28	21.4	21.4	0	22	36.4	27.3	9.1
AH Price	100	34.0	32.0	2.0	12	16.7	0.0	16.7	54	25.9	37	-11.1	34	52.9	35.3	17.6
AH Veterans	90	28.9	31.1	-2.2	12	16.7	0.0	16.7	66	30.3	30.3	0	12	33.3	66.7	-33.4
Alternatives	492	30.1	17.9	12.2	72	13.9	11.1	2.8	354	27.7	15.3	12.4	66	60.6	39.4	21.2
ARCA	90	20.0	17.8	2.2	24	8.3	0.0	8.3	52	15.4	19.2	-3.8	14	57.1	42.9	14.2
Booth H/Salv A	68	32.4	29.4	3.0	8	0.0	0.0	0	52	38.5	30.8	7.7	8	25	50	-25
CATS female RTP	106	22.6	17.0	5.6	22	9.1	9.1	0	70	22.9	14.3	8.6	14	42.9	42.9	0
CATS male RTP	144	31.9	33.3	-1.4	10	0.0	20.0	-20	100	36	32	4	34	29.4	41.2	-11.8
CATS male TC	120	28.3	33.3	-5.0	4	50.0	0.0	50	90	26.7	33.3	-6.6	26	30.8	38.5	-7.7
CCA RTC I	108	29.6	27.8	1.8	22	9.1	9.1	0	72	27.8	33.3	-5.5	14	71.4	28.6	42.8
CCA RTC II	226	24.8	24.8	0.0	44	0.0	36.4	-36.4	142	29.6	15.5	14.1	40	35	45	-10
Cinti VOA D/A	78	28.2	20.5	7.7	10	20.0	0.0	20	58	27.6	20.7	6.9	10	40	40	0
Cinti VOA SOT	58	31.0	24.1	6.9	24	8.3	25	-16.7	34	47.1	23.5	23.6	N/A	N/A	N/A	N/A
Comm Trans Ctr	226	29.2	27.4	1.8	22	9.1	9.1	0	152	23.7	25	-1.3	52	53.8	42.3	11.5
CompDrug	232	31.9	20.7	11.2	28	14.3	14.3	0	156	28.2	19.2	9	48	54.2	29.2	25
Crossroads	162	25.9	37.0	-11.1	16	12.5	12.5	0	126	23.8	38.1	-14.3	20	50	50	0
CTCC Canton	196	25.5	24.5	1.0	40	15.0	10.0	5	120	25	25	0	36	38.9	38.9	0
Dayton VOA	120	31.7	15.0	16.7	22	9.1	0.0	9.1	86	32.6	16.3	16.3	12	66.7	33.3	33.4
Diversified	136	33.8	38.2	-4.4	4	0.0	0.0	0	76	23.7	26.3	-2.6	56	50	57.1	-7.1
Fresh Start	228	31.6	29.8	1.8	12	0.0	16.7	-16.7	164	29.3	29.3	0	52	46.2	34.6	11.6
Harbor Light--Corr	378	29.1	20.1	9.0	56	10.7	3.6	7.1	274	31.4	19	12.4	48	37.5	45.8	-8.3
Harbor Light--D/A	128	37.5	25.0	12.5	4	0.0	50.0	-50	108	35.2	22.2	13	16	62.5	37.5	25
Mansfield VOA	70	17.1	14.3	2.8	22	9.1	0.0	9.1	44	18.2	18.2	0	4	50	50	0
Oriana CCTC	298	36.0	23.3	12.7	38	5.3	21.1	-15.8	196	38.8	20.4	18.4	64	46.9	34.4	12.5
Oriana RCC	146	20.5	21.9	-1.4	46	13.0	17.4	-4.4	80	22.5	25	-2.5	20	30	20	10
Oriana RIP	264	32.6	30.3	2.3	32	12.5	12.5	0	186	31.2	29	2.2	46	52.2	47.8	4.4
Oriana TMRC	326	25.8	21.5	4.3	50	16.0	28.0	-12	236	24.6	18.6	6	40	45	30	15
Pathfinder	170	24.4	16.3	8.2	28	0.0	7.1	-7.1	120	23.3	20	3.3	22	63.6	9.1	54.5
Small Programs	248	36.3	29.0	7.3	44	18.2	18.2	0	154	36.4	31.2	5.2	50	52	32	20

103

Table 28 Con't: Mean Recidivism Rates for the HWH Sample by Risk--Successful Completers--Measured by New Incarceration

PROGRAMS	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
SOS	140	22.9	25.7	-2.8	6	0.0	33.3	-33.3	108	16.7	20.4	-3.7	26	53.8	46.2	**7.6**
TH Beekman	136	29.4	32.4	-3.0	12	33.3	16.7	**16.6**	98	26.5	28.6	-2.1	26	38.5	53.8	-15.3
TH Cornerstone	112	32.1	19.6	**12.5**	20	40.0	10.0	**30.0**	76	28.9	21.1	**7.8**	16	37.5	25.0	**12.5**
TH Pathways	112	12.5	10.7	**1.8**	48	8.3	8.3	0.0	64	15.6	12.5	**3.1**	N/A	N/A	N/A	N/A
TH Springrove	260	30.8	19.2	**11.6**	26	0.0	15.4	-15.4	212	32.1	16.0	**16.1**	22	54.5	54.5	0.0
TH Turtle Creek	238	30.3	23.5	**6.8**	34	5.9	23.5	-17.6	168	31.0	22.6	**8.4**	36	50.0	22.2	**27.8**
Toledo VOA	266	33.1	16.5	**16.6**	22	18.2	9.1	**9.1**	152	30.3	17.1	**13.2**	92	41.3	17.4	**23.9**
ALL PROGRAMS	6580	28.9	23.4	**5.5**	952	10.7	12.8	-2.1	4490	28.2	22.4	**5.8**	1138	46.6	36.2	**10.4**

*N represents the overall sample size for each program (including treatment and comparison cases) and sample size by risk level. Based upon the matching process, the overall sample size is equally divided between the treatment and comparison groups.

**Bolded positive differences indicate programs that showed a reduction in recidivism.

Figure 9: Reason for Referral to HWH Programs
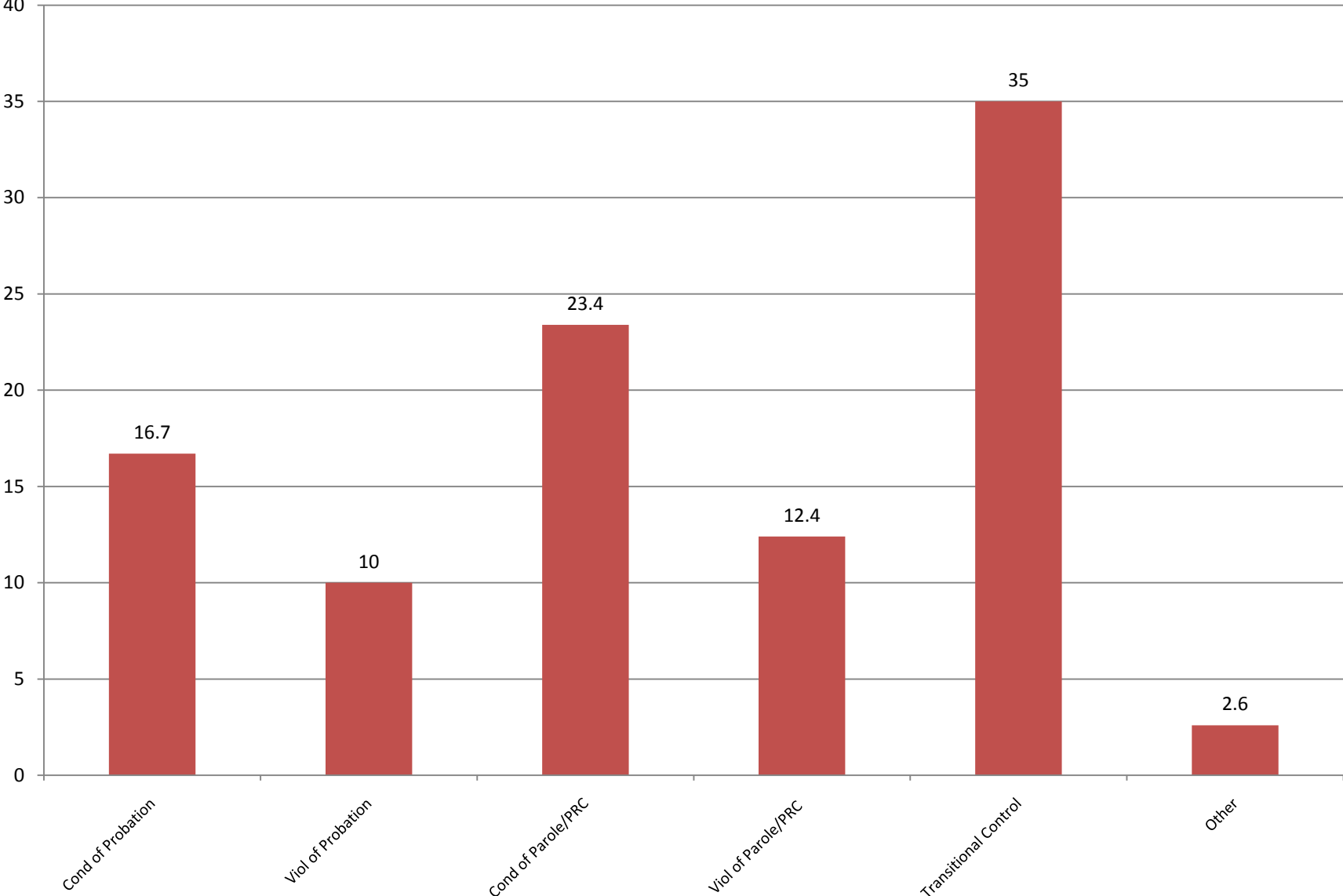
Like with the other outcome findings, offender performance improved greatly when only successful treatment completers were examined (Table 30). Likewise, the risk principle is again evident in that treatment effects are much higher for moderate and high risk offenders. For all levels of risk, only offenders referred for a parole/PRC violation showed a negative treatment effect, regardless of recidivism measure. For both categories of conviction data, offenders referred as a condition of parole/PRC or as Transitional Control clients showed larger treatment effects than other categories. Generally, referrals based upon a condition of probation or violation of probation also showed modest treatment effects, particularly for high risk offenders. For offenders referred for a violation of parole/PRC, only the high risk population showed a treatment effect. While the magnitude of the treatment effect varied with referral type, most types of referrals benefited from HWH intervention, so long as offenders referred were moderate to high risk.

Table 29: Mean Recidivism Rates for All HWH Participants by Referral Type and Risk

Recidivism Measure/Referral Type	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff	N	C	TX	Diff
New Felony Conviction																
Condition of Probation	2040	28.4	28.5	-0.1	210	13.3	12.4	0.9	1456	26.4	26.5	-0.1	374	44.4	45.5	-1.1
Violation of Probation	1214	30.3	28.7	1.6	102	3.9	11.8	-7.9	936	27.1	26.9	0.2	176	62.5	47.7	14.8
Condition of Parole/PRC	2844	31.4	30.1	1.3	262	9.2	11.5	-2.3	1798	29.0	26.5	2.5	784	44.6	44.6	0.0
Violation of Parole/PRC	1504	31.7	34.4	-2.7	114	8.8	21.1	-12.3	898	30.1	32.7	-2.6	492	39.8	40.7	-0.9
Transitional Control	4264	30.5	27.6	2.9	480	7.9	14.2	-6.3	2720	28.1	26.7	1.4	1064	46.6	36.3	10.3
Other	314	24.2	21.7	2.5	50	12.0	16.0	-4.0	232	23.3	23.3	0.0	32	50.0	18.3	31.7
All HWH Facilities	**12180**	**30.3**	**29.1**	**1.2**	**1218**	**9.0**	**13.8**	**-4.8**	**8040**	**28.0**	**27.2**	**0.8**	**2922**	**45.7**	**40.9**	**4.8**
Any New Conviction																
Condition of Probation	2040	34.0	36.0	-2.0	210	18.1	17.1	1.0	1456	32.1	34.5	-2.4	374	50.3	52.4	-2.1
Violation of Probation	1214	36.2	36.9	-0.7	102	9.8	19.6	-9.8	936	34.0	34.6	-0.6	176	63.6	59.1	4.5
Condition of Parole/PRC	2844	38.9	38.0	0.9	262	10.7	15.3	-4.6	1798	35.5	33.8	1.7	784	56.4	55.1	1.3
Violation of Parole/PRC	1504	38.2	45.3	-7.1	114	8.8	28.1	-19.3	898	36.5	42.3	-5.8	492	48.0	54.9	-6.9
Transitional Control	4264	39.0	35.1	3.9	480	12.1	19.6	-7.5	2720	36.5	34.1	2.4	1064	57.3	44.5	12.8
Other	314	28.0	30.6	-2.6	50	24.0	20.0	4.0	232	25.9	31.0	-5.1	32	50.0	43.8	6.2
All HWH Facilities	**12180**	**37.5**	**37.2**	**0.3**	**1218**	**12.8**	**19.0**	**-6.2**	**8040**	**34.9**	**35.0**	**-0.1**	**2922**	**54.9**	**50.9**	**4.0**
New Incarceration																
Condition of Probation	2040	34.5	39.7	-5.2	210	18.1	17.1	1.0	1456	33.1	37.4	-4.3	374	56.1	61.5	-5.4
Violation of Probation	1214	33.4	38.2	-4.8	102	5.9	15.7	-9.8	936	31.0	38.2	-7.2	176	62.5	51.1	11.4
Condition of Parole/PRC	2844	28.2	38.0	-9.8	262	6.9	15.3	-8.4	1798	27.5	33.7	-6.2	784	37.0	55.1	-18.1
Violation of Parole/PRC	1504	32.4	49.3	-16.9	114	7.0	38.6	-31.6	898	29.8	45.4	-15.6	492	43.1	58.9	-15.8
Transitional Control	4264	28.9	42.3	-13.4	480	10.8	21.7	-10.9	2720	27.7	40.8	-13.1	1064	39.8	55.3	-15.5
Other	314	23.6	27.4	-3.8	50	24.0	16.0	8.0	232	20.7	27.6	-6.9	32	43.8	43.8	0.0
All HWH Facilities	**12180**	**30.4**	**40.7**	**-10.3**	**1218**	**11.0**	**20.0**	**-9.0**	**8040**	**28.7**	**38.3**	**-9.6**	**2922**	**43.1**	**55.9**	**-12.8**

Table 30: Mean Recidivism Rates for HWH Successful Completers by Referral Type and Risk

Recidivism Measure/Referral Type	ALL LEVELS				LOW				MODERATE				HIGH			
	N	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff	*N*	C	TX	Diff
New Felony Conviction																
Condition of Probation	1238	27.0	23.4	3.6	162	12.3	9.9	2.4	896	26.4	23.4	3.0	180	43.3	35.6	7.7
Violation of Probation	736	28.0	24.7	3.3	80	5.0	10.0	-5.0	582	27.1	23.7	3.4	74	59.5	48.6	10.9
Condition of Parole/PRC	1290	28.9	20.1	8.8	198	9.1	9.1	0.0	842	28.3	19.2	9.1	250	47.2	32.0	15.2
Violation of Parole/PRC	680	29.6	28.7	0.9	76	5.3	15.8	-10.5	434	28.1	29.5	-1.4	170	43.5	32.9	10.6
Transitional Control	2408	27.9	19.9	8.0	396	7.6	13.1	-5.5	1560	27.9	19.0	8.9	452	45.6	28.8	16.8
Other	228	24.6	21.1	3.5	40	15.0	15.0	0.0	176	23.9	22.7	1.2	12	66.7	16.7	50.0
All HWH Facilities	**6580**	**28.0**	**22.1**	**5.9**	**952**	**8.6**	**11.8**	-3.2	**4490**	**27.5**	**21.7**	**5.8**	**1138**	**46.4**	**32.3**	**14.1**
Any New Conviction																
Condition of Probation	1238	33.3	29.9	3.4	162	18.5	16.0	2.5	896	31.9	30.6	1.3	180	53.3	38.9	14.4
Violation of Probation	736	35.3	33.4	1.9	80	10.0	20.0	-10.0	582	35.4	31.6	3.8	74	62.2	62.2	0.0
Condition of Parole/PRC	1290	35.8	26.2	9.6	198	9.1	13.1	-4.0	842	35.9	24.7	11.2	250	56.8	41.6	15.2
Violation of Parole/PRC	680	35.2	37.8	-2.6	76	5.3	26.3	-21.0	434	33.6	37.3	-3.7	170	51.8	44.7	7.1
Transitional Control	2408	36.8	27.1	9.7	396	12.1	17.7	-5.6	1560	36.8	26.0	10.8	452	58.4	38.9	19.5
Other	228	28.1	27.2	0.9	40	25.0	20.0	5.0	176	26.1	27.3	-1.2	12	66.7	50.0	16.7
All HWH Facilities	**6580**	**35.3**	**29.3**	**6.0**	**952**	**12.4**	**17.4**	-5.0	**4490**	**34.7**	**28.6**	**6.1**	**1138**	**56.6**	**42**	**14.6**
New Incarceration																
Condition of Probation	1238	31.7	29.4	2.3	162	16.0	16.0	0.0	896	29.7	29.0	0.7	180	55.6	43.3	12.3
Violation of Probation	736	30.4	29.1	1.3	80	7.5	12.5	-5.0	582	29.6	29.2	0.4	74	62.2	45.9	16.3
Condition of Parole/PRC	1290	26.3	22.9	3.4	198	6.1	8.1	-2.0	842	28.3	22.3	6.0	250	36.0	36.8	-0.8
Violation of Parole/PRC	680	31.7	34.9	-3.2	76	5.3	26.3	-21.0	434	27.2	30.4	-3.2	170	55.3	50.6	4.7
Transitional Control	2408	28.1	16.3	11.8	396	11.1	12.1	-1.0	1560	28.1	14.5	13.6	452	42.9	26.1	16.8
Other	228	22.8	20.2	2.6	40	25.0	15.0	10.0	176	20.5	20.5	0.0	12	50.0	33.3	16.7
All HWH Facilities	**6580**	**28.9**	**23.4**	**5.5**	**952**	**10.7**	**12.8**	-2.1	**4490**	**28.2**	**22.4**	**5.8**	**1138**	**46.6**	**36.2**	**10.4**

CBCF and HWH Results Combined

Figures 10 through 25 depict the outcome results for both CBCF and HWH samples combined. Figures 10 through 17 examine the treatment effects for the CBCF/ISP sample and the full HWH group, whose comparison sample contains both ISP offenders and parolees. Figures 17 through 24 show the results for the CBCF/Parole group and full HWH sample. For the sake of brevity, results are shown for successful completers only, and are limited to two of the outcome measures: new felony conviction and new incarceration. Like with the original 2002 study, results are disaggregated by risk category. Positive treatment effects are represented by the blue bars above the mid-zero line, and negative treatment effects are indicated by red bars that fall below the mid-zero line. Also, programs with a successful completion rate that falls above 65 percent are represented by the shaded/darkened bars (whether positive or negative). This allows readers to distinguish between programs that had positive effects for a majority of offenders served.

CBCF/ISP & HWH Sample

Figures 10 through 13 present the new felony conviction data for the CBCF/ISP and HWH sample. Figure 10 examines these cases across all risk levels. The majority of programs demonstrate positive treatment effects, with effects ranging from a 12 percent difference in recidivism rates favoring the comparison group, to a 23 percent difference, favoring the treatment program. Figures 11 through 13 disaggregate these overall results by risk. With regard to low risk offenders (Figure 11), far more programs demonstrate a negative treatment effect, with effects ranging from a 50 percentage point improvement to a 50 percentage point

increase in the program's recidivism rate[48]. Figure 12 displays the effects for moderate risk

offenders, where both positive and negative treatment effects appear more modest (ranging from

-15 to 23%)[49]. When the high risk cases are examined (Figure 13), it is apparent that the

majority of programs are effective at reducing recidivism (just 9 programs increased recidivism

for high risk offenders). These figures also offer support for the risk principle.

Figures 14 through 17 examine treatment effects for the same groups, but with new

incarceration used as the outcome measure. Across all risk levels (Figure 14), most programs

were able to produce positive treatment effects, although many were modest effects. Figures 15

through 16 also show support for the risk principle. Specifically, most programs had negative

results for low risk offenders (Figure 15); however, this improves for moderate risk cases (Figure

16) where there is a fairly even split between negative or null treatment effects and positive

effects. In figure 16, which depicts the high risk cases, most programs again produce positive

treatment effects, some of which are quite sizable (nearly half of the programs with positive

effects showed between a 20 and 55 percentage point improvement over the comparison group).

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[48] Caution should be taken in interpreting extreme differences in failure rates for both the low and high risk samples, as many programs had small sample sizes in these categories, rendering the results less stable.
[49] This can be attributed, in part, to the larger sample size of this risk category, which results in more stable findings.

Figure 10: Treatment Effects Measured by New Felony Conviction for CBCF/ISP and HWH Samples—All Risk Levels
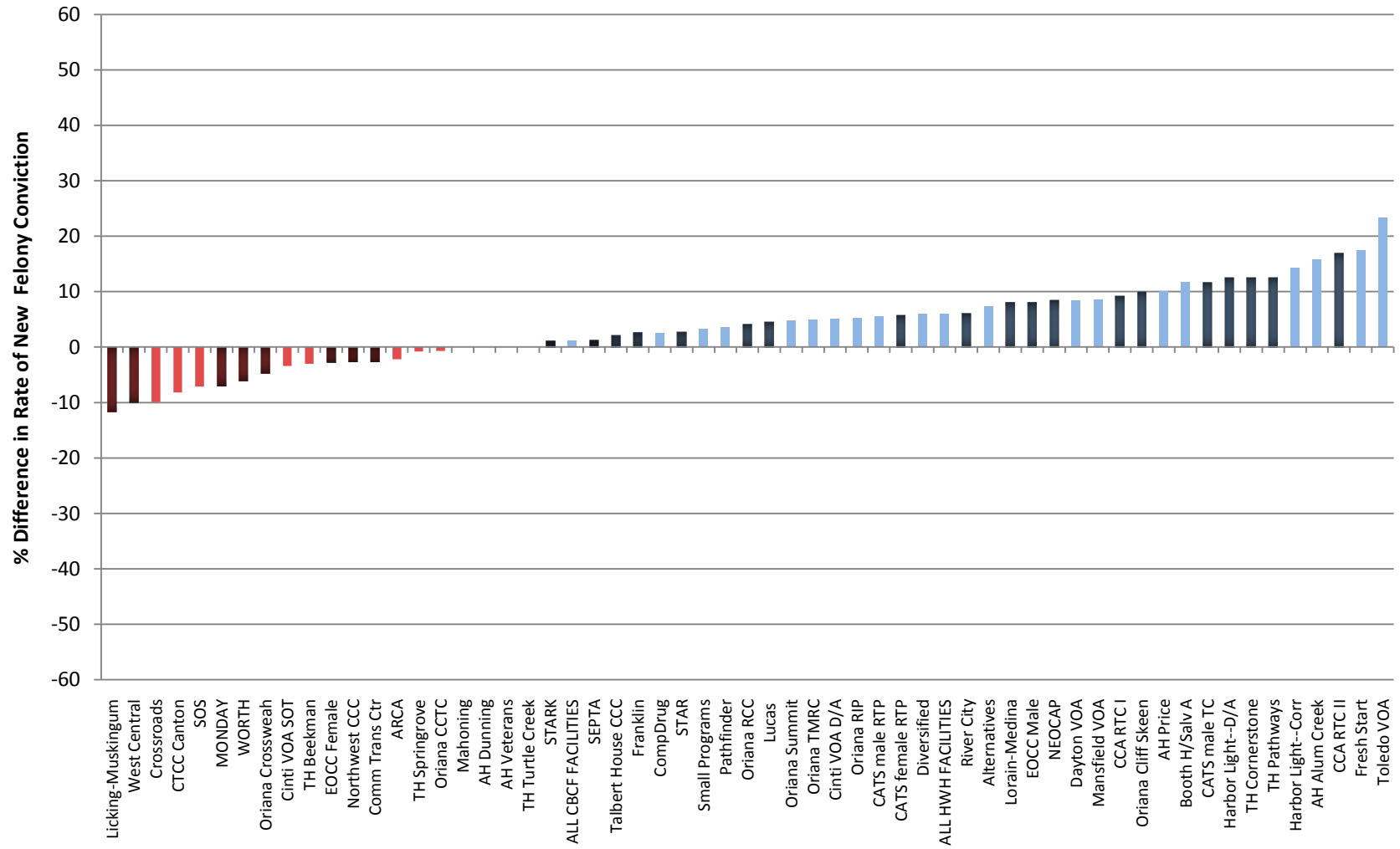
Figure 11: Treatment Effects Measured by New Felony Conviction for CBCF/ISP and HWH Samples—Low Risk
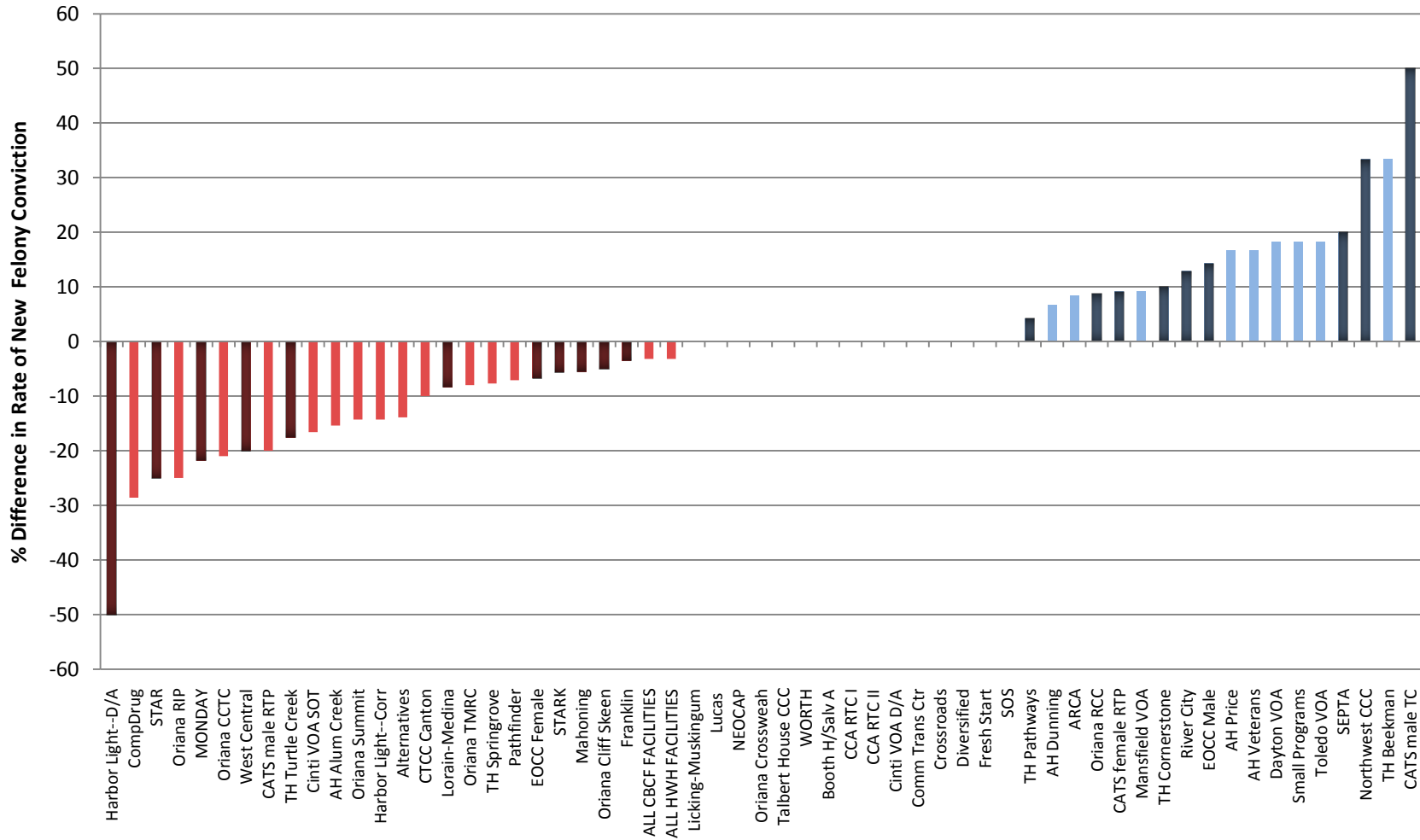
Figures 17 through 20 demonstrate the results of new felony convictions for the CBCF/Parole group and HWH sample. Similar results are seen as those described above. Figure 18 examines cases across all risk levels; the majority of programs continue to demonstrate positive treatment effects, with effects ranging from a 12 percentage point increase in recidivism to a 23 percentage point reduction in recidivism. For low risk offenders (Figure 19), most programs have either a null effect or increase the likelihood of recidivism. Figure 20 suggests improvement with a moderate risk population, with differences ranging from a 24 percentage point improvement to a 19 percentage point increase in recidivism. Finally, for high risk offenders (Figure 21), positive effects are again seen for the majority of programs, many of which are substantial (approaching a 60% difference between the treatment and comparison group failure rates).

Finally, the differences in rates of new incarceration between the CBCF/Parole group and HWH sample are depicted in Figures 22 through 25. Figure 22 shows the results across all risk levels. Here again, a nearly equal split is found between positive and negative effects by programs, with results ranging from a 20 percentage point improvement to a 22 percentage point increase in recidivism. Of note, few of the programs with positive results had a successful completion rate over 65 percent. Data from the next three tables continue to support the risk principle. Few programs demonstrate positive effects for low risk cases (Figure 23). More programs (although not the majority) have a treatment effect with moderate risk cases.

Figure 12: Treatment Effects Measured by New Felony Conviction for CBCF/ISP and HWH Samples—Moderate Risk
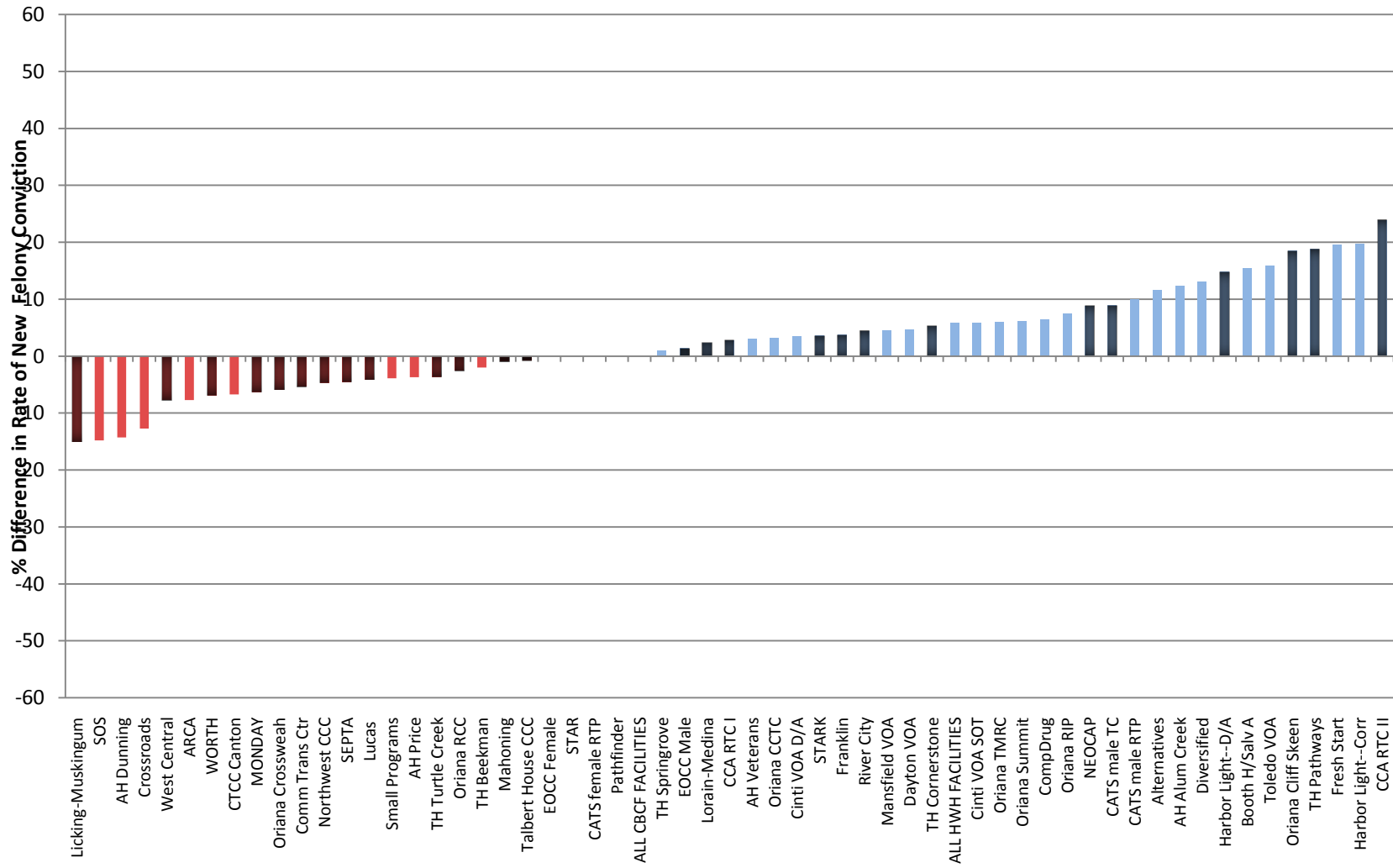
Figure 13: Treatment Effects Measured by New Felony Conviction for CBCF/ISP and HWH Samples—High Risk
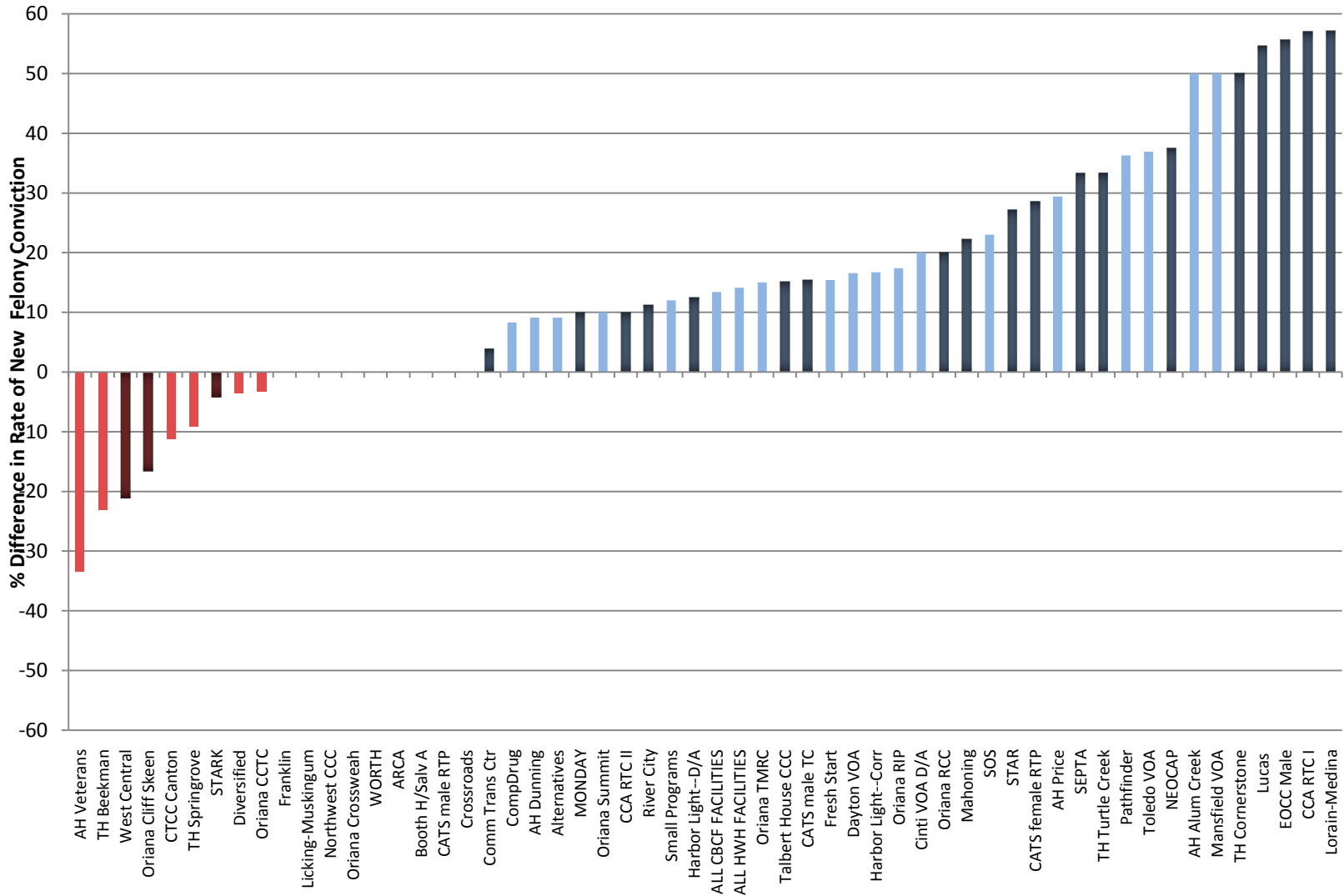
Figure 14: Treatment Effects Measured by New Incarceration for CBCF/ISP and HWH Samples—All Risk Levels
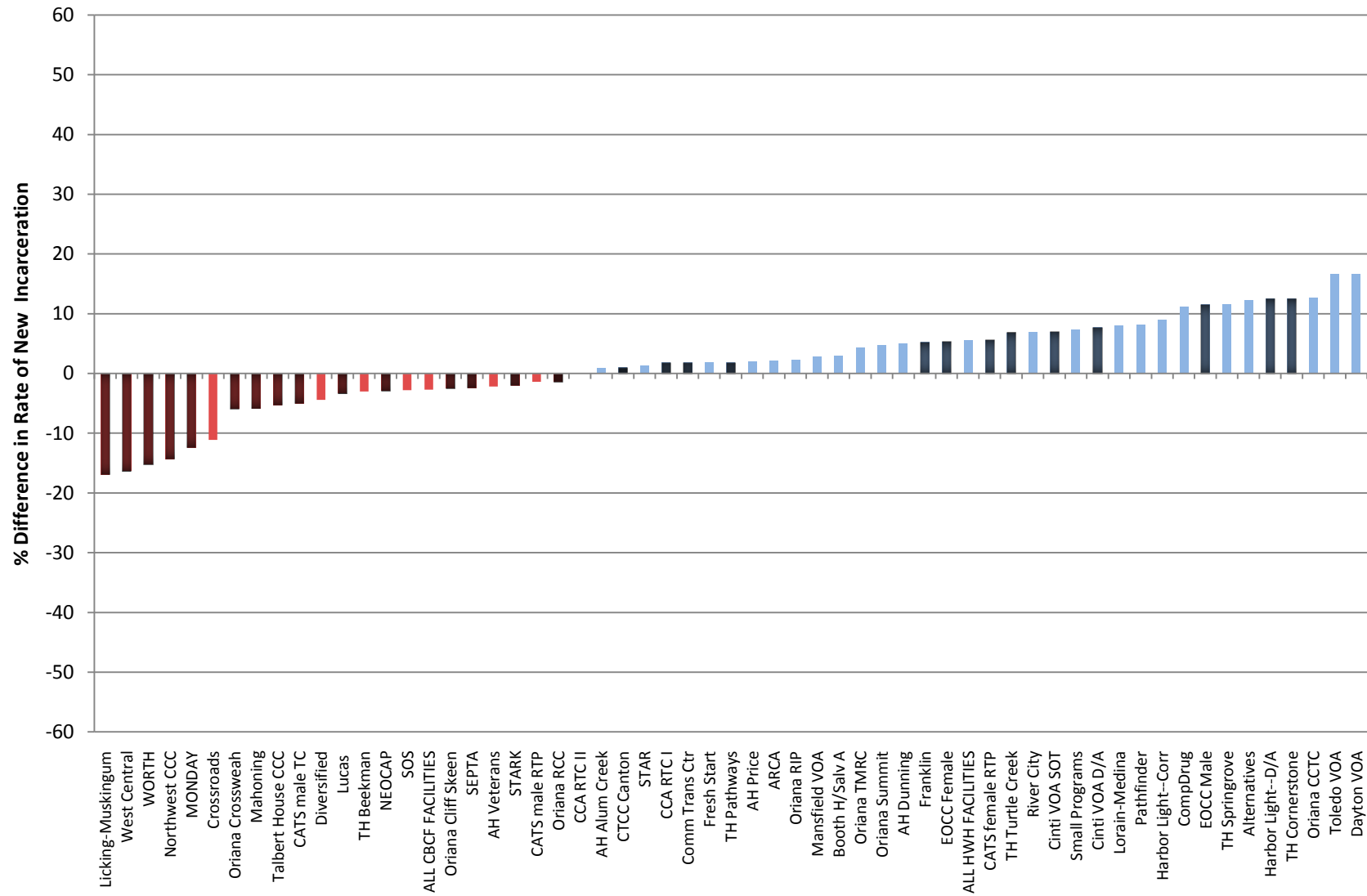
Figure 15: Treatment Effects Measured by New Incarceration for CBCF/ISP and HWH Samples—Low Risk
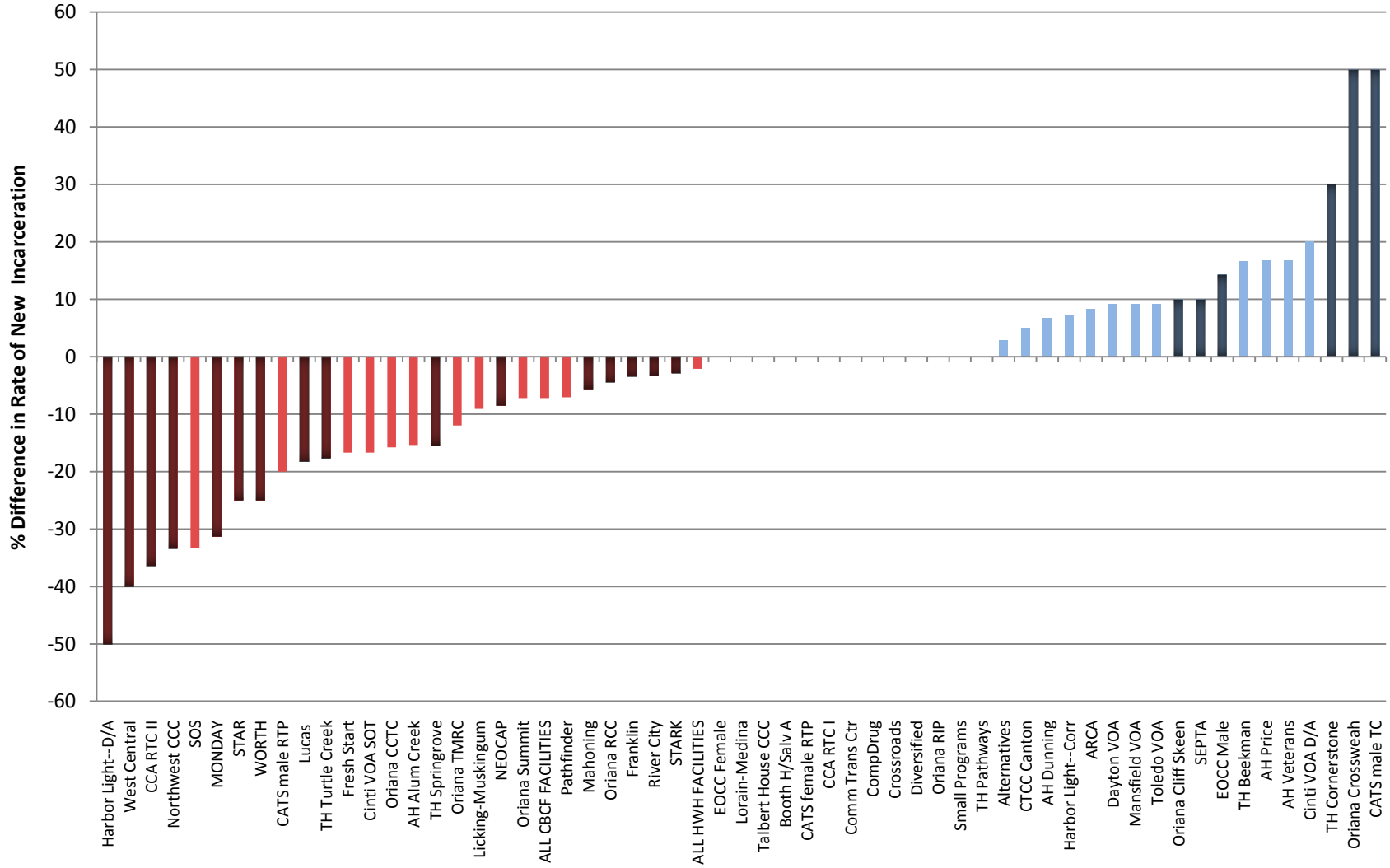
Figure 16: Treatment Effects Measured by New Incarceration for CBCF/ISP and HWH Samples—Moderate Risk
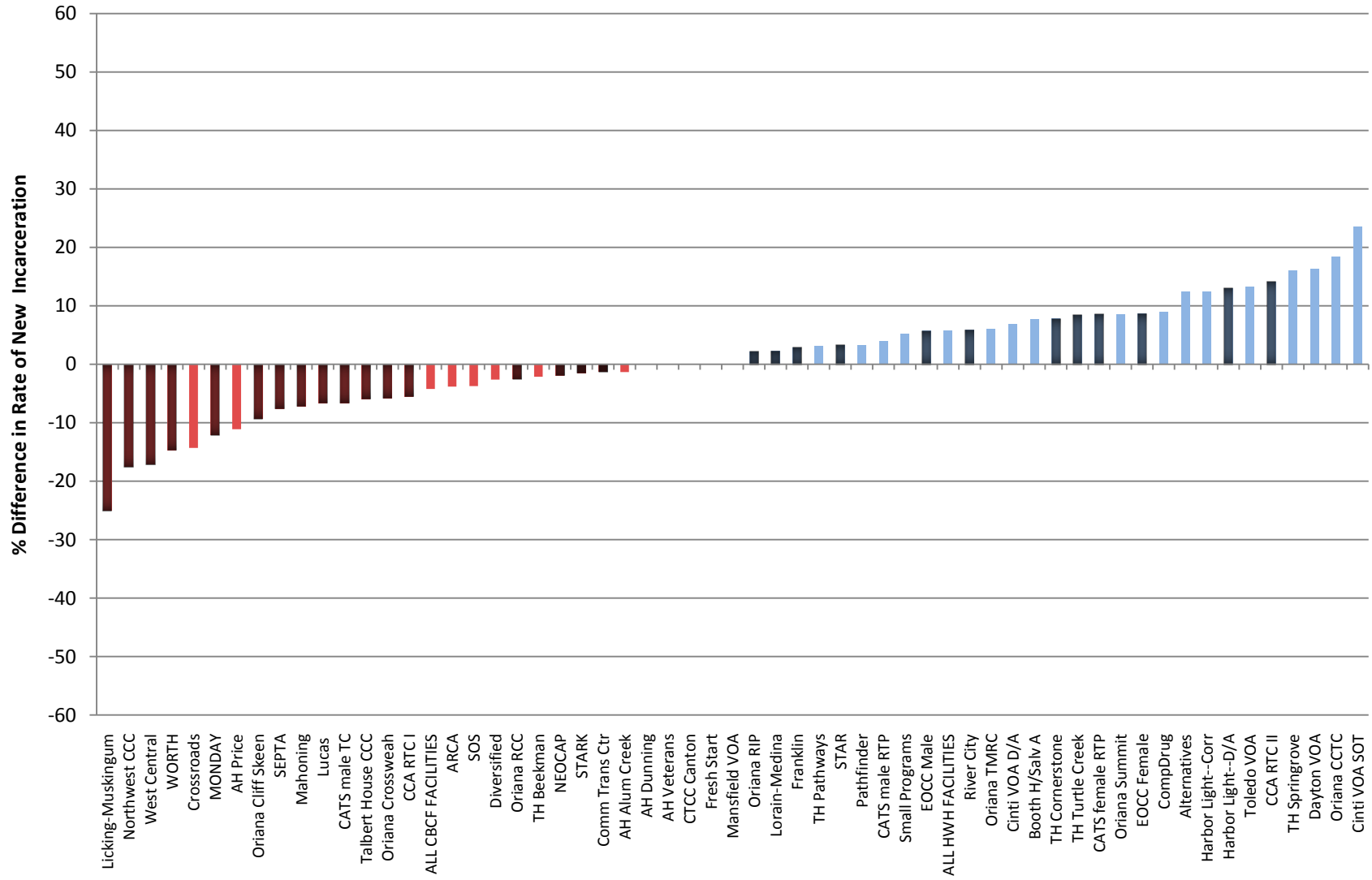
Figure 17: Treatment Effects Measured by New Incarceration for CBCF/ISP and HWH Samples—High Risk
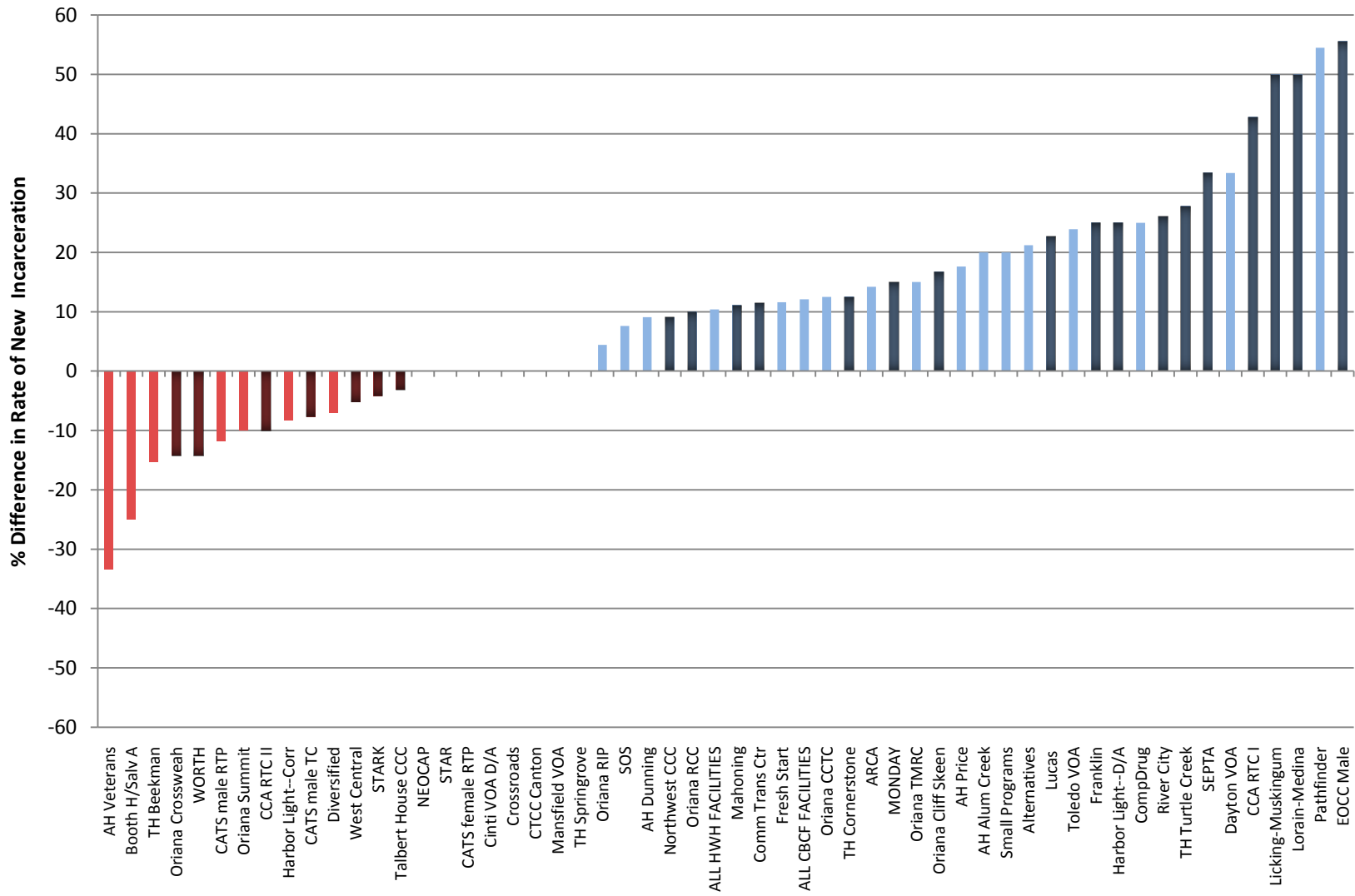
Figure 18: Treatment Effects Measured by New Felony for CBCF/Parole and HWH Samples—All Risk Levels

120
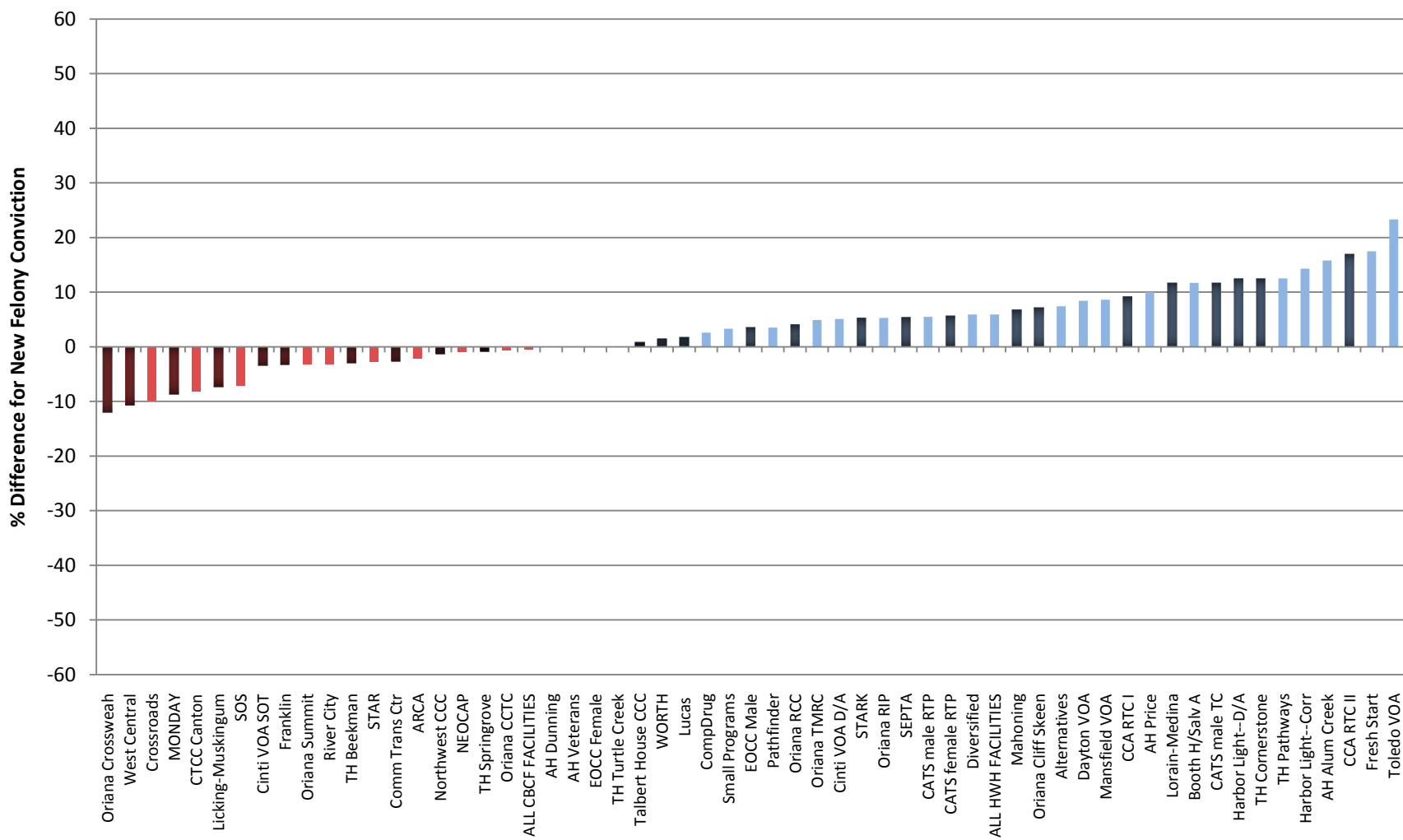
Figure 19: Treatment Effects Measured by New Felony for CBCF/Parole and HWH Samples—Low Risk
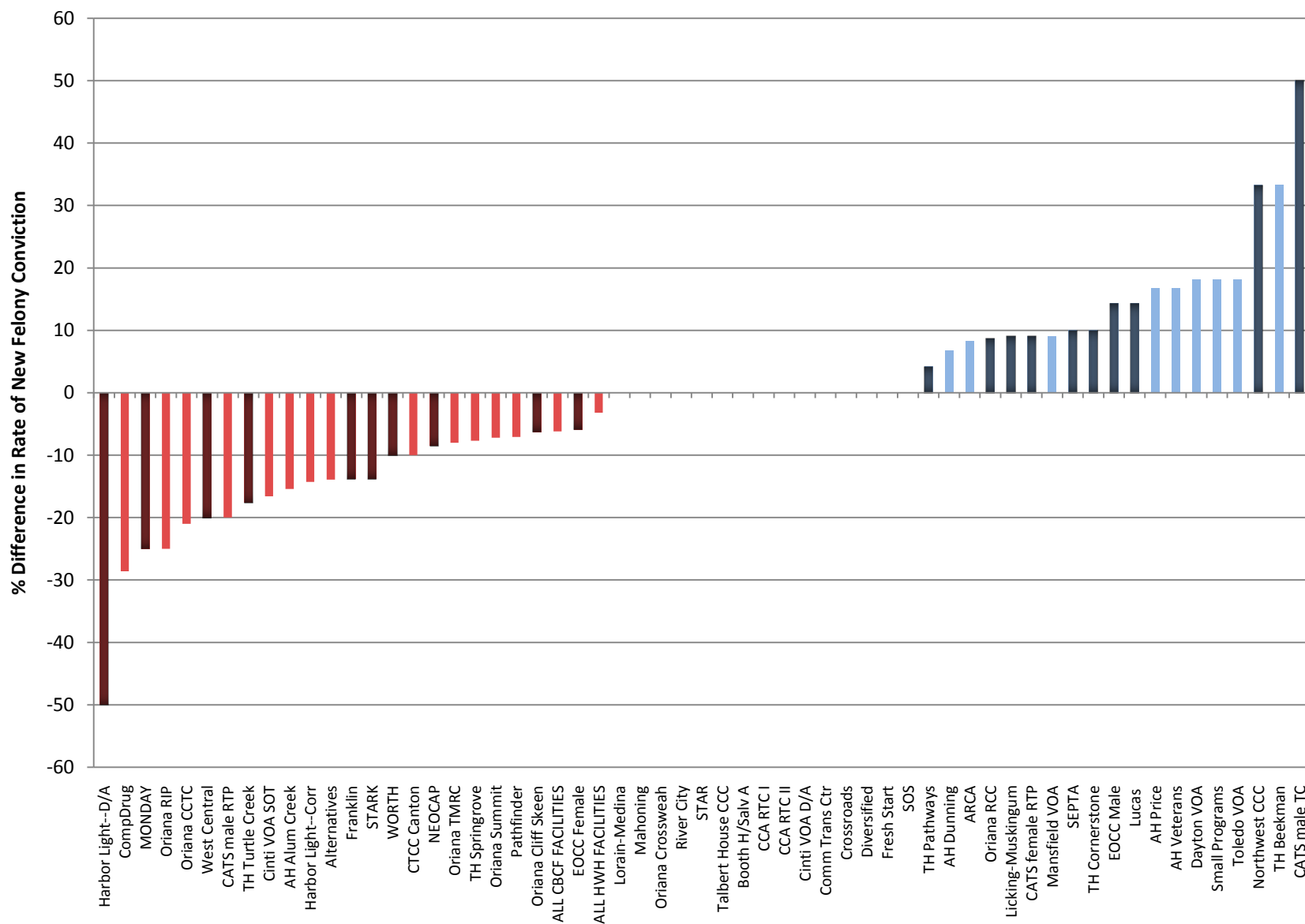
Figure 20: Treatment Effects Measured by New Felony for CBCF/Parole and HWH Samples—Moderate Risk
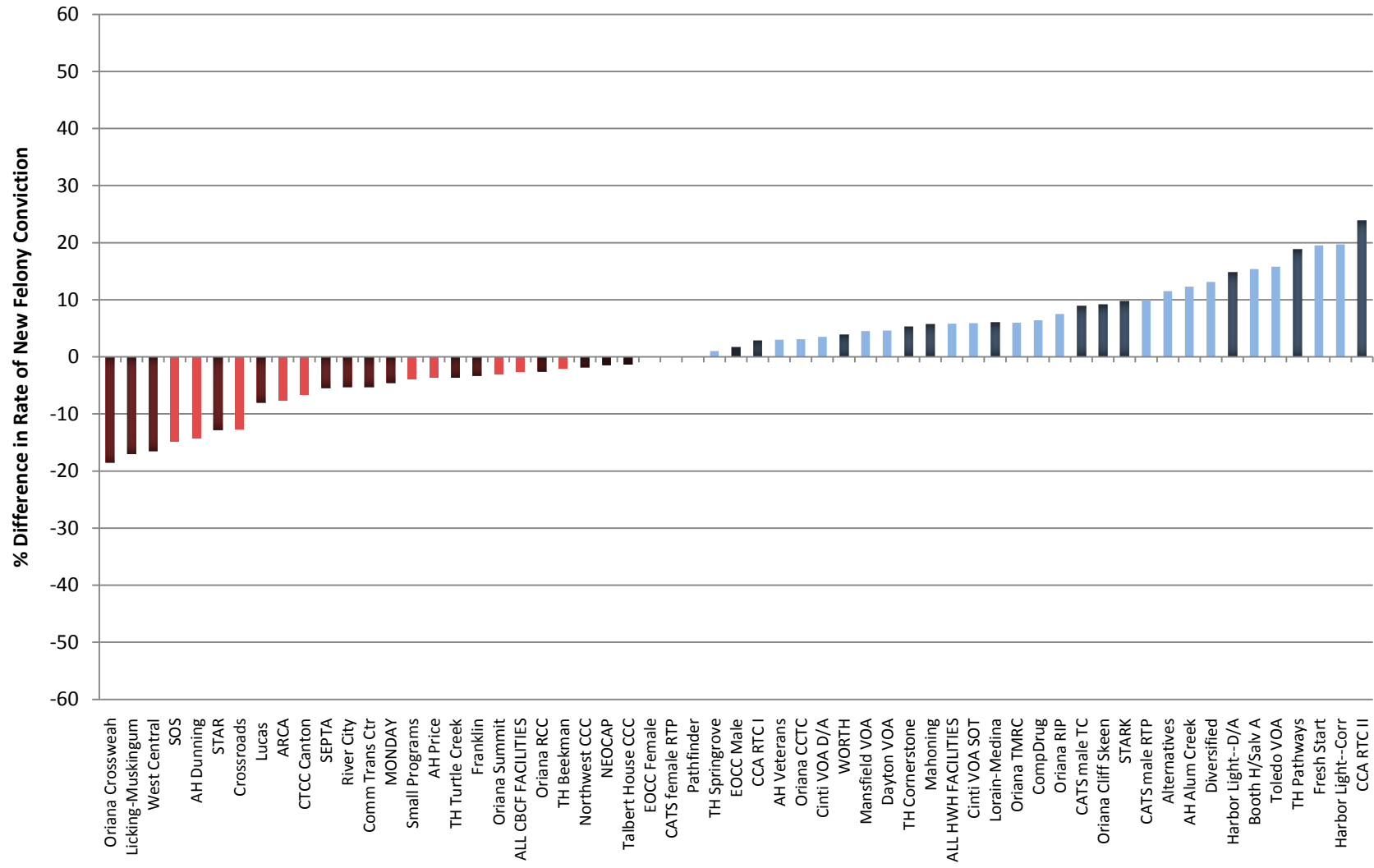
Figure 21: Treatment Effects Measured by New Felony for CBCF/Parole and HWH Samples—High Risk
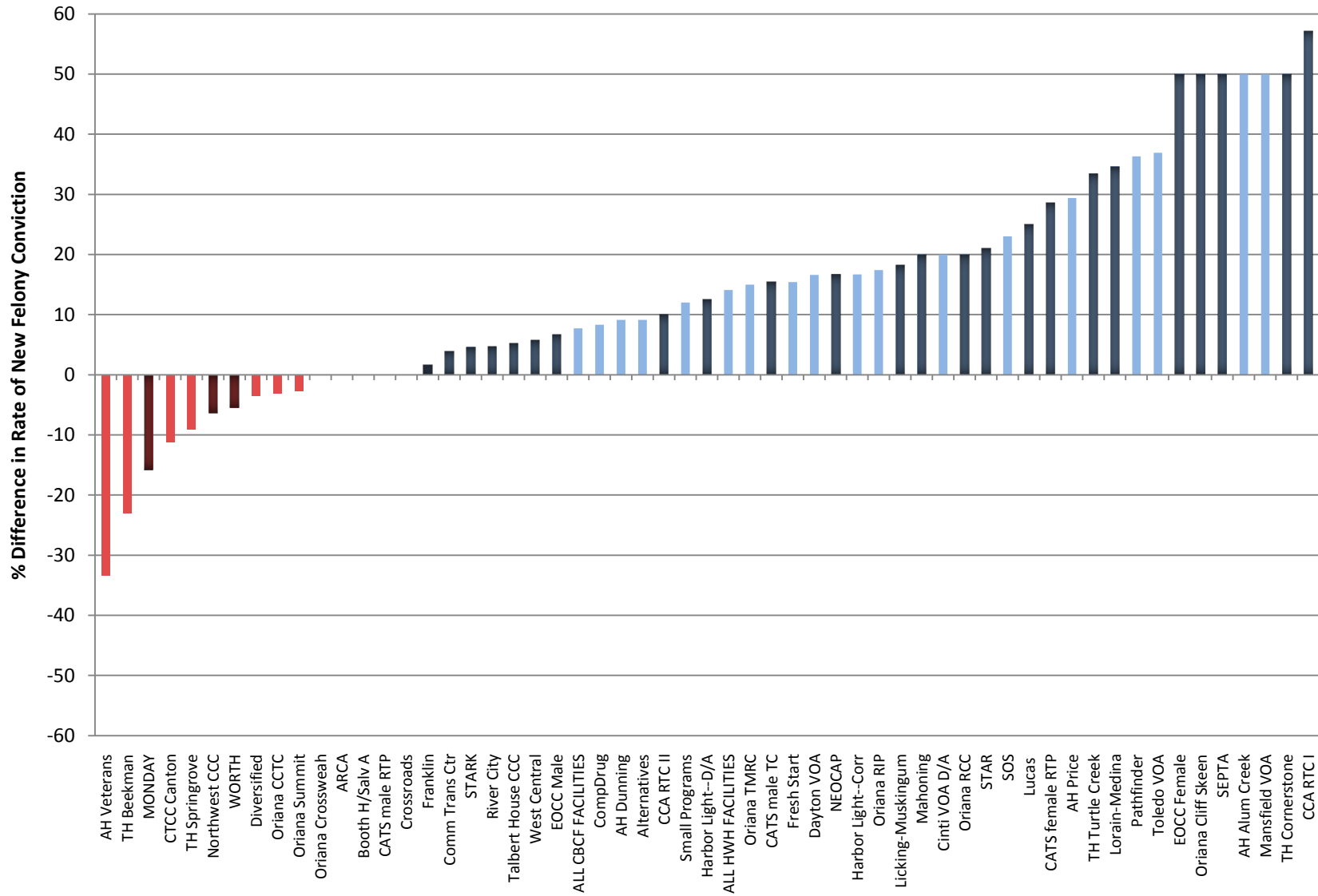
Figure 22: Treatment Effects Measured by New Incarceration for CBCF/Parolee and HWH Samples—All Risk Levels
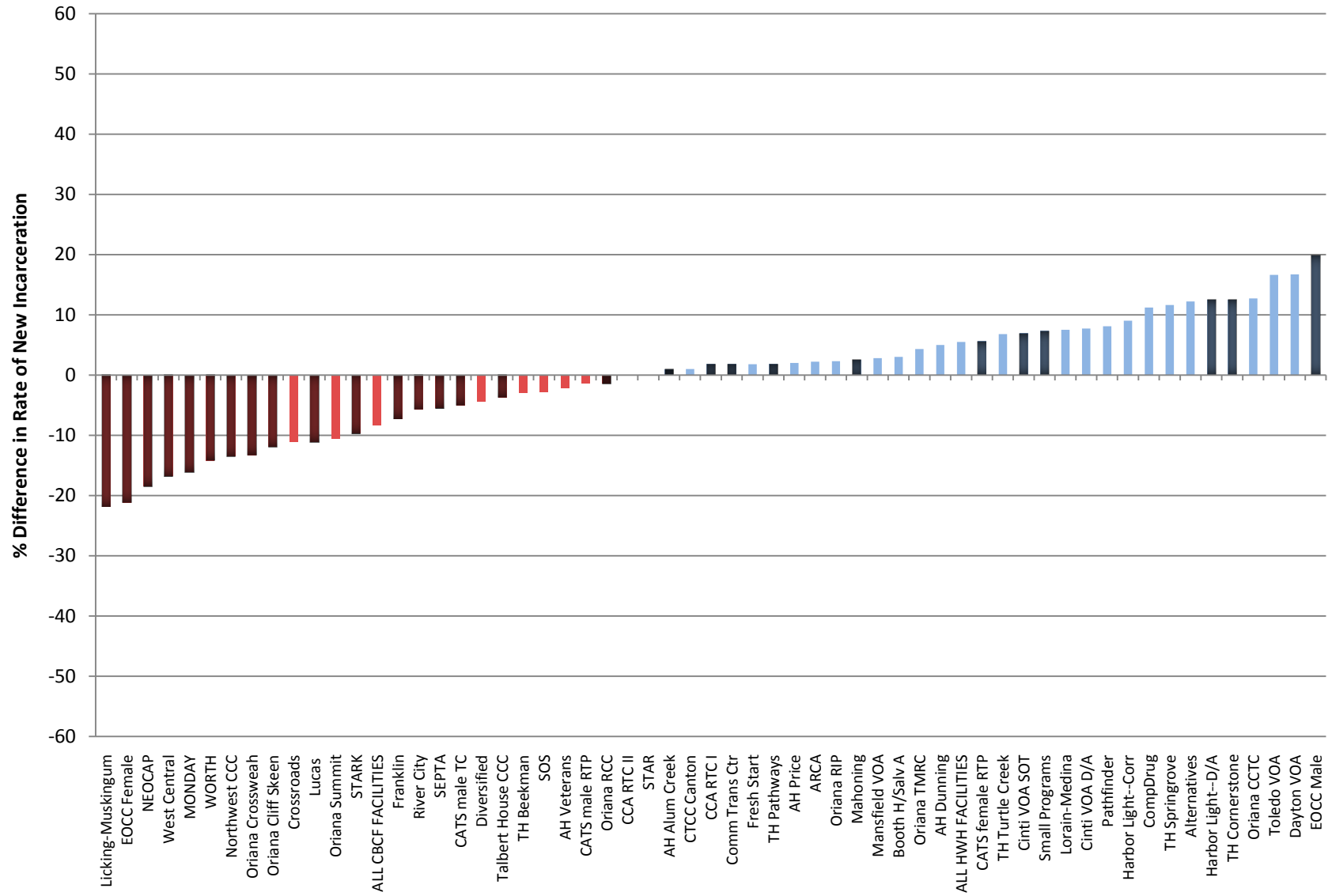
Figure 23: Treatment Effects measured by New Incarceration for CBCF/Parolee and HWH Samples—Low Risk
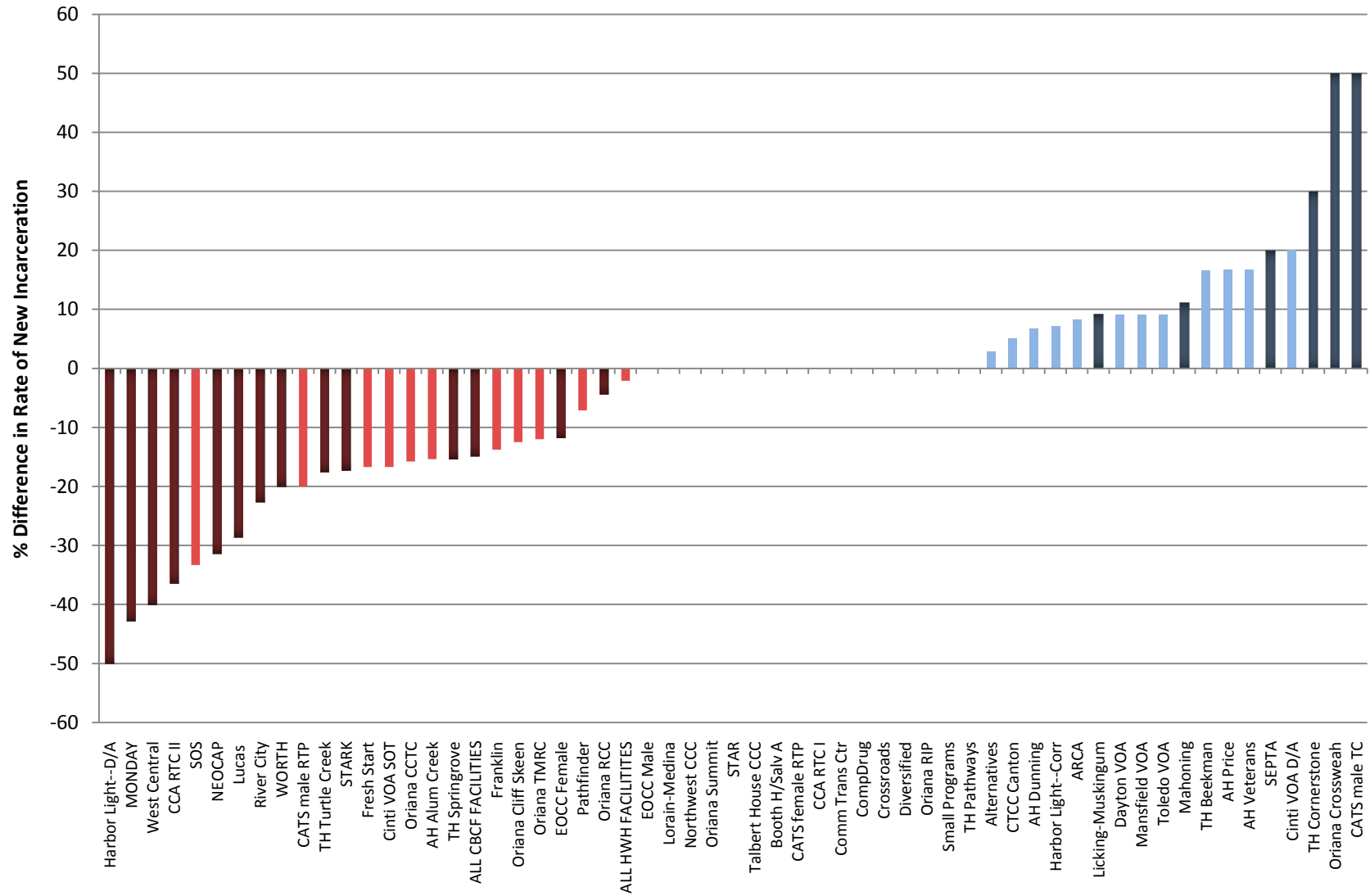
Figure 24: Treatment Effects measured by New Incarceration for CBCF/Parolee and HWH Samples—Moderate Risk
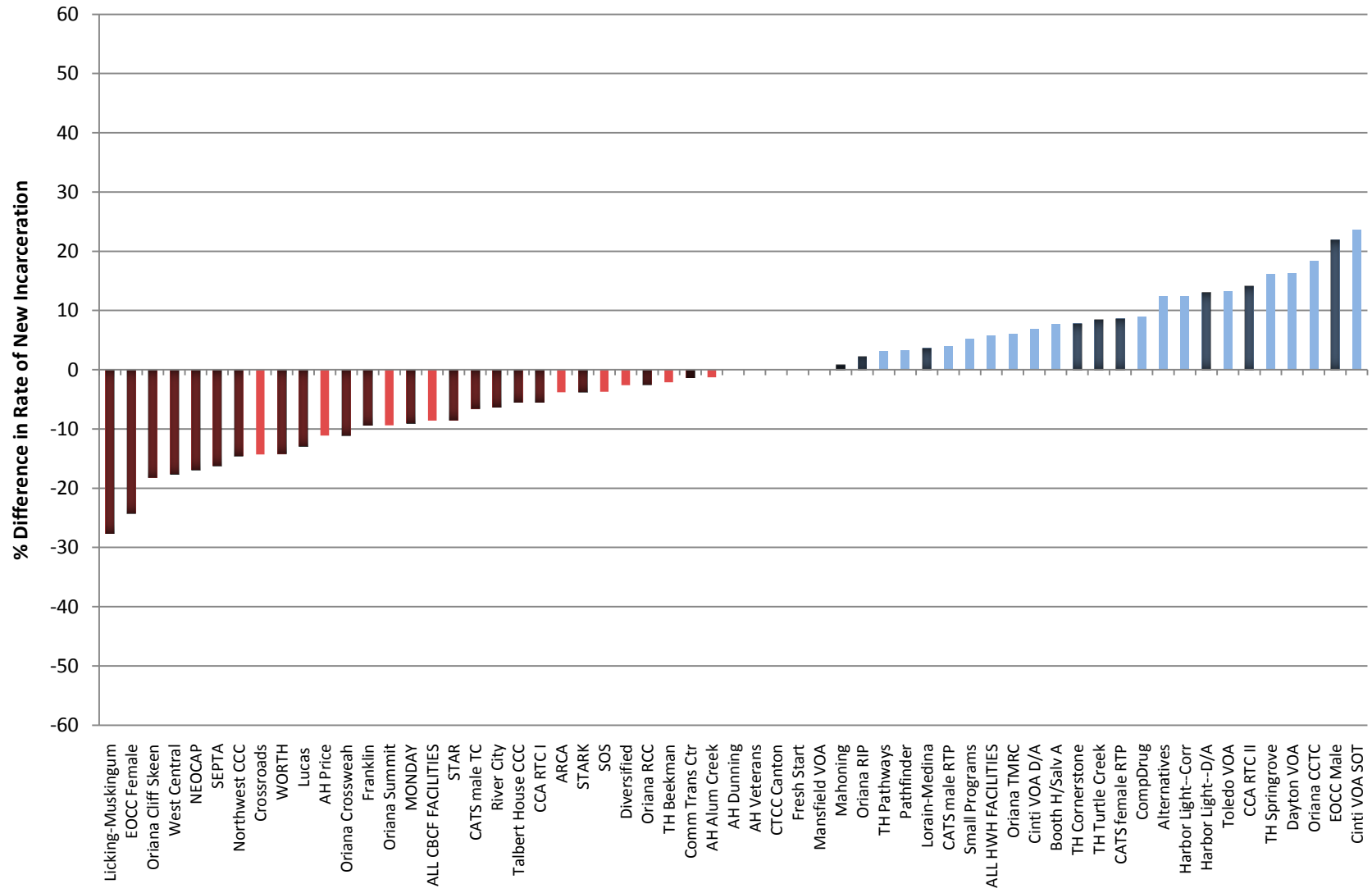
Figure 25: Treatment Effects measured by New Incarceration for CBCF/Parolee and HWH Samples—High Risk
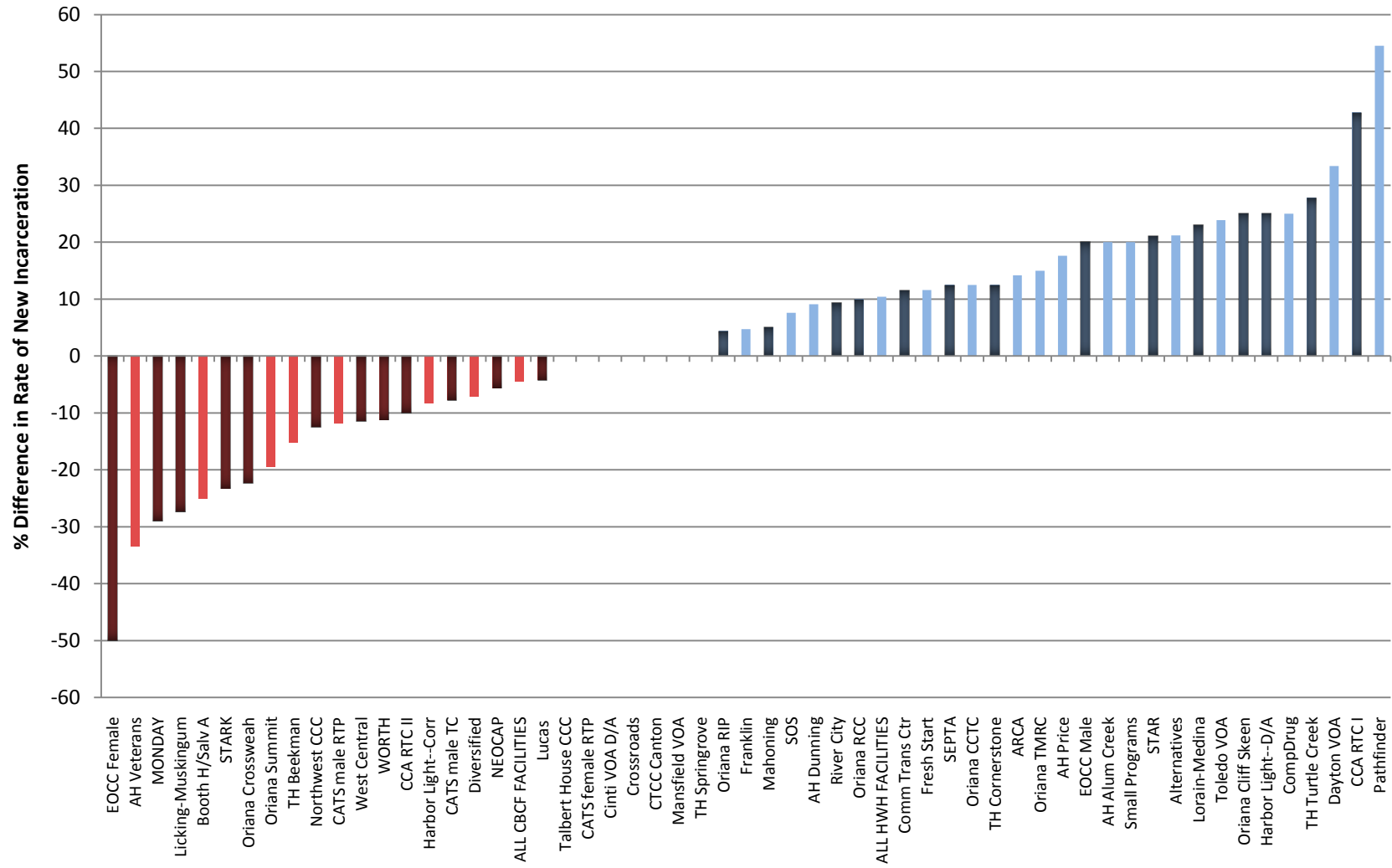
Finally the bulk of programs (30) decrease rates of new incarceration among high risk offenders. Notice that several of the programs with positive effects in Figure 24 also had appropriate completion rates. Overall however, programs had less sizable results in terms of decreasing likelihood of a new incarceration versus likelihood of a new felony conviction.

Summary Outcome Results

Given the amount of recidivism data presented, summary tables were created that depict treatment effects for successful completers across risk levels and measures of recidivism. As such, the differences in the mean recidivism rates for each of the program's treatment and comparison group are presented. Again, negative numbers favor the comparison group while the bolded positive numbers favor the treatment group. Furthermore, programs that performed the "best" by way of recidivism reduction are identified as well as programs that performed the "worst". Specific criteria for the "best" and "worst" program performances vary by sample. Generally however, programs effective in reducing recidivism across all measures of recidivism were considered, with the caveat that these programs have an appropriate successful completion rate. Programs with a completion rate that fell below 65 percent were excluded from eligibility as a "best performer"[50]. Rationale for this is that programs with a small percentage of successful graduates are more likely to reach high effect sizes since only the "best" participants are included in the outcome data.

To the contrary, programs that successfully graduate over 85 percent of participants are likely diminishing their treatment effects as these programs do little to discern between offenders who appear to have benefited from treatment and those who did not. However, because those with successful completion rates above 85 percent are less apt to have elevated treatment effects,

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[50] Data from the original 2002 HWH study support that the completion rate for programs should range between 65 and 85 percent (Lowenkamp, 2004).

they were still eligible for programs identified as the "best performers". Programs identified as the "worst performers" simply lacked treatment effects, despite how recidivism was measured.

Summary Outcome Results for the CBCF/ISP and CBCF/parole Groups

Table 31 presents summary results for the CBCF/ISP group. For this sample, programs with 1) at least two positive treatment effects across each of the three measures of recidivism (new felony, any conviction or new incarceration) and 2) a successful completion rate above 65 percent were identified as the "best performers". To the contrary, programs with the worst performance for this sample were identified as those with two or fewer total positive effects (identified by the positive, bolded numbers) across all measures of recidivism and all risk levels.

The following CBCF programs were identified as the best performers using matched ISP comparison cases: EOCC Male, with no negative treatment effects; Lorain-Medina who only had negative effects with their low risk sample; Oriana Cliff Skeen, with two positive effects across risk categories in each recidivism measure; and River City, with all but one positive treatment effect across categories and risk measures.[51]

While some programs did not make the "best performer" list, they did show promising results depending on how recidivism was measured. For example, NEOCAP was able to effectively reduce new convictions across risk levels, but did not have positive treatment effects related to new incarcerations over comparison cases.

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[51] While Septa met the criteria for a "best performing" program, it were not identified as such as significant portion of the participants (moderate risk) had higher rates of recidivism rate than the comparison group.

Table 31: Summary Table for CBCF/ISP Successful Completers--Mean Recidivism Differences Across All Recidivism Measures

PROGRAM	FELONY				ANY CONVICTION				INCARCERATION				Successful Completion Rate
	All	Low	Mod	High	All	Low	Mod	High	All	Low	Mod	High	
EOCC Female	-2.7	-6.7	0.0	N/A	0.0	0.0	0.0	N/A	**5.3**	0.0	**8.7**	N/A	96.5%
EOCC Male	**8.1**	**14.3**	**1.4**	**55.6**	**6.9**	0.0	**1.5**	**55.6**	**11.5**	**14.3**	**5.7**	**55.6**	88.3%
Franklin	**2.6**	-3.5	**3.7**	0.0	-0.3	-3.5	**1.2**	-7.5	**5.2**	-3.4	**2.9**	**25.0**	73.7%
Licking-Muskingum	-11.7	0.0	-15.0	0.0	-9.1	**9.1**	-13.3	0.0	-16.9	-9.1	-25.0	**50.0**	71.4%
Lorain-Medina	**8.0**	-8.3	**2.3**	**57.2**	**9.7**	-16.7	**9.2**	**35.7**	**8.0**	0.0	**2.3**	**50.0**	79.5%
Lucas	**4.5**	0.0	-4.1	**54.6**	**5.8**	-9.1	-1.7	**54.6**	-3.3	-18.2	-6.6	**22.7**	76.6%
Mahoning	0.0	-5.5	-0.9	**22.3**	-0.8	-11.1	-0.9	**22.3**	-5.8	-5.6	-7.2	**11.1**	86.5%
MonDay	-7.0	-21.8	-6.3	**10.0**	-8.5	-24.8	-7.8	**10.0**	-12.4	-31.3	-12.1	**15.0**	83.6%
NEOCAP	**8.4**	0.0	**8.8**	**37.5**	**6.9**	**2.9**	**6.2**	**37.5**	-2.9	-8.5	-1.9	0.0	86.0%
Northwest CCC	-2.6	**33.3**	-4.7	0.0	-7.8	0.0	-9.6	0.0	-14.3	-33.4	-17.5	**9.1**	74.8%
Oriana Cliff Skeen	**10.0**	-5.0	**18.5**	-16.6	**13.7**	0.0	**20.4**	0.0	-2.5	**10.0**	-9.3	**16.7**	67.2%
Oriana Crossweah	-4.7	0.0	-5.8	0.0	-2.3	**50**	-1.5	-14.3	-5.9	**50.0**	-5.8	-14.2	79.5%
Oriana Summit	**4.7**	-14.3	**6.1**	**10.0**	-2.7	-14.3	0.0	-10.0	**4.7**	-7.2	**8.6**	-10.0	61.7%
River City	**6.1**	**12.9**	**4.4**	**11.2**	**2.2**	**6.5**	**0.5**	**11.1**	**6.9**	-3.2	**5.9**	**26.0**	81.3%
SEPTA	**1.2**	**20.0**	-4.5	**33.3**	**3.6**	**10.0**	-1.5	**50.0**	-2.4	**10.0**	-7.6	**33.4**	68.5%
STAR	**2.7**	-25.0	0.0	**27.2**	0.0	-25	0.0	**9.0**	**1.3**	-25.0	**3.3**	0.0	76.8%
STARK	**1.1**	-5.6	**3.6**	-4.2	**1.0**	-8.3	**3.7**	0.0	-2.0	-2.8	-1.5	-4.2	85.8%
Talbert House CCC	**2.1**	0.0	-0.7	**15.1**	**2.1**	0.0	**0.7**	**9.1**	-5.3	0.0	-5.9	-3.1	89.9%
West Central	-9.9	-20.0	-7.7	-21.1	-6.4	-20.0	-5.1	-10.6	-16.3	-40.0	-17.1	-5.2	77.9%
WORTH	-6.1	0.0	-6.9	0.0	-3.8	0.0	-4.3	0.0	-15.2	-25.0	-14.7	-14.2	74.4%
ALL FACILITIES	**1.1**	-3.2	**0.1**	**13.4**	**0.3**	-4.9	-0.2	**9.8**	-2.7	-7.2	-4.2	**12.1**	**78.8%**

Positive bolded differences indicate a reduced rate of recidivism over the comparison sample

Programs representing the best performers across all measures of recidivism are determined by having at least 2 positive mean differences per outcome measure AND a successful termination rate above 65%

Programs representing the worst performers across all measures of recidivism are determined by **2 or fewer** total positive mean differences across all outcome measures

Table 31 also identifies programs performing most poorly across risk levels and measures of recidivism. Programs performing least effectively by way of reduction of recidivism include: Licking Muskingum, Northwest CCC and Oriana Crossweah (who had just two positive treatment effects among a small proportion of their population across recidivism measures), as well as West Central and WORTH, who produced no positive treatment effects with this sample, despite risk category or how recidivism was measured. EOCC female also had just two positive treatment effects for new incarceration; however, they also produced just two negative treatment effects, so were not classified among the "worst performers".

Table 32 presents the summary results for the CBCF/parole sample. Criteria for this sample for best performing programs are also two or more positive treatment effects across each measure of recidivism and a successful completion rate above 65 percent. However, since CBCFs generally performed better against the ISP sample versus the parole sample, the criteria for worst performers was changed so that "worst performers" were identified as programs with one or fewer total positive mean differences across all measures of recidivism (versus two or fewer for the CBCF/ISP sample).

Two of the 4 programs identified as "best performers" in the CBCF/ISP group remain top performers with parole used as the comparison sample. EOCC Male again has no negative treatment effects, irrespective of risk group or how recidivism is measured. Likewise, Lorain-Medina continues to produce sizable treatment effects over the comparison sample. The additional program identified as a "best performer" was Mahoning, who unlike many CBCFs did particularly well with reducing the rate of new incarcerations.

Table 32: Summary Table for CBCF/Parole Successful Completers--Mean Recidivism Differences Across All Recidivism Measures

PROGRAM	FELONY				ANY CONVICTION				INCARCERATION				Successful Completion Rate
	All	Low	Mod	High	All	Low	Mod	High	All	Low	Mod	High	
EOCC Female	0.0	-5.9	0.0	**50.0**	**3.8**	-5.9	**6.1**	**50.0**	-21.2	-11.8	-24.2	-50.0	96.5%
EOCC Male	**3.5**	**14.3**	**1.6**	**6.7**	**12.8**	0.0	**7.8**	**40.0**	**19.8**	0.0	**21.9**	**20.0**	88.3%
Franklin	-3.3	-13.8	-3.3	**1.6**	-7.2	-20.7	-7.8	**1.6**	-7.1	-13.8	-9.4	**4.7**	73.7%
Licking-Muskingum	-7.3	**9.1**	-17.0	**18.2**	-7.2	**9.1**	-17.0	**18.2**	-21.8	**9.1**	-27.6	-27.3	71.4%
Lorain-Medina	**11.7**	0.0	**6.0**	**34.6**	**13.4**	-8.4	**12.2**	**26.9**	**7.5**	0.0	**3.6**	**23.0**	79.5%
Lucas	**1.7**	**14.3**	-8.0	**25.0**	**8.3**	0.0	-0.8	**33.3**	-11.1	-28.6	-12.9	-4.2	76.6%
Mahoning	**6.8**	0.0	**5.7**	**20.0**	**6.8**	-11.1	**8.0**	**15.0**	**2.5**	**11.1**	**0.8**	**5.0**	86.5%
MonDay	-8.7	-25.0	-4.5	-15.8	-6.2	-25.0	-2.8	-7.9	-16.1	-42.8	-9.0	-28.9	83.6%
NEOCAP	-1.0	-8.5	-1.4	**16.7**	-1.0	-11.4	0.0	**11.1**	-18.5	-31.4	-16.9	-5.6	86.0%
Northwest CCC	-1.3	**33.3**	-1.8	-6.3	-4.1	0.0	-5.5	0.0	-13.5	0.0	-14.5	-12.5	74.8%
Oriana Cliff Skeen	**7.2**	-6.3	**9.1**	**50.0**	**19.1**	**18.7**	**13.7**	**50.0**	-11.9	-12.5	-18.2	**25.0**	67.2%
Oriana Crossweah	-12	0.0	-18.5	0.0	-10.9	0.0	-16.7	0.0	-13.3	**50.0**	-11.1	-22.3	79.5%
Oriana Summit	-3.3	-7.2	-3.1	-2.8	-6.2	0.0	-5.5	-11.2	-10.6	0.0	-9.4	-19.4	61.7%
River City	-3.2	0.0	-5.3	**4.7**	-4.7	-3.2	-5.8	0.0	-5.7	-22.6	-6.3	**9.3**	81.3%
SEPTA	**5.4**	**10.0**	-5.4	**50.0**	**12.7**	**10.0**	**5.4**	**50.0**	-5.5	**20.0**	-16.2	**12.5**	68.5%
STAR	-2.8	0.0	-12.8	**21.0**	-2.9	**25.0**	-10.6	**10.5**	0.0	0.0	-8.5	**21.1**	76.8%
STARK	**5.3**	-13.8	**9.7**	**4.6**	**11.1**	-13.8	**14.2**	**18.6**	-9.7	-17.3	-3.7	-23.3	85.8%
Talbert House CCC	**0.8**	0.0	-1.3	**5.2**	**2.9**	0.0	-1.8	**12.9**	-3.7	0.0	-5.5	0.0	89.9%
West Central	-10.7	-20.0	-16.5	**5.7**	-2.3	-20.0	-7.7	**14.3**	-16.8	-40.0	-17.6	-11.4	77.9%
WORTH	**1.5**	-10.0	**3.8**	-5.5	**9.8**	-10.0	**8.5**	**27.8**	-14.2	-20.0	-14.2	-11.2	74.4%
ALL FACILITIES	-0.5	-6.2	-2.6	**7.7**	**0.8**	-7.6	-0.9	**11.8**	-8.5	-14.9	-8.6	-4.5	**78.8%**

Positive bolded differences indicate a reduced rate of recidivism over the comparison sample

Programs representing the best performers across all measures of recidivism are determined by having at least 2 positive mean differences per outcome measure AND a successful termination rate above 65%

Programs representing the worst performers across all measures of recidivism are determined by having **1 or fewer** total positive mean differences across all outcome measures

132

Despite not meeting the criteria, Cliff Skeen continued to perform well with regard to reducing the rate of new convictions, but less well with new incarcerations. STARK was also able to reduce the rate of new convictions with all but low risk offenders and SEPTA was effective at reducing the rates of any conviction[52]. Likewise, WORTH had no positive treatment effects when compared to ISP, yet they did well reducing the rate of new convictions with a bulk of their population (moderate risk offenders) when compared to parolees.

With regard to CBCF programs that performed the worst against matched parolees, Northwest CCC and Oriana Crossweah continue to be poor performers, with each having just one positive treatment effect with a small low risk population. Additions to the list are Oriana Summit and MonDay, who produced no positive treatment effects. Some programs, although not meeting the criteria for "worst performers" showed marked decline in effect when parole was used as the comparison sample. River City was on the list of best performers when compared to ISP; however, they produced just two positive treatment effects with a relatively small sample of high risk offenders. Franklin County CCC and NEOCAP also failed to produce a treatment effect, except with a relatively small group of high risk offenders.

Summary Outcome Results for HWHs

Table 33 presents summary results for the HWH programs. Again, best program performers were identified as those with 1) at least two positive treatment effects across each of the three measures of recidivism (new felony, any conviction or new incarceration) and 2) a successful completion rate above 65 percent. To the contrary, HWH programs with the worst performance were identified as those with three or fewer total positive effects (identified by the

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[52] While Septa again met the criteria for a "best performing program" based on having at least 2 positive treatment effects across outcome measures, the program was still unable to consistently decrease recidivism among moderate risk offenders, which encompasses approximately three quarters of their sample.

positive, bolded numbers) across all measures of recidivism and all risk levels. The following HWH programs were identified as the best performers: CATS Female RTP, with no negative treatment effects; CCA RTC I, with negative treatment effects in just one category; Harbor Light Drug/Alcohol Program, with negative treatment effects for only a very small population of low risk offenders; Talbert House Cornerstone, with all positive treatment effects, and Talbert House Pathways, with no negative treatment effects.

Several other programs showed appreciable treatment effects across risk categories and outcome measures (i.e., Alternatives, Cincinnati VOA Drug/Alcohol Program, CompDrug, Dayton VOA, Fresh Start, Harbor Light Corrections, Mansfield VOA, Oriana RIP, Oriana TMRC, and Toledo VOA), but had completion rates below 65 percent. In fact, just 10 of the 44 HWH programs were identified as having a successful completion rate at 65 percent or higher[53]. Hence, while some programs appear highly effective at reducing recidivism, they had a low successful completion rate which likely elevates their treatment effects. For example, Dayton VOA had no negative treatment effects for successful completers; yet, their successful completion rate was just 27 percent. When all Dayton VOA participants are examined, they had no positive treatment effects, clearly indicating elevated treatment effects based on the few successful completers examined. Other programs had an acceptable completion rate, but did not make the list of "best performers" due to inconsistent findings across recidivism measures (i.e., CATS male TC, which was effective at reducing rates of new convictions, but less effective with new incarcerations).

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[53] This rate was derived from both matched and unmatched HWH offenders that participated in the program within a year timeframe of the 2006 site visit. The data source was CCIS.

Table 33: Summary Table for HWH/Comparison Group Successful Completers--Mean Recidivism Differences Across All Recidivism Measures

PROGRAMS	FELONY				ANY CONVICTION				INCARCERATION				Successful Completion Rate
	ALL	LOW	MOD	HIGH	ALL	LOW	MOD	HIGH	ALL	LOW	MOD	HIGH	
Alternatives	7.4	-13.9	11.5	9.1	9.4	-13.9	12.4	18.1	12.2	2.8	12.4	21.2	58.0%
Alvis House Alum Creek	15.8	-15.4	12.3	50.0	11.4	-15.4	11.1	30.0	0.9	-15.4	-1.3	20.0	45.5%
Alvis House Dunning	0.0	6.7	-14.3	9.1	-5.0	13.3	-28.6	0.0	5.0	6.7	0.0	9.1	57.8%
Alvis House Price	10.0	16.7	-3.7	29.4	10.0	0.0	0.0	29.4	2.0	16.7	-11.1	17.6	55.1%
Alvis House Veterans	0.0	16.7	3.0	-33.4	-2.2	16.7	0.0	-33.4	-2.2	16.7	0.0	-33.4	62.8%
ARCA	-2.2	8.3	-7.7	0.0	0.0	8.3	-7.7	14.3	2.2	8.3	-3.8	14.2	56.6%
Booth House/Salvation Army	11.7	0.0	15.4	0.0	14.7	0.0	19.2	0.0	3	0.0	7.7	-25.0	46.2%
CATS Female RTP	5.7	9.1	0.0	28.6	11.3	9.1	5.7	42.8	5.6	0.0	8.6	0.0	88.7%
CATS Male RTP	5.5	-20.0	10.0	0.0	8.3	-20.0	12.0	5.9	-1.4	-20.0	4.0	-11.8	53.6%
CATS Male Therapeutic Community	11.7	50.0	8.9	15.4	16.7	50.0	13.3	23.0	-5.0	50.0	-6.6	-7.7	79.5%
CCA RTC I	9.2	0.0	2.8	57.1	16.7	9.1	8.3	71.4	1.8	0.0	-5.5	42.8	69.2%
CCA RTC II	16.9	0.0	23.9	10.0	15.0	-9.1	25.4	5.0	0.0	-36.4	14.1	-10.0	76.6%
Cincinnati VOA Drug/Alcohol	5.1	0.0	3.5	20.0	5.1	-40.0	17.3	-20.0	7.7	20.0	6.9	0.0	21.9%
Cincinnati VOA Sex Offender Tx	-3.4	-16.6	5.9	N/A	-6.9	-25.0	5.9	N/A	6.9	-16.7	23.6	N/A	37.0%
Community Transition Center	-2.6	0.0	-5.3	3.9	-7.1	-18.2	-10.5	7.7	1.8	0.0	-1.3	11.5	69.9%
CompDrug	2.6	-28.6	6.4	8.3	6.0	-35.7	14.1	4.2	11.2	0.0	9.0	25.0	42.3%
Crossroads	-9.9	0.0	-12.7	0.0	-7.4	0.0	-12.7	20	-11.1	0.0	-14.3	0.0	60.4%
CTCC Canton	-8.2	-10.0	-6.7	-11.2	-7.1	-5.0	-5.0	-16.6	1.0	5.0	0.0	0.0	49.5%
Dayton VOA	8.4	18.2	4.6	16.6	13.3	9.1	6.9	66.6	16.7	9.1	16.3	33.4	26.7%
Diversified	5.9	0.0	13.1	-3.6	4.4	0.0	7.9	0.0	-4.4	0.0	-2.6	-7.1	48.0%
Fresh Start	17.5	0.0	19.5	15.4	18.5	0.0	18.3	23.1	1.8	-16.7	0.0	11.6	61.9%
Harbor Light--Corrections	14.3	-14.3	19.7	16.7	18.6	-10.7	24.8	16.7	9.0	7.1	12.4	-8.3	47.7%
Harbor Light--Drug/Alcohol	12.5	-50.0	14.8	12.5	10.9	-50.0	12.9	12.5	12.5	-50	13.0	25.0	89.4%
Mansfield VOA	8.6	9.1	4.5	50.0	17.1	9.1	18.2	50.0	2.8	9.1	0.0	0.0	33.9%
Oriana CCTC	-1.4	-21.0	3.1	-3.2	1.4	-15.8	2.1	9.4	12.7	-15.8	18.4	12.5	52.0%
Oriana RCC	4.1	8.7	-2.5	20.0	5.5	8.7	7.5	-10.0	-1.4	-4.4	-2.5	10.0	68.9%
Oriana RIP	5.3	-25.0	7.5	17.4	2.3	-25.0	3.2	17.4	2.3	0.0	2.2	4.4	47.9%
Oriana TMRC	4.9	-8.0	6.0	15.0	7.3	-4.0	6.7	25.0	4.3	-12.0	6.0	15.0	55.8%
Pathfinder	3.6	-7.1	0	36.3	2.3	-7.1	0.0	27.2	8.2	-7.1	3.3	54.5	47.3%

135

Table 33 Con't: Summary Table for HWH/Comparison Group Successful Completers--Mean Recidivism Differences Across All Recidivism Measures

PROGRAMS	FELONY				ANY CONVICTION				INCARCERATION				Successful Completion Rate
	ALL	LOW	MOD	HIGH	ALL	LOW	MOD	HIGH	ALL	LOW	MOD	HIGH	
Small Programs	**3.3**	**18.2**	-3.9	**12.0**	**2.4**	**13.6**	-1.3	**4.0**	**7.3**	0.0	**5.2**	**20.0**	50.7%
SOS	-7.1	0.0	-14.8	**23.0**	-18.6	-33.3	-22.2	0.0	-2.8	-33.3	-3.7	**7.6**	55.5%
Talbert House Beekman	-3.0	**33.3**	-2.0	-23.1	-2.9	**16.6**	-8.2	**7.7**	-3.0	16.6	-2.1	-15.3	48.1%
Talbert House Pathways	**12.5**	**4.2**	**18.8**	N/A	**5.4**	0.0	**9.4**	N/A	**1.8**	0.0	**3.1**	N/A	73.5%
Talbert House Springrove	-0.8	-7.7	**1.0**	-9.1	-2.3	-7.7	0.0	-18.1	**11.6**	-15.4	**16.1**	0.0	71.2%
Talbert House Turtle Creek	0.0	-17.6	-3.6	**33.4**	-6.7	-35.3	-3.6	**5.5**	**6.8**	-17.6	**8.4**	**27.8**	54.5%
Talbert House Cornerstone	**12.5**	**10.0**	**5.3**	**50.0**	**14.3**	**20.0**	**7.9**	**37.5**	**12.5**	**30.0**	**7.8**	**12.5**	70.2%
Toledo VOA	**23.3**	**18.2**	**15.8**	**36.9**	**22.6**	**27.3**	**10.5**	**41.3**	**16.6**	**9.1**	**13.2**	**23.9**	52.2%
ALL PROGRAMS	**5.8**	-3.2	**5.8**	**14.1**	**5.8**	-5.0	**6.1**	**14.6**	**5.5**	-2.1	**5.8**	**10.4**	**55.5%**

Positive bolded differences indicate a reduced rate of recidivism over the comparison sample

Programs representing the best performers across all measures of recidivism are determined by having at least 2 positive mean differences per outcome measure
   AND a successful termination rate above 65%

Programs representing the worst performers across all measures of recidivism are determined by having **3 or fewer** total positive mean differences across all outcome
   measures

Table 33 also identifies programs performing most poorly across risk levels and measures of recidivism. Programs performing least effectively by way of reduction of recidivism include: Crossroads, CTCC Canton, SOS, Talbert House Beekman, and Talbert House Springrove. All had three or fewer total positive mean differences across all outcome measures. While Talbert House Springrove met the criteria for a "worst" performing program, they did demonstrate marked positive treatment effects for moderate risk offenders with respect to new incarcerations.

SECTION V: SUMMARY AND DISCUSSION

The following section will provide a summary and discussion of the study results. Included in the summary will be how overall findings compare to the original 2002 study, conclusions based upon the findings, as well as study limitations.   This study set out to answer the following research questions:

- *What type of offenders benefit most from programming*?

- *Which programs are most effective at reducing recidivism?*

- *What models or program characteristics are most important in reducing recidivism?*

This report focuses on program outcome results related to the effectiveness of Ohio's CBCF and HWH facilities at reducing recidivism. Also included is descriptive information about HWH and CBCF facilities in general, as well as individual profiles of each program included in the study (See Appendix). Hence, responses to the first two research questions will be summarized below. The third research question related to effective program characteristics will be addressed in a supplemental report.

Three separate samples were used to explore the first two research questions: CBCF/ISP, CBCF/Parole, and HWH/Comparison. Since virtually all CBCF participants are probationers,

two separate comparison groups were created for these programs. The CBCF/ISP group allows probationers to be matched to probationers for a more equitable comparison; the CBCF/Parole group allows for a more reasonable comparison between the 2002 and current study so that program improvement can be recognized. HWHs on the other hand contain both parolees and probationers. As such, parolees within the HWH sample were matched to parolees while probationers within the same sample were matched to ISP offenders, resulting in just one study group for HWHs. Treatment cases were matched one for one with comparison cases on the following variables: gender, race, sex offender status, county category and risk category[54].

The total sample size for the study, derived from adding each of the three samples, was 26,836 offenders (7,128 CBCF/ISP; 7,528 CBCF/Parole, and 12,180 HWH/Comparison cases). Since the three groups described above were analyzed separately, duplicate CBCF and comparison cases did exist among these three samples. The sample size, excluding duplicate cases was 20,005 independent offenders (4,191 CBCF; 6,090 HWH, 3,696 ISP, and 6,028 parole/PRC cases). The following section will provide a brief summary of the findings for the CBCF and HWH programs, highlighting differences from the original 2002 study results.

Summary of CBCF Descriptive Data

Twenty CBCFs operating throughout the state of Ohio were included in the study. The 2002 study included 15 CBCFS. All the same CBCFs from 2002 were included in the present study; however, Eastern Ohio Correctional Center was disaggregated by sex, so that data are reported separately on their male and female program. Additional CBCFs included in this study are Northwest CCC, Oriana Crossweah, STAR, and West Central CBCF. Of note, "Summit

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[54] See the methods section for a more comprehensive description of the matching process.

CBCF Females" in the 2002 study is now referred to as "Oriana Cliff Skeen", and "Butler" is now listed as "Talbert House CCC".

CBCFs had an average capacity of 99 participants (range 25 to 216). This was lower than the 2002 study, finding the average CBCF capacity to be 114 offenders. The average successful termination rate in the current study was 79 percent, which is virtually the same as the 2002 successful termination rate. Likewise, length of stay for CBCFs ranged from 3 to 5 months for all participants, and for successful completers only, the average stay was 139 days (range 3.5 to 6 months). Similarly, the 2002 study found an average length of stay for successful completers of 143 days. CBCFs in the current study were treating a small percentage of low risk offenders (an average of just 7% across programs).[55] Eighteen of the 20 programs served males, while 10 served females, which is again similar to the 2002 findings.

Descriptive data on offenders, as well as outcome results for CBCFs were analyzed by each sample (CBCF/ISP and CBCF/Parole). However, because the majority of CBCF participants in the study were included in both groups, participant demographics vary only slightly by sample. The typical offender served in a CBCF program is a 31 year old White male who is not currently married. In terms of criminal history, although about 40 percent have had a previous conviction most CBCF participants have not been previously incarcerated. The current offense for most is a Felony 5 or Misdemeanor level offense, and typically a drug or property offense. The large majority (95%) have a substance abuse problem; about 2/3 have an employment problem and 1/3 were identified as having an emotional problem. With regard to risk (using the risk assessment and cutoffs developed for the study), less than 10 percent were low risk, about 70 percent moderate risk, and 20 percent high risk. Risk levels were slightly higher for the CBCF/parole group versus the CBCF/ISP group.

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[55] Based upon the risk tool developed for the study.

In terms of CBCF terminations, offenders that are older and White are more likely to be successful completers from CBCF programs. Likewise, offenders that are higher risk, with previous convictions as well as emotional and employment problems have a higher probability of unsuccessful termination. These results are similar to the 2002 findings. With regard to reoffending, high risk, younger, Non-White, male offenders have a higher likelihood of recidivism upon discharge from a CBCF. Likewise, property offenders with a prior record, as well as substance abuse and employment problems have a higher probability of reoffending.

Summary of HWH Descriptive Data

Forty-four HWH programs were identified for the current study (versus 37 from the 2002 study). Traynor House was included in the 2002 study, but is no longer in operation. The 2002 study provided separate analyses for Pathfinder Men and Pathfinder Women's program; these were collapsed into one Pathfinder program in the current study. Goodwill Residential Services for Women is now operated by ARCA in the current study, Cincinnati McMahon Hall is now referred to as Dayton VOA, and VOA of Northeast and North Central Ohio is referred to as Mansfield VOA. Three of the 2002 study programs were subdivided in the current study: Community Assessment and Treatment Services was disaggregated by the Therapeutic Community (CATS male TC) and the primary residential treatment program (CATS male RTP); Harbor Light was subdivided by their "corrections" and "drug/alcohol" program; and Courage House (female program) was evaluated in addition to Spencer House (male program). Finally, the following new programs were included in the current study: Alvis House Breslin, Alvis House Ohiolink, Nova House, and Oriana SHARP. Like with the 2002 study, 8 programs were identified as "small programs" and collapsed into one category for outcome analyses. This

differs significantly from the 2002 study where 19 programs had to be collapsed due to small sample sizes.

HWHs had an average capacity of 64 participants (range 12 to 218), which was higher than the 2002 study, finding the average HWH capacity to be 56 offenders. The average successful termination rate in the current study was 56 percent, which is lower than the 2002 study's average rate of 65 percent. Likewise, length of stay for HWHs averaged 87 days. For successful completers only, the average stay was 115 days, which was about 20 days longer on average than the 2002 study reported. HWHs in the current study were treating a small percentage of low risk offenders (an average of just 10% across programs). Thirty-seven of the 44 programs served males, while 16 served females; proportionally, more HWHs are serving males and fewer are serving females than in the 2002 study.

The typical offender served in a HWH program is a 35 year old single male who might be either White or minority. In terms of criminal history, HWH participants averaged close to two prior incarcerations, and 42 percent had prior convictions. Most committed a Felony level 3 drug, person or property instant offense. The large majority of HWH participants had a current substance abuse problem; about half had employment needs, and 1/3 emotional problems. Risk categories were divided as follows: 10 percent low, 66 percent moderate and 24 percent high risk.

In terms of HWH terminations, multivariate analysis of the predictors of unsuccessful completion showed that offenders that are male and high risk are more likely to be terminated from HWH programs. Likewise, particularly potent predictors of unsuccessful HWH termination are being younger and having a current employment problem. These results are similar to the 2002 findings. With regard to reoffending, high risk, Non-White males have a

higher likelihood of new convictions upon discharge from a HWH. Only risk category predicted new incarceration (demographics did not). Also important predictors of recidivism for HWH participants were a higher number of previous incarcerations, younger age and employment problems.

Study Outcome Data

Like the 2002 study, multiple measures of recidivism were examined. The current study used new felony conviction, any conviction (misdemeanor or felony conviction) and new incarceration as its measures of recidivism. In contrast, the 2002 study used arrest and re-incarceration data. The 2002 study also provided data on the reason for re-incarceration (new crime or technical violation). Feedback from the field suggested that ODRC's data may have classified probationers who were revoked to prison as committing a new crime and not as a technical violation. In light of this feedback it was determined that the reason for re-incarceration was not reliable and therefore would not be used as an outcome measure.

Outcome analyses were computed for all participants, as well as successful completers only. This differs from the original study where outcome analyses focused only on successful program completers. Like the original study, outcome findings were also analyzed for each risk category so that treatment effects by risk could be identified. In the current study, risk was broken into three categories (low, moderate and high) as opposed to 4 categories (low, low-moderate, moderate and high) in the 2002 study.

Summary of CBCF Outcome Findings

Overall (and as expected), CBCF programs had much higher effect sizes when analyses included only the successful completers. For the CBCF/ISP sample, minimal to modest positive effects were only found with high risk offenders, regardless of how outcome was measured.

However, for successful completers, the majority of programs showed some treatment effect for the new conviction measures, although the average effect size was minimal. Effect sizes decreased substantially when new incarceration was used as the outcome measure. However, for the high risk population, regardless of how recidivism was measured, programs as a whole had a substantial impact on recidivism (difference in rates between the comparison and treatment group that ranged from 9.8 to 13.4%).

For the CBCF/Parole sample, a similar pattern emerges. When all participants are considered, matched comparison groups far and away outperform the CBCF programs, particularly with regard to new incarceration. However, when successful completers only are considered, more programs experience treatment effects, particularly with high risk offenders. As a whole, CBCF programs performed slightly poorer when parole was used as the comparison group versus ISP. One explanation for this may be that ODRC has made a concerted effort to reduce the number of revocations to prison for PRC and parole offenders by creating policy and standards that hearing officers must follow, while judges/magistrates do not have the same common language to effectuate revocations.

In order to consolidate the many measures of recidivism across risk groups and programs, summary tables were developed. These tables consider only the results of successful completers. Criteria are established to differentiate the "best performing" programs from the "worst performing" programs. Mean recidivism differences were considered in the criteria, as well as the program's successful completion rate. The current study more closely scrutinized the impact of the successful completion rate on outcome. Findings from the 2002 study suggested that programs with a successful completion rate ranging between 65 and 85 percent were more effective at reducing recidivism. Since data from this report clearly indicate that successful

completers outperform unsuccessful completers, programs with low successful completion rates are apt to have elevated outcomes. As such, only programs with rates above 65 percent were considered for selection as "best performing" programs. Best performing and worst performing programs for each of the CBCF groups were identified as follows:

Best performing CBCFs in the current study:

CBCF/ISP
- EOCC Male
- Lorain-Medina
- Oriana Cliff Skeen
- River City

CBCF/Parole
- EOCC Male
- Lorain-Medina
- Mahoning

Worst performing CBCFs in the current study:

CBCF/ISP
- Northwest CCC
- Oriana Crossweah
- Licking-Muskingum
- West Central
- WORTH Center

CBCF/Parole
- Northwest CCC
- Oriana Crossweah
- MonDay
- Oriana Summit

Specific criteria for how programs were classified as either best performers or worst performers can be found in the summary results section of the report. As mentioned previously, some programs performed well in one sample, but not the other. For example, WORTH was listed as a worst performing program in the ISP sample, but produced substantial decreases in new convictions in the CBCF/parole sample. To the contrary, River City was a top performer in the ISP sample, but only had positive effects with high risk offenders when parole was used as the comparison group.

Relative to the 2002 study, some programs improved, some produced worse outcomes, and others performed similarly.

CBCFs showing improvement from 2002:
- River City
- Lorain-Medina

CBCFs that continued to produce favorable results from 2002:
- EOCC
- SEPTA
- Mahoning

CBCFs producing less favorable results than in 2002:
- Summit County (particularly with the CBCF/parole comparison group)
- Franklin county (particularly with the CBCF/parole comparison group)

CBCFs that continued to produce unfavorable results from 2002:
- MonDay
- Licking-Muskingum

The remaining programs seemed to have similar results, wherein there were some favorable, and some unfavorable outcomes depending on the sample, risk group and recidivism measure.

Summary of HWH Outcome Findings

Like with the CBCF programs, HWH programs had much higher effect sizes when analyses included only the successful completers. However, HWHs did generally produce higher effect sizes than CBCFs for all participants. Small effects were produced for moderate and high risk offenders with the full treatment sample, particularly when outcome was measured via new felony conviction. However, like the CBCFs, HWH programs performed poorly with regard to new incarcerations when all participants were examined. To the contrary, for successful completers, overall treatment effects were found with each recidivism measure, including modest to substantial positive effects for moderate (5.8 to 6.1% differences) and high (10.4 to 14.6% difference) risk offenders. No treatment effects were found with low risk offenders, despite the population used (all participants or successful completers only) and despite the recidivism measure.

Like for the CBCFs, summary tables were constructed for HWH programs to discern between "best performing" and "worst performing" programs using similar criteria. Unlike the CBCFs, most HWH programs, despite favorable outcomes for many, were not eligible as a "best performer" due to a successful completion rate that fell below 65 percent. Hence, the programs identified as best performers were able to maintain a positive treatment effect while successfully graduating an appropriate number of participants. Best and worst performing HWHs were identified as follows:

Best performing HWHs in the current study:

- CATS Female RTP
- CCA RTC I
- Harbor Light Drug/Alcohol
- Talbert House Pathways
- Talbert House Cornerstone

Worst performing HWHs in the current study:

- Crossroads
- CTCC Canton
- Southwest Ohio Serenity Hall (SOS)
- Talbert House Beekman
- Talbert House Springrove

Relative to the 2002 study, some programs improved, some produced worse outcomes, and others performed similarly. For example, Fresh Start went from being the worst HWH performer in the 2002 study, to having just one negative effect in the current study, and a successful completion rate (62%) just outside the acceptable window. Comparisons with the 2002 findings include:

HWHs showing improvement from 2002:
- Fresh Start
- Talbert House Cornerstone
- Alternatives

- Oriana RIP
- Community Assessment and Treatment Services (CATS)

HWHs that continued to produce favorable results from 2002:
- Community Corrections Association
- Harbor Light Salvation Army
- Oriana TMRC
- Toledo VOA

HWHs that continued to produce favorable results from 2002, but had successful completion rates below 50% in the current study:
- Dayton VOA
- Cincinnati VOA Drug/Alcohol program
- CompDrug

HWHs producing less favorable results than in 2002:
- Talbert House Springrove
- Talbert House Beekman
- CCTC Canton

HWHs that continued to produce unfavorable results from 2002:
- Community Transition Center (although results did show some improvement from 2002)

Like with the CBCFs, the remaining HWH programs seemed to have similar results, wherein there were some favorable, and some unfavorable outcomes depending on the sample, risk group and recidivism measure.

Conclusions and Discussion

Overall, there are several consistent findings with the original 2002 study. Ten years of data has shown remarkable consistency with regard to the risk principle. While some anomalies existed, programs as a whole performed better when targeting moderate to high risk offenders. Furthermore, the effects of structured, intensive programming (i.e., halfway houses and CBCFs) proved again to be harmful to low risk offenders. This finding was consistent across recidivism measures, samples, programs, and now studies.

Also like the previous study, superior program performers and poor program performers could be identified, despite the use of different outcome measures. In the previous study, the most reliable outcome measure was believed to be re-incarceration. However, in the current study, the conviction data was used to most consistently identify the better performing programs. Unfortunately, disaggregating reason for incarceration was unreliable and therefore not used. As such, in the current study it is not possible to discern between return to ODRC for a new crime versus a technical violation. This is particularly important for the CBCFs as being sentenced to these facilities is oftentimes considered a final effort before commitment to ODRC. As such, an unsuccessful placement at a CBCF is likely to lead to an ODRC commitment[56]. Nonetheless, the conviction data is reliable, and when combined with other measures, it creates an accurate picture of the effects programs have on recidivism.

Similar to the first study, a risk scale with cutoffs had to be created for the current study, as there was no uniform measure of risk used across the state in both CBCF and HWH facilities. Both the risk scale developed in the original study as well as the risk scale developed for Ohio's Community Corrections Act programs informed creation of the current risk scale. However, risk measures were limited to the data consistently available across all datasets supplied by ODRC. Consequently, there are differences in both the risk factors that make up the risk scale, as well as in risk cutoffs. In the original study, four risk categories were used, whereas the current study used only three categories. The high proportion of cases in the moderate risk category suggests that if four categories had been used, some cases would fall into a low-moderate range whereas others would remain moderate. Having just three categories may have therefore diminished the

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[56] Data examining the relationship between unsuccessful completion of a CBCF and incarceration found that over three quarters of offenders who failed to successfully complete a CBCF were incarcerated within the follow-up timeframe.

expected results for moderate risk cases. Luckily, this issue will be rectified in future studies with implementation of the Ohio Risk Assessment System (ORAS).

Despite the very large sample size of over 20,000 offenders, the sample was disaggregated by programs, and then further split by termination status and risk category, leading to small sample sizes for some programs and in some risk categories. Care was taken to provide sample sizes with outcome data so that programs and/or risk categories with small sample sizes could be interpreted with caution. Nonetheless, the larger overall sample size allowed for fewer programs to be collapsed into a "smaller program" category, so that more facilities benefit from findings specific to their program.

Although there is an emerging literature examining intent to treat, ultimately it is of interest to determine how effective the programs are when offenders received a full "dosage" of treatment. With this in mind, the 2002 study reported findings for successful completers only. While the current study presented results for all participants as well as successful completers, identification of superior programs was made based upon treatment effects for successful completers. Furthermore, particular attention was paid in the current study to the impact of each program's successful completion rate. When a program completes fewer than half of its participants, it is difficult to determine the effectiveness of programs because so few receive the entire treatment package (Lowenkamp, 2004). Furthermore, outcomes for programs with very low completion rates are likely elevated as only the "cream of the crop" are examined. Consequently, the current study was careful to identify those programs that have a successful completion rate that falls into an appropriate range. CBCFs had an average successful completion rate of 78.8 percent, which was significantly higher than the average rate for HWHs

($\bar{x}$ = 55.5%). Yet this can be explained, in part by the physical plant of a HWH (staff secure) versus CBCF (locked facility).

While detailed program-level data will be provided in a supplemental report, non-program factors are still believed to affect outcome. For CBCFs, the quality of post release supervision, the quality of treatment and other services in the community, as well as the philosophy of the counties being served are also likely to affect the program's outcome. Hence, high quality residential programs could have poor outcomes that are; at least in part, attributable to interventions occurring post program release. Similarly, poor quality residential programs could have high quality post-release supervision and aftercare, and consequently outperform better quality programs. Data on post release supervision and programming for the residential sites were not collected as part of the current study.

Recommendations from this study are that programs continue to strive to meet the risk principle. Data from the study suggest that programs as a whole are targeting a low proportion of low risk offenders. With continued strong support for the risk principle in the current study, programs that do target low risk offenders should change policy so as to discontinue this practice. Likewise, for programs that performed poorly in both the 2002 and 2010 study, or for programs that have regressed, changes in the delivery of services should be made so that offenders are provided the best intervention possible. The program profiles included in the appendix should guide programs as to strengths and recommendations for improvement, based upon the principles of effective intervention.

Programs that strive to offer evidence based treatment but still failed to perform well in the current study should look toward ways of supplementing effective residential programming with comprehensive and effective aftercare treatment. Furthermore, evidence suggests that using

an effective treatment model or evidence-based interventions will fail to produce positive treatment effects if not delivered with high fidelity (Barnoski, 2004). Hence, programs offering evidence based programming should determine how effectively such programming is being delivered. The supplemental report which will highlight effective program characteristics will help inform programs as to what programmatic factors are important in producing positive program effects, and how to ensure that treatment is delivered effectively.

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APPENDIX A
RISK CATEGORIES AND WEIGHTS

Risk Assessment Factors and Weights

Factor	Male Weight	Female Weight
Prior Incarcerations		
0 to 1	0	0
2 or More	12.4	11.7
Previous Conviction		
No	0	0
Yes	7.2	4.4
Offense Level		
Felony 1 or 2	0	0
Felony 3 - 5/M	7.6	7.4
Offense Category		
Non-Property Offense	0	0
Property Offense	10.3	3.1
Substance Abuse Problem		
No	0	0
Yes	6.2	6
Employment Problem		
No	0	0
Yes	10.9	4.8
Age Category		
Above 40	0	0
40 or Below	9.9	5.7

To develop the risk scale utilized in this report cross-tabulations between the risk factors and any conviction (felony or non-traffic misdemeanor) were analyzed. The difference in the percentage of any new conviction served as the weight for each factor. Separate weights were created for males and females in the sample. The factors were then added together to create an overall risk score for each gender. The male risk score ranged in value from 0 to 64.5 with an average score of 34.3 and a standard deviation of 11.6 for the overall study sample. The female risk score ranged in value from 0 to 43.1 with an average score of 22.7 and a standard deviation of 7.0 for the overall study sample.

The correlation for the male risk score and any conviction was .22; the correlation for the female risk score and any conviction was .17. The Level of Service Inventory-Revised (LSI-R) scores were available on 4,962 of the cases (primarily CBCF cases). The LSI-R and combined study risk scale was significantly correlated at .24. Once the risk scale was calculated, a visual inspection between the risk score and re-incarceration was conducted to develop appropriate cutoff scores for risk levels. This resulted in three groups for both the male and female risk scales: low, moderate, and high. The recidivism rates for these three groups for both the males and females are reported below. Consistent with the literature on female offenders, rates of recidivism for females were much lower than that of males (VanVoorhis and Brown, 1996).

Risk Categories by Gender and Recidivism Rates

Risk Category	Recidivism Rate*
Male	
Low (0-16)	18.4%
Moderate (17-41)	36.5%
High (42+)	53.4%
Female	
Low (0-18)	10.4%
Moderate (19-31)	20.7%
High (32+)	36.3%

*Measured by Any Conviction

139

The breakdown of the study risk cutoffs and available LSI-R cutoffs are as follows:

Risk Categories for the Study Risk Scale and LSI-R for the Overall Sample

Risk Category	% (N)
Study Risk Categories	
Low	9.4 (1844)
Moderate	66.6 (13130)
High	24 (4734)
LSI-R Categories	
Low	1.2 (54)
Low-Moderate	13.9 (653)
Moderate	53 (2486)
Moderate-High	27.3 (1280)
High	4.7 (219)

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APPENDIX A
RISK CATEGORIES AND WEIGHTS

Risk Assessment Factors and Weights

Factor	Male Weight	Female Weight
Prior Incarcerations		
0 to 1	0	0
2 or More	12.4	11.7
Previous Conviction		
No	0	0
Yes	7.2	4.4
Offense Level		
Felony 1 or 2	0	0
Felony 3 - 5/M	7.6	7.4
Offense Category		
Non-Property Offense	0	0
Property Offense	10.3	3.1
Substance Abuse Problem		
No	0	0
Yes	6.2	6
Employment Problem		
No	0	0
Yes	10.9	4.8
Age Category		
Above 40	0	0
40 or Below	9.9	5.7

To develop the risk scale utilized in this report cross-tabulations between the risk factors and any conviction (felony or non-traffic misdemeanor) were analyzed. The difference in the percentage of any new conviction served as the weight for each factor. Separate weights were created for males and females in the sample. The factors were then added together to create an overall risk score for each gender. The male risk score ranged in value from 0 to 64.5 with an average score of 34.3 and a standard deviation of 11.6 for the overall study sample. The female risk score ranged in value from 0 to 43.1 with an average score of 22.7 and a standard deviation of 7.0 for the overall study sample.

The correlation for the male risk score and any conviction was .22; the correlation for the female risk score and any conviction was .17. The Level of Service Inventory-Revised (LSI-R) scores were available on 4,962 of the cases (primarily CBCF cases). The LSI-R and combined study risk scale was significantly correlated at .24. Once the risk scale was calculated, a visual inspection between the risk score and re-incarceration was conducted to develop appropriate cutoff scores for risk levels. This resulted in three groups for both the male and female risk scales: low, moderate, and high. The recidivism rates for these three groups for both the males and females are reported below. Consistent with the literature on female offenders, rates of recidivism for females were much lower than that of males (VanVoorhis and Brown, 1996).

Risk Categories by Gender and Recidivism Rates

Risk Category	Recidivism Rate*
Male	
Low (0-16)	18.4%
Moderate (17-41)	36.5%
High (42+)	53.4%
Female	
Low (0-18)	10.4%
Moderate (19-31)	20.7%
High (32+)	36.3%

*Measured by Any Conviction

The breakdown of the study risk cutoffs and available LSI-R cutoffs are as follows:

Risk Categories for the Study Risk Scale and LSI-R for the Overall Sample

Risk Category	% (N)
Study Risk Categories	
Low	9.4 (1844)
Moderate	66.6 (13130)
High	24 (4734)
LSI-R Categories	
Low	1.2 (54)
Low-Moderate	13.9 (653)
Moderate	53 (2486)
Moderate-High	27.3 (1280)
High	4.7 (219)

APPENDIX B

CBCF PROGRAM PROFILES

Eastern Ohio Correction Center Lisbon-- (Females)

Eastern Ohio Correction Center is a Halfway House located in Lisbon, Ohio. This facility serves adult females who are on direct sentence, probation, or judicial release from the Ohio Department of Rehabilitation and Correction (ODRC). Eastern Ohio Correction Center—Lisbon has been in operation since 2000 and is contracted to serve 25 women. This facility is funded by ODRC and grants. The primary services provided by the program are substance abuse treatment, education, domestic violence, parenting, sexual abuse recovery, relationship issues, skill building, financial planning, cognitive restructuring, individual sex offender treatment and reentry. EOCC-Lisbon was visited by a University of Cincinnati research team on September 20, 2006. Tracie Cunningham was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach.
- The program has accessed external consultants to advise on services.
- EOCC provides separate treatment and living environments for male and female offenders.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is stable, some funding issues have made it difficult to operate the program as designed.
- Staff and management should attempt to resolve any conflict in order to work more harmoniously.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover was not described as a problem at EOCC-Lisbon.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More initial and ongoing staff training should relate to the theory and practice of interventions used by the program and service delivery topics, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program utilizes the Level of Service Inventory-Revised as a general risk/need assessment.
- The program also uses several tools to further assess criminogenic needs, such as the SASSI to assess substance abuse need, the Hostility Inventory to assess aggression, a sexual history assessment for women convicted of a sex offense, and the EOCC questionnaire to assess general need areas.
- The program uses several responsivity assessments including the Burns anxiety assessment, the Beck Depression Inventory, the TABE to assess educational needs, and the MMPI as a personality assessment.
- Several of the aforementioned tools are also used to reassess participants prior to discharge.
- Offender risk levels are formally tracked.

Recommendations for Improvement:

- The program should develop and follow more detailed exclusionary criteria.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management, chemical dependency, and employment).
- Structured curricula or manuals are developed and followed for nearly all groups.
- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls in and out, drug testing, and signed verification).
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment by attending additional treatment groups.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, developing a relapse prevention plan, and processing.
- Aftercare services are provided by the program; 90% of offenders participate in such services.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While many of the program's targets are criminogenic in nature, others are non-criminogenic such as parenting, breaking free, mental health, self-esteem and domestic violence education. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play across all groups. Likewise, graduated rehearsal should be used to teach all resident skills in increasingly difficult situations.
- While some of the treatment uses cognitive-behavioral principles, the program also relies on a self-help and eclectic model to treat participants.
- Attempts should be made to separate higher risk offenders from lower risk individuals in the program and to lengthen the duration of treatment for higher risk women.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.

- The program should provide a more formalized structure for offenders to give input into the operation of the program, e.g., a suggestion box, community meeting or resident spokesperson.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards varied, individualized and consistently applied. Likewise, the procedure for punishment could be improved if punishers were more consistently applied, immediately applied, varied and not spread out.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 91%. This rate should fall between 65 and 85%.
- The program should strive to enhance family intervention by using structured training sessions to teach more family members key risk factors, relapse prevention and how to provide prosocial support for the offenders.

Quality Assurance

- The program is certified by the American Correctional Association.
- The program uses some internal quality assurance measures such as file review, staff feedback and monitoring of the CCIS data system.

Recommendations for Improvement:

- Internal quality assurance could be improved by providing regular observation of direct service with feedback to staff.
- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for both the EOCC FEMALE CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	N/A	N/A	N/A	N/A
Female	50.0 (39)	50.0 (39)	50.0 (54)	50.0 (54)
Race				
White	50.0 (34)	50.0 (34)	50.0 (47)	50.0 (47)
Non-white	50.0 (5)	50.0 (5)	50.0 (7)	50.0 (7)
Marital Status**				
Married	50.0 (6)	50.0 (6)	36.4 (8)	63.6 (14)
Single/not married	50.0 (33)	50.0 (33)	63.9 (46)	36.1 (26)
Age Category				
16 to 23	50.0 (7)	50.0 (7)	45.5 (10)	54.5 (12)
24 to 30	53.1 (17)	46.9 (15)	55.0 (22)	45.0 (18)
31-39	64.3 (9)	35.7 (5)	48.3 (14)	51.7 (15)
40+	33.3 (6)	66.7 (12)	47.1 (8)	52.9 (9)
Mean Age	30.9	32.0	30.9	34.0
SD	9.3	9.7	8.8	9.4

* significant difference at the .05 level for both the ISP and parole comparison groups

Descriptive Statistics for EOCC FEMALE Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.2	0.4	0.3	0.3
SD	0.4	0.9	0.6	0.7
Previous Conviction*	% (N)	% (N)	% (N)	% (N)
No	54.4 (37)	45.6 (31)	76.5 (52)	23.5 (16)
Yes	20.0 (2)	80.0 (8)	5.0 (2)	95.0 (38)
Offense Level**				
Felony 1	100.0 (2)	0.0 (0)	33.3 (2)	66.7 (4)
Felony 2	40.0 (2)	60.0 (3)	13.3 (2)	86.7 (13)
Felony 3	41.7 (5)	58.3 (7)	29.6 (8)	70.4 (19)
Felony 4	54.2 (13)	45.8 (11)	81.0 (17)	19.0 (4)
Felony 5/M	48.6 (17)	51.4 (18)	64.1 (25)	35.9 (14)
Offense Category**				
Violent/person	22.2 (2)	77.8 (7)	8.0 (2)	92.0 (23)
Sex	N/A	N/A	50.0 (1)	50.0 (1)
Drugs	42.9 (12)	57.1 (16)	69.2 (18)	30.8 (8)
Property	59.4 (19)	40.6 (13)	65.0 (26)	35.0 (14)
Traffic/DUI	100.0 (1)	0.0 (0)	100.0 (1)	0.0 (0)
Other	62.5 (5)	37.5 (3)	42.9 (6)	57.1 (8)
Substance Abuse Problem				
No	60.0 (9)	40.0 (6)	36.7 (11)	63.3 (19)
Yes	47.6 (30)	52.4 (33)	55.1 (43)	44.9 (35)
Employment Problem***				
No	38.3 (18)	61.7 (29)	47.7 (21)	52.3 (23)
Yes	67.7 (21)	32.3 (10)	51.6 (33)	48.4 (31)
Emotional Problem				
No	42.4 (14)	57.6 (19)	40.0 (18)	60.0 (27)
Yes	55.6 (25)	44.4 (20)	57.1 (36)	42.9 (27)
Risk Categories				
Low	50.0 (15)	50.0 (15)	50.0 (17)	50.0 (17)
Moderate	50.0 (24)	50.0 (24)	50.0 (35)	50.0 (35)
High	50.0 (39)	50.0 (39)	50.0 (2)	50.0 (2)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	N/A	N/A	N/A	N/A
Females	20.4 (39)	19.6 (39)	21.7 (54)	22.0 (52)
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the EOCC FEMALE CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	N/A	N/A	N/A	N/A
Female	100.0 (38)	100.0 (1)	100.0 (52)	100.0 (2)
Race				
White	86.8 (33)	100.0 (1)	86.5 (45)	100.0 (2)
Non-white	13.2 (5)	0.0 (0)	13.5 (7)	0.0 (0)
Marital Status				
Married	15.8 (6)	0.0 (0)	15.4 (8)	0.0 (0)
Single/not married	84.2 (32)	100.0 (1)	84.6 (44)	100.0 (2)
Age Category**				
16 to 23	15.8 (6)	100.0 (1)	15.4 (8)	100.0 (2)
24 to 30	44.7 (17)	0.0 (0)	42.3 (22)	0.0 (0)
31-39	23.7 (9)	0.0 (0)	26.9 (14)	0.0 (0)
40+	15.8 (6)	0.0 (0)	15.4 (8)	0.0 (0)
Mean Age	31.1	20.0	31.3	19.5
SD	9.2	N/A	8.6	0.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for EOCC FEMALE by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.2	0.0	0.3	0.0
SD	0.4	N/A	0.6	0.0
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	94.7 (36)	100.0 (1)	96.2 (50)	100.0 (2)
Yes	5.3 (2)	0.0 (0)	3.8 (2)	0.0 (0)
Offense Level				
Felony 1	5.3 (2)	0.0 (0)	3.8 (2)	0.0 (0)
Felony 2	5.3 (2)	0.0 (0)	3.8 (2)	0.0 (0)
Felony 3	13.2 (5)	0.0 (0)	15.4 (8)	0.0 (0)
Felony 4	34.2 (13)	0.0 (0)	32.7 (17)	0.0 (0)
Felony 5/M	42.1 (16)	100.0 (1)	44.2 (23)	100.0 (2)
Offense Category				
Violent/person	5.3 (2)	0.0 (0)	3.8 (2)	0.0 (0)
Sex	N/A	N/A	1.9 (1)	0.0 (0)
Drugs	31.6 (12)	0.0 (0)	34.6 (18)	0.0 (0)
Property	47.4 (18)	100.0 (1)	46.2 (24)	100.0 (2)
Traffic/DUI	2.6 (1)	0.0 (0)	1.9 (1)	0.0 (0)
Other	13.2 (5)	0.0 (0)	11.5 (6)	0.0 (0)
Substance Abuse Problem				
No	23.7 (9)	0.0 (0)	21.2 (11)	0.0 (0)
Yes	76.3 (29)	100.0 (1)	78.8 (41)	100.0 (2)
Employment Problem				
No	47.4 (18)	0.0 (0)	40.4 (21)	0.0 (0)
Yes	52.6 (20)	100.0 (1)	59.6 (31)	100.0 (2)
Emotional Problem				
No	36.8 (14)	0.0 (0)	34.6 (18)	0.0 (0)
Yes	63.2 (24)	100.0 (1)	65.4 (34)	100.0 (2)
Risk Categories				
Low	39.5 (15)	0.0 (0)	32.7 (17)	0.0 (0)
Moderate	60.5 (23)	100.0 (1)	63.5 (33)	100.0 (2)
High	N/A	N/A	3.8 (2)	0 (0)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	N/A	N/A	N/A	N/A
Females	20.2 (38)	27.0 (1)	21.5 (52)	27.0 (2)
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for EOCC FEMALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	% (N)	% (N)	% (N)	% (N)
All Participants				
Treatment	5.1 (2)	6.7 (1)	4.2 (1)	N/A
Comparison	2.6 (1)	0.0 (0)	4.2 (1)	N/A
Successful Completers				
Treatment	5.3 (2)	6.7 (1)	4.3 (1)	N/A
Comparison	2.6 (1)	0.0 (0)	4.3 (1)	N/A

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for EOCC FEMALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	% (N)	% (N)	% (N)	% (N)
All Participants				
Treatment	7.7 (3)	6.7 (1)	8.3 (2)	N/A
Comparison	5.1 (2)	6.7 (1)	4.2 (1)	N/A
Successful Completers				
Treatment	5.3 (2)	6.7 (1)	4.3 (1)	N/A
Comparison	5.3 (2)	6.7 (1)	4.3 (1)	N/A

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for EOCC FEMALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	20.5(8)	13.3(2)	25.0(6)	N/A
Comparison	23.1(9)	13.3(2)	29.2(7)	N/A
Successful Completers				
Treatment	18.4(7)	13.3(2)	21.7(5)	N/A
Comparison	23.7(9)	13.3(2)	30.4(7)	N/A

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for EOCC FEMALE--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	3.7 (2)	5.9 (1)	2.9 (1)	0.0 (0)
Comparison	3.7 (2)	0.0 (0)	2.9 (1)	50.0 (1)
Successful Completers				
Treatment	3.8 (2)	5.9 (1)	3.0 (1)	0.0 (0)
Comparison	3.8 (2)	0.0 (0)	3.0 (1)	50.0 (1)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for EOCC FEMALE--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	9.3 (5)	5.9 (1)	11.4 (4)	0.0 (0)
Comparison	11.1 (6)	0.0 (0)	14.3 (5)	50.0 (1)
Successful Completers				
Treatment	7.7 (4)	5.9 (1)	9.1 (3)	0.0 (0)
Comparison	11.5 (6)	0.0 (0)	15.2 (5)	50.0 (1)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for EOCC FEMALE--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.8 (15)	11.8 (2)	34.3 (12)	50.0 (1)
Comparison	3.7 (2)	0.0 (0)	5.7 (2)	0.0 (0)
Successful Completers				
Treatment	25.0 (13)	11.8 (2)	30.3 (10)	50.0 (1)
Comparison	3.8 (2)	0.0 (0)	6.1 (2)	0.0 (0)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Eastern Ohio Correction Center --Wintersville (Males)

Eastern Ohio Correction Center is a Halfway House located in Wintersville, Ohio. This facility serves adult males who are on direct sentence, probation or judicial release from the Ohio Department of Rehabilitation and Correction (ODRC). Eastern Ohio Correction Center--Wintersville has been in operation since 1990 and is contracted to serve 76 men. This facility is funded by ODRC and grants. The primary services provided by the program are substance abuse treatment, education, sex offender education, anger management, domestic violence, skill building, financial planning, parenting, family issues, cognitive restructuring, prosocial values, and reentry. EOCC—Wintersville was visited by a University of Cincinnati research team on September 19, 2006. At the time of the visit, there were 74 male offenders. Tracie Cunningham was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising of staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach.
- The program has accessed external consultants to advise on services.
- EOCC provides separate treatment and living environments for male and female offenders.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders and use such literature to guide programmatic changes.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is stable, some funding issues have made it difficult to operate the program as designed.
- Staff and management should attempt to resolve any conflict in order to work more harmoniously.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a signification amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

- More initial and ongoing training should relate to the theory and practice of interventions used by the program and to service delivery topics, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses several tools to further assess criminogenic needs, such as the SASSI and MAST to assess substance abuse need and the Hostility Inventory to assess aggression.
- The LSI-R is used to reassess participants prior to discharge.
- Offender risk levels are formally tracked and the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should develop and follow more detailed exclusionary criteria.
- While the program has access to several responsivity assessments including the Beck Depression Inventory, the TABE to assess educational needs, and the MMPI as a personality assessment, these tools are not regularly used to assess offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management, aggression, family, sex offending and employment).
- The primary treatment model used by the program is a cognitive-behavioral model.
- Structured curricula or manuals are developed and followed for nearly all groups.
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment by attending additional treatment groups.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Staff are matched to interventions based in part on professional experience, motivation and skill level.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, and processing.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The program should offer additional structured skill building opportunities, including more consistent use of modeling and role play across groups. Likewise, graduated rehearsal should be used more regularly to teach all residents skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, phone calls and drug testing), the monitoring mechanisms should be enhanced.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The program should provide a more formalized structure for offenders to give input into the operation of the program, e.g., a suggestion box, community meeting or resident spokesperson.

- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, individualized and clearly tied to the prosocial behavior.
- The procedure by which offenders are punished could be improved if the purpose of punishers were viewed as a mechanism to extinguish unwanted behavior, if they were individualized, varied, immediately applied, not spread out, escape were impossible and if prosocial alternatives were taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 86%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond probation or parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses some internal quality assurance measures such as file review, staff feedback and monitoring of the CCIS data system.
- The program has participated in past process and outcome evaluations, and performed better that the comparison group on a recent outcome evaluation.

Recommendations for Improvement:

- Internal quality assurance could be improved by increasing the frequency of observation of direct service with feedback to staff.
- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for both the EOCC MALE CBCF/ISP and CBCF/Parole Groups by Group Membership

| Variable | CBCF/ISP | | CBCF/Parole | |
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (100)	50.0 (100)	50.0 (99)	50.0 (99)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (85)	50.0 (85)	50.0 (82)	50.0 (82)
Non-white	50.0 (15)	50.0 (15)	50.0 (17)	50.0 (17)
Marital Status				
Married	62.1 (18)	37.9 (11)	57.6 (19)	42.4 (14)
Single/not married	48.0 (82)	52.0 (89)	51.6 (80)	48.4 (75)
Age Category				
16 to 23	42.6 (23)	57.4 (31)	44.3 (27)	55.7 (34)
24 to 30	39.1 (18)	60.9 (28)	44.2 (19)	55.8 (24)
31-39	56.0 (28)	44.0 (22)	57.1 (24)	42.9 (18)
40+	62.0 (31)	38.0 (19)	55.8 (29)	44.2 (23)
Mean Age	33.6	30.9	32.6	32.9
SD	10.9	10.8	10.9	10.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for EOCC MALE Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.5	0.5	0.6	0.9
SD	0.8	0.8	0.9	1.4
Previous Conviction**	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	50.0 (64)	50.0 (64)	61.2 (63)	38.8 (40)
Yes	50.0 (36)	50.0 (36)	37.9 (36)	62.1 (59)
Offense Level**				
Felony 1	66.7 (2)	33.3 (1)	11.8 (2)	88.2 (15)
Felony 2	66.7 (4)	33.3 (2)	14.8 (4)	85.2 (23)
Felony 3	53.3 (24)	46.7 (21)	52.1 (25)	47.9 (23)
Felony 4	56.5 (35)	43.5 (27)	60.0 (33)	40.0 (22)
Felony 5/M	41.7 (35)	58.3 (49)	68.6 (35)	31.4 (16)
Offense Category**				
Violent/person	43.8 (7)	56.2 (9)	20.6 (7)	79.4 (27)
Sex	50.0 (13)	50.0 (13)	50.0 (14)	50.0 (14)
Drugs	50.6 (41)	49.4 (40)	68.5 (37)	31.5 (17)
Property	49.0 (25)	51.0 (26)	51.8 (29)	48.2 (27)
Traffic/DUI	55.6 (5)	44.4 (4)	75.0 (3)	25.0 (1)
Other	52.9 (9)	47.1 (8)	40.9 (9)	59.1 (13)
Substance Abuse Problem**				
No	45.0 (9)	55.0 (11)	32.0 (8)	68.0 (17)
Yes	50.6 (91)	49.4 (89)	52.6 (91)	47.4 (82)
Employment Problem***				
No	37.6 (47)	62.4 (78)	53.1 (43)	46.9 (38)
Yes	70.7 (53)	29.3 (22)	47.9 (56)	52.1 (61)
Emotional Problem***				
No	40.9 (54)	59.1 (78)	48.6 (53)	51.4 (56)
Yes	67.6 (46)	32.4 (22)	51.7 (46)	48.3 (43)
Risk Categories				
Low	50.0 (7)	50.0 (7)	50.0 (7)	50.0 (7)
Moderate	50.0 (80)	50.0 (80)	50.0 (70)	50.0 (70)
High	50.0 (13)	50.0 (13)	50.0 (22)	50.0 (22)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	32.3 (100)	29.8 (100)	33.8 (99)	34.5 (98)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the EOCC MALE CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (87)	100.0 (13)	100.0 (86)	100.0 (13)
Female	N/A	N/A	N/A	N/A
Race				
White	83.9 (73)	92.3 (12)	81.4 (70)	92.3 (12)
Non-white	16.1 (14)	7.7 (1)	18.6 (16)	7.7 (1)
Marital Status				
Married	17.2 (15)	23.1 (3)	19.8 (17)	15.4 (2)
Single/not married	82.8 (72)	76.9 (10)	80.2 (69)	84.6 (11)
Age Category				
16 to 23	25.3 (22)	7.7 (1)	27.9 (24)	23.1 (3)
24 to 30	17.2 (15)	23.1 (3)	17.4 (15)	30.8 (4)
31-39	26.4 (23)	38.5 (5)	24.4 (21)	23.1 (3)
40+	31 (27)	30.8 (4)	30.2 (26)	23.1 (3)
Mean Age	33.5	34.5	32.9	30.2
SD	11.1	9.5	11.2	8.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for EOCC MALE by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.5	0.9	0.6	0.9
SD	0.8	1.2	0.8	1.2
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	64.4 (56)	61.5 (8)	64.0 (55)	61.5 (8)
Yes	35.6 (31)	38.5 (5)	36.0 (31)	38.5 (5)
Offense Level				
Felony 1	2.3 (2)	0.0 (0)	2.3 (2)	0.0 (0)
Felony 2	4.6 (4)	0.0 (0)	4.7 (4)	0.0 (0)
Felony 3	26.4 (23)	7.7 (1)	27.9 (24)	7.7 (1)
Felony 4	33.3 (29)	46.2 (6)	31.4 (27)	46.2 (6)
Felony 5/M	33.3 (29)	46.2 (6)	33.7 (29)	46.2 (6)
Offense Category				
Violent/person	8.0 (7)	0.0 (0)	8.1 (7)	0.0 (0)
Sex	13.8 (12)	7.7 (1)	15.1 (13)	7.7 (1)
Drugs	43.7 (38)	23.1 (3)	39.5 (34)	23.1 (3)
Property	21.8 (19)	46.2 (6)	25.6 (22)	53.8 (7)
Traffic/DUI	3.4 (3)	15.4 (2)	2.3 (2)	7.7 (1)
Other	9.2 (8)	7.7 (1)	9.3 (8)	7.7 (1)
Substance Abuse Problem				
No	9.2 (8)	7.7 (1)	9.3 (8)	0.0 (0)
Yes	90.8 (79)	92.3 (12)	90.7 (78)	100.0 (13)
Employment Problem**				
No	50.6 (44)	23.1 (3)	47.7 (41)	15.4 (2)
Yes	49.4 (43)	76.9 (10)	52.3 (45)	84.6 (11)
Emotional Problem***				
No	58.6 (51)	23.1 (3)	57.0 (49)	30.8 (4)
Yes	41.4 (36)	76.9 (10)	43.0 (37)	69.2 (9)
Risk Categories**				
Low	8.0 (7)	0.0 (0)	8.1 (7)	0.0 (0)
Moderate	81.6 (71)	69.2 (9)	74.4 (64)	46.2 (6)
High	10.3 (9)	30.8 (4)	17.4 (15)	53.8 (7)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	31.3 (87)	38.9 (13)	32.6 (86)	41.8 (13)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for EOCC MALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)***
All Participants				
Treatment	22.0 (22)	0.0 (0)	23.8 (19)	23.1 (3)
Comparison	25.0 (25)	14.3 (1)	20.0 (16)	61.5 (8)
Successful Completers				
Treatment	17.2 (15)	0.0 (0)	19.7 (14)	11.1 (1)
Comparison	25.3 (22)	14.3 (1)	21.1 (15)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for EOCC MALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)***
All Participants				
Treatment	27.0 (27)	14.3 (1)	28.8 (23)	23.1 (3)
Comparison	29.0 (29)	14.3 (1)	25.0 (20)	61.5 (8)
Successful Completers				
Treatment	21.8 (19)	14.3 (1)	23.9 (17)	11.1 (1)
Comparison	28.7 (25)	14.3 (1)	25.4 (18)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for EOCC MALE--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)***
All Participants				
Treatment	23.0 (23)	0.0 (0)	23.8 (19)	30.8 (4)
Comparison	30.0 (30)	14.3 (1)	25.0 (20)	69.2 (9)
Successful Completers				
Treatment	17.2 (15)	0.0 (0)	19.7 (14)	11.1 (1)
Comparison	28.7 (25)	14.3 (1)	25.4 (18)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for EOCC MALE--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	25.3 (25)	0.0 (0)	24.3 (17)	36.4 (8)
Comparison	23.2 (23)	14.3 (1)	20.0 (14)	36.4 (8)
Successful Completers				
Treatment	20.9 (18)	0.0 (0)	20.3 (13)	33.3 (5)
Comparison	24.4 (21)	14.3 (1)	21.9 (14)	40.0 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for EOCC MALE--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High***
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	30.3 (30)	14.3 (1)	28.6 (20)	40.9 (9)
Comparison	36.4 (36)	14.3 (1)	30.0 (21)	63.6 (14)
Successful Completers				
Treatment	25.6 (22)	14.3 (1)	25.0 (16)	33.3 (5)
Comparison	38.4 (33)	14.3 (1)	32.8 (21)	73.3 (11)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for EOCC MALE--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	26.3 (26)	0.0 (0)	22.9 (16)	45.5 (10)
Comparison	38.4 (38)	0.0 (0)	38.6 (27)	50.0 (11)
Successful Completers				
Treatment	20.9 (18)	0.0 (0)	20.3 (13)	33.3 (5)
Comparison	40.7 (35)	0.0 (0)	42.2 (27)	53.3 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Franklin County Community Based Corrections Facility

Franklin County CBCF is a Community Based Corrections Facility located in Columbus, Ohio. This facility serves adult males and females who are probationers, on diversion, and offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Franklin County CBCF has been in operation since 1993 and is contracted to serve 160 men and 40 women. This facility is primarily funded by ODRC. The primary internal services provided by the program are education, mental health, anger management, parenting, employment readiness, substance abuse treatment and cognitive restructuring. Franklin County CBCF was visited by a University of Cincinnati research team on September 25, 2006. At the time of the visit, there were 155 male offenders and 36 female offenders. Molly Robbins was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program director provides direct services via group treatment and orientation training to offenders in the program.
- The program is well established and supported by the criminal justice community.
- Funding is relatively stable, allowing the program to operate as designed.
- Staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program should regularly consult the literature related to effective interventions with offenders and disseminate such literature to facility staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- There were moderate issues with how problems or crises were handled resulting in some disruption of programming and services. Such issues should be handled with a problem-solving approach.
- The program has not accessed external consultants to advise on services.
- Males and females should be kept in separate treatment programs and the program should avoid coed living spaces.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and effective use of reinforcement.
- Staff should receive more training that relates to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff should have more input into the structure of the program.

- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI to further assess substance abuse need, as well as the TABE to assess educational need.
- The program conducts reassessment using the LSI-R.
- Based upon file review, the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management and employment).
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- All of the groups utilize a curriculum to structure the treatment and all groups are actively facilitated by staff.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Staff are matched to groups based on experience and skill level.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The procedure by with offenders are punished appears appropriate. Likewise, staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program teaches offenders to monitor and anticipate high risk situations via group activities.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%. Furthermore, program completion is determined by the acquisition of prosocial skills.
- Aftercare services are provided by external professionals and 90% of offenders participate in such services.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature (i.e., substance abuse, employment readiness and antisocial thinking), others are non-criminogenic such as parenting and grief and loss. While it is appropriate to target responsivity issues, the program should ensure that at least 75% of the treatment focus is on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While there are elements of cognitive-behavioral treatment in the program, treatment is also based upon a positive peer culture and education model.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.

- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there are some mechanisms in place to monitor offenders while in the community (drug tests. Schedules, location checks and phone calls in and out) monitoring should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, individualized, desired by the offenders, varied, and the offender clearly knows why s/he is being rewarded.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment services, offender re-assessments, staff feedback, and supervision of training protocol for treatment curriculum.
- The program has been formally evaluated in the past and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- The program should provide increased monitoring of external providers consisting also of direct observation of treatment delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for both the FRANKLIN CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (329)	50.0 (329)	50.0 (392)	50.0 (392)
Female	50.0 (80)	50.0 (80)	50.0 (73)	50.0 (73)
Race				
White	50.0 (196)	50.0 (196)	50.0 (207)	50.0 (207)
Non-white	50.0 (213)	50.0 (213)	50.0 (258)	50.0 (258)
Marital Status*				
Married	32.5 (26)	67.5 (54)	31.0 (36)	69.0 (80)
Single/not married	51.9 (383)	48.1 (355)	54.9 (429)	45.1 (352)
Age Category				
16 to 23	51.4 (111)	48.6 (105)	51.2 (124)	48.8 (118)
24 to 30	52.6 (113)	47.4 (102)	50.0 (124)	50.0 (124)
31-39	49.5 (99)	50.5 (101)	51.4 (111)	48.6 (105)
40+	46.0 (86)	54.0 (101)	47.3 (106)	52.7 (118)
Mean Age	31.0	32.6	31.4	34.8
SD	9.3	10.8	9.6	10.3

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for FRANKLIN Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.9	1.0	1.1	1.3
SD	1.6	1.9	1.7	1.7
Previous Conviction*	% (N)	% (N)	% (N)	% (N)
No	54.1 (286)	45.9 (243)	76.1 (300)	23.9 (94)
Yes	42.6 (123)	57.4 (166)	29.9 (158)	70.1 (370)
Offense Level*				
Felony 1	50.0 (9)	50.0 (9)	13.6 (9)	86.4 (57)
Felony 2	73.0 (46)	27.0 (17)	28.4 (48)	71.6 (121)
Felony 3	49.3 (72)	50.7 (74)	37.9 (85)	62.1 (139)
Felony 4	52.3 (114)	47.7 (104)	65.6 (137)	34.4 (72)
Felony 5/M	45 (168)	55 (205)	71.3 (186)	28.7 (75)
Offense Category*				
Violent/person	57.4 (112)	42.6 (83)	38.7 (130)	61.3 (206)
Sex	50.0 (1)	50.0 (1)	50.0 (1)	50.0 (1)
Drugs	40.7 (111)	59.3 (162)	56.4 (115)	43.6 (89)
Property	51.9 (112)	48.1 (104)	57.4 (136)	42.6 (101)
Traffic/DUI	25.0 (2)	75.0 (6)	100.0 (2)	0.0 (0)
Other	57.3 (71)	42.7 (53)	54.4 (81)	45.6 (68)
Substance Abuse Problem*				
No	22.4 (15)	77.6 (52)	9.8 (16)	90.2 (147)
Yes	52.5 (394)	47.5 (357)	59.0 (449)	41.0 (312)
Employment Problem*				
No	43.2 (209)	56.8 (275)	56.6 (236)	43.4 (181)
Yes	59.9 (200)	40.1 (134)	44.6 (229)	55.4 (284)
Emotional Problem*				
No	47.9 (293)	52.1 (319)	55.0 (337)	45.0 (276)
Yes	56.3 (116)	43.7 (90)	41.2 (128)	58.8 (183)
Risk Categories				
Low	50.0 (35)	50.0 (35)	50.0 (35)	50.0 (35)
Moderate	50.0 (305)	50.0 (305)	50.0 (311)	50.0 (311)
High	50.0 (69)	50.0 (69)	50.0 (112)	50.0 (112)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	26.3 (409)	25.7 (409)	34.1 (389)	35.4 (384)
Females	4.6 (409)	4.4 (409)	24.5 (69)	24.7 (69)
Overall	30.9 (409)	30.1 (409)	32.1 (465)	32.9 (465)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the FRANKLIN CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	80.3 (249)	80.8 (80)	84.0 (288)	85.2 (104)
Female	19.7 (61)	19.2 (19)	16.0 (55)	14.8 (18)
Race				
White	48.7 (151)	45.5 (45)	45.5 (156)	41.8 (51)
Non-white	51.3 (159)	54.5 (54)	54.5 (187)	58.2 (71)
Marital Status				
Married	5.8 (18)	8.1 (8)	7.0 (24)	9.8 (12)
Single/not married	94.2 (292)	91.9 (91)	93 (319)	90.2 (110)
Age Category				
16 to 23	24.5 (76)	35.4 (35)	24.8 (85)	32.0 (39)
24 to 30	27.7 (86)	27.3 (27)	25.1 (86)	31.1 (38)
31-39	25.5 (79)	20.2 (20)	25.7 (88)	18.9 (23)
40+	22.3 (69)	17.2 (17)	24.5 (84)	18.0 (22)
Mean Age	31.6	29.1	32.1	29.5
SD	9.4	8.7	9.7	9.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for FRANKLIN CBCF by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.9	0.9	1.1	1.1
SD	1.7	1.4	1.8	1.5
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	71.3 (221)	65.7 (65)	67.1 (226)	61.2 (74)
Yes	28.7 (89)	34.3 (34)	32.9 (111)	38.8 (47)
Offense Level				
Felony 1	2.6 (8)	1.0 (1)	2.3 (8)	0.8 (1)
Felony 2	12.6 (39)	7.1 (7)	12.0 (41)	5.7 (7)
Felony 3	17.1 (53)	19.2 (19)	16.9 (58)	22.1 (27)
Felony 4	27.4 (85)	29.3 (29)	29.4 (101)	29.5 (36)
Felony 5/M	40.3 (125)	43.4 (43)	39.4 (135)	41.8 (51)
Offense Category				
Violent/person	28.4 (88)	24.2 (24)	28.6 (98)	26.2 (32)
Sex	0.0 (0)	1.0 (1)	0.0 (0)	0.8 (1)
Drugs	27.7 (86)	25.3 (25)	26.2 (90)	20.5 (25)
Property	25.5 (79)	33.3 (33)	26.8 (92)	36.1 (44)
Traffic/DUI	0.6 (2)	0.0 (0)	0.6 (2)	0.0 (0)
Other	17.7 (55)	16.2 (16)	17.8 (61)	16.4 (20)
Substance Abuse Problem				
No	3.5 (11)	4.0 (4)	3.5 (12)	3.3 (4)
Yes	96.5 (299)	96.0 (95)	96.5 (331)	96.7 (118)
Employment Problem*				
No	62.9 (195)	14.1 (14)	64.1 (220)	13.1 (16)
Yes	37.1 (115)	85.9 (85)	35.9 (123)	86.9 (106)
Emotional Problem				
No	72.3 (224)	69.7 (69)	73.5 (252)	69.7 (85)
Yes	27.7 (86)	30.3 (30)	26.5 (91)	30.3 (37)
Risk Categories*				
Low	9.4 (29)	6.1 (6)	8.6 (29)	5.0 (6)
Moderate	77.7 (241)	64.6 (64)	72.7 (245)	54.5 (66)
High	12.9 (40)	29.3 (29)	18.7 (63)	40.5 (49)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	24.8 (310)	30.9 (99)	31.9 (286)	40.0 (103)
Females	4.5 (310)	5.0 (99)	23.1 (51)	28.4 (18)
Overall	29.3 (310)	36.0 (99)	30.0 (343)	38.0 (122)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for FRANKLIN CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.2 (140)	20.0 (7)	29.8 (91)	60.9 (42)
Comparison	31.1 (127)	11.4 (4)	29.2 (89)	49.3 (34)
Successful Completers				
Treatment	28.4 (88)	13.8 (4)	26.6 (64)	50.0 (20)
Comparison	31.0 (96)	10.3 (3)	30.3 (73)	50.0 (20)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for FRANKLIN CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.3 (173)	31.4 (11)	37.4 (114)	69.6 (48)
Comparison	37.4 (153)	17.1 (6)	35.4 (108)	56.5 (39)
Successful Completers				
Treatment	37.1 (115)	20.7 (6)	35.3 (85)	60.0 (24)
Comparison	36.8 (114)	17.2 (5)	36.5 (88)	52.5 (21)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for FRANKLIN CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)***
All Participants				
Treatment	40.6 (166)	28.6 (10)	38.4 (117)	56.5 (39)
Comparison	38.4 (157)	20.0 (7)	35.1 (107)	62.3 (43)
Successful Completers				
Treatment	31.9 (99)	24.1 (7)	31.5 (76)	40.0 (16)
Comparison	37.1 (115)	20.7 (6)	34.4 (83)	65.0 (26)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for FRANKLIN CITY--CBCF/Parole Sample

	Risk Levels			
	All**	Low**	Moderate**	High**
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.2 (175)	20.0 (7)	33.1 (103)	58.0 (65)
Comparison	28.2 (129)	0.0 (0)	25.7 (80)	43.8 (49)
Successful Completers				
Treatment	31.5 (106)	13.8 (4)	29.8 (73)	46.0 (29)
Comparison	28. (95)	0.0 (0)	26.5 (65)	47.6 (30)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for FRANKLIN CITY--CBCF/Parole Sample

	Risk Levels			
	All*	Low*	Moderate*	High**
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.9 (212)	31.4 (11)	40.2 (125)	67.9 (76)
Comparison	37.5 (159)	0.0 (0)	31.2 (97)	55.4 (62)
Successful Completers				
Treatment	40.4 (136)	20.7 (6)	38.4 (94)	57.1 (36)
Comparison	33.2 (112)	0.0 (0)	30.6 (75)	58.7 (37)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for FRANKLIN CITY--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.4 (194)	28.6 (10)	37.9 (118)	58.9 (66)
Comparison	26.4 (121)	11.4 (4)	21.2 (66)	45.5 (51)
Successful Completers				
Treatment	32.6 (110)	24.1 (7)	31.0 (76)	42.9 (27)
Comparison	25.5 (86)	10.3 (3)	21.6 (53)	47.6 (30)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Licking-Muskingum Community Correction Center (LMCCC)

Licking-Muskingum Community Correction Center is a Community Based Corrections Facility located in Newark, Ohio. This facility primarily serves adult males on probation, but also some offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Licking-Muskingum Community Correction Center has been in operation since 1994 and is contracted to serve 57 men. This facility is funded primarily by ODRC. The services provided by the program include education, mental health, substance abuse treatment, employment readiness, nutrition/wellness, relationship issues, cognitive restructuring and aftercare. Licking-Muskingum Community Correction Center was visited by a University of Cincinnati research team on November 1, 2006. At the time of the visit, there were 56 male offenders. Brent Bloomster was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program director provides direct services via group treatment and conducting assessments to offenders in the program.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- While the program consults a range of literature related to effective interventions with offenders, including peer reviewed journals, it should be more apparent that this literature informs the program's treatment model and selection of treatment curricula.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More initial and ongoing training should relate to the theory and practice of interventions used by the program and to service delivery topics, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised as a general risk/need assessment.
- The program also uses the SASSI and the ODADAS biopsychosocial to further assess substance abuse need, as well as the TABE to assess educational need.
- The program conducts reassessment using the LSI-R.
- Based upon file review, the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, and learning styles.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management, education and employment).
- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Structured curricula or manuals are developed and followed for nearly all groups.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The program provides the structure for offenders to give input into the operation of the program via written suggestions during phase advancement.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 71%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, processing, and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.
- The program provides aftercare to residents with chemical dependency issues. Approximately 95% of the offenders participate in such services.

Recommendations for Improvement:

- While many of the program's targets are criminogenic in nature, others are non-criminogenic such as nutrition and physical wellness. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there are elements of cognitive-behavioral treatment in the program, treatment is also based upon a 12-step, reality therapy, and eclectic model.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, drug testing, site checks, and phone calls in and out), the monitoring mechanisms should be enhanced.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used more regularly to teach residents skills in increasingly difficult situations.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1. Currently, punishers are used liberally while reinforcers are used moderately.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The process by which offenders are punished could be improved by improving staff consistency, ensuring that the punishers match the infractions, disallowing escape from punishers, immediately applying the punisher following the infraction and teaching prosocial alternatives.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality assurance mechanisms such as file review, client surveys, reassessments, curricula review, and CCIS audits.
- The program has participated in past process and outcome evaluations, and performed better that the comparison group on at least some performance measures.

Recommendations for Improvement:

- Internal quality assurance could be improved by providing regular observation of direct service with feedback to staff.
- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for LICKING-MUSKINGUM by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (105)	50.0 (105)	50.0 (107)	50.0 (107)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (87)	50.0 (87)	50.0 (85)	50.0 (85)
Non-white	50.0 (18)	50.0 (18)	50.0 (22)	50.0 (22)
Marital Status**				
Married	46.7 (14)	53.3 (16)	37.1 (13)	62.9 (22)
Single/not married	50.6 (91)	49.4 (89)	55.3 (94)	44.7 (76)
Age Category				
16 to 23	51.9 (42)	48.1 (39)	58.7 (44)	41.3 (31)
24 to 30	51.9 (28)	48.1 (26)	47.3 (26)	52.7 (29)
31-39	46.9 (15)	53.1 (17)	40.0 (18)	60.0 (27)
40+	46.5 (20)	53.5 (23)	48.7 (19)	51.3 (20)
Mean Age	28.9	30.2	28.7	33.6
SD	9.2	9.6	9.1	10.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for LICKING-MUSKINGUM Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.5	0.7	0.7	1.2
SD	0.9	1.2	1.1	1.8
Previous Conviction***	% (N)	% (N)	% (N)	% (N)
No	44.8 (60)	55.2 (74)	55.9 (57)	44.1 (45)
Yes	59.2 (45)	40.8 (31)	44.6 (50)	55.4 (62)
Offense Level**				
Felony 1	50.0 (2)	50.0 (2)	10.5 (2)	89.5 (17)
Felony 2	78.6 (11)	21.4 (3)	36.7 (11)	63.3 (19)
Felony 3	54.5 (24)	45.5 (20)	35.6 (21)	64.4 (38)
Felony 4	45.0 (27)	55.0 (33)	65.9 (27)	34.1 (14)
Felony 5/M	46.6 (41)	53.4 (47)	70.8 (46)	29.2 (19)
Offense Category**				
Violent/person	60 (27)	40 (18)	37.9 (25)	62.1 (41)
Sex	N/A	N/A	N/A	N/A
Drugs	47.6 (39)	52.4 (43)	67.3 (35)	32.7 (17)
Property	48.2 (27)	51.8 (29)	50.0 (35)	50.0 (35)
Traffic/DUI	0.0 (0)	100.0 (3)	N/A	N/A
Other	50.0 (12)	50.0 (12)	46.2 (12)	53.8 (14)
Substance Abuse Problem*				
No	0.0 (0)	100.0 (10)	0.0 (0)	100.0 (20)
Yes	52.5 (105)	47.5 (95)	55.2 (107)	44.8 (87)
Employment Problem				
No	49.0 (70)	51.0 (73)	53.1 (60)	46.9 (53)
Yes	52.2 (35)	47.8 (32)	46.5 (47)	53.5 (54)
Emotional Problem*				
No	38.6 (51)	61.4 (81)	43.0 (52)	57.0 (69)
Yes	69.2 (54)	30.8 (24)	59.1 (55)	40.9 (38)
Risk Categories				
Low	50.0 (11)	50.0 (11)	50.0 (11)	50.0 (11)
Moderate	50.0 (78)	50.0 (78)	50.0 (65)	50.0 (65)
High	50.0 (16)	50.0 (16)	50.0 (31)	50.0 (31)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	31.4 (105)	30.3 (105)	34.3 (107)	35.3 (106)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for LICKING-MUSKINGUM by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (77)	100.0 (28)	100.0 (69)	100.0 (38)
Female	N/A	N/A	N/A	N/A
Race				
White	83.1 (64)	82.1 (23)	78.3 (54)	81.6 (31)
Non-white	16.9 (13)	17.9 (5)	21.7 (15)	18.4 (7)
Marital Status				
Married	16.9 (13)	3.6 (1)	15.9 (11)	5.3 (2)
Single/not married	83.1 (64)	96.4 (27)	84.1 (58)	94.7 (36)
Age Category**				
16 to 23	33.8 (26)	57.1 (16)	30.4 (21)	60.5 (23)
24 to 30	26.0 (20)	28.6 (8)	23.2 (16)	26.3 (10)
31-39	16.9 (13)	7.1 (2)	21.7 (15)	7.9 (3)
40+	23.4 (18)	7.1 (2)	24.6 (17)	5.3 (2)
Mean Age	30.2	25.1	30.9	24.6
SD	9.4	7.8	9.3	7.2

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for LICKING-MUSKINGUM by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.5	0.6	0.6	0.7
SD	0.9	1.1	1.0	1.3
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	58.4 (45)	53.6 (15)	55.1 (38)	50.0 (19)
Yes	41.6 (32)	46.4 (13)	44.9 (31)	50.0 (19)
Offense Level				
Felony 1	2.6 (2)	0.0 (0)	2.9 (2)	0.0 (0)
Felony 2	9.1 (7)	14.3 (4)	10.1 (7)	10.5 (4)
Felony 3	26 (20)	14.3 (4)	21.7 (15)	15.8 (6)
Felony 4	20.8 (16)	39.3 (11)	21.7 (15)	31.6 (12)
Felony 5/M	41.6 (32)	32.1 (9)	43.5 (30)	42.1 (16)
Offense Category				
Violent/person	23.4 (18)	32.1 (9)	21.7 (15)	26.3 (10)
Sex	N/A	N/A	N/A	N/A
Drugs	37.7 (29)	35.7 (10)	36.2 (25)	26.3 (10)
Property	24.7 (19)	28.6 (8)	27.5 (19)	42.1 (16)
Traffic/DUI	N/A	N/A	N/A	N/A
Other	14.3 (11)	3.6 (1)	14.5 (10)	5.3 (2)
Substance Abuse Problem				
No	N/A	N/A	N/A	N/A
Yes	100.0 (77)	100.0 (28)	100.0 (69)	100.0 (38)
Employment Problem*				
No	90.9 (70)	0.0 (0)	87.0 (60)	0.0 (0)
Yes	9.1 (7)	100.0 (28)	13.0 (9)	100.0 (38)
Emotional Problem*				
No	54.5 (42)	32.1 (9)	56.5 (39)	34.2 (13)
Yes	45.5 (35)	67.9 (19)	43.5 (30)	65.8 (25)
Risk Categories*				
Low	14.3 (11)	0.0 (0)	15.9 (11)	0.0 (0)
Moderate	77.9 (60)	64.3 (18)	68.1 (47)	47.4 (18)
High	7.8 (6)	35.7 (10)	15.9 (11)	52.6 (20)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	28.1 (77)	40.4 (28)	29.6 (69)	42.8 (38)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for LICKING/MUSK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	% (N)**	% (N)	% (N)**	% (N)
All Participants				
Treatment	41.9 (44)	0.0 (0)	44.9 (35)	56.3 (9)
Comparison	25.7 (27)	0.0 (0)	25.6 (20)	43.8 (7)
Successful Completers				
Treatment	31.2 (24)	0.0 (0)	38.3 (23)	16.7 (1)
Comparison	19.5 (15)	0.0 (0)	23.3 (14)	16.7 (1)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LICKING/MUSK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	% (N)**	% (N)	% (N)**	% (N)
All Participants				
Treatment	42.9 (45)	0.0 (0)	46.2 (36)	56.3 (9)
Comparison	30.5 (32)	9.1 (1)	30.8 (24)	43.8 (7)
Successful Completers				
Treatment	32.5 (25)	0.0 (0)	40.0 (24)	16.7 (1)
Comparison	23.4 (18)	9.1 (1)	26.7 (16)	16.7 (1)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LICKING/MUSK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	% (N)*	% (N)	% (N)*	% (N)
All Participants				
Treatment	56.2 (59)	9.1 (1)	60.3 (47)	68.8 (11)
Comparison	33.3 (35)	0.0 (0)	28.2 (22)	81.3 (13)
Successful Completers				
Treatment	45.5 (35)	9.1 (1)	53.3 (32)	33.3 (2)
Comparison	28.6 (22)	0.0 (0)	28.3 (17)	83.3 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for LICKING-MUSK--CBCF/Parole Sample

	Risk Levels			
	All**	Low	Moderate**	High**
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	43.9 (47)	0.0 (0)	46.2 (30)	54.8 (17)
Comparison	21.5 (23)	9.1 (1)	20.0 (13)	29.0 (9)
Successful Completers				
Treatment	29.0 (20)	0.0 (0)	38.3 (18)	18.2 (2)
Comparison	21.7 (15)	9.1 (1)	21.3 (10)	36.4 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LICKING-MUSK--CBCF/Parole Sample

	Risk Levels			
	All**	Low	Moderate**	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.9 (48)	0.0 (0)	47.7 (31)	54.8 (17)
Comparison	28.0 (30)	9.1 (1)	26.2 (17)	38.7 (12)
Successful Completers				
Treatment	30.4 (21)	0.0 (0)	40.4 (19)	18.2 (2)
Comparison	23.2 (16)	9.1 (1)	23.4 (11)	36.4 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LICKING-MUSK--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	61.7 (66)	9.1 (1)	63.1 (41)	77.4 (24)
Comparison	24.3 (26)	18.2 (2)	27.7 (18)	19.4 (6)
Successful Completers				
Treatment	46.4 (32)	9.1 (1)	55.3 (26)	45.5 (5)
Comparison	24.6 (17)	18.2 (2)	27.7 (13)	18.2 (2)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Lorain/Medina CBCF

Lorain/Medina CBCF is a Community Based Corrections Facility located in Elyria, Ohio. This facility serves adult males and females placed on probation or probation and parole/ Post-Release Control. Lorain/Medina CBCF has been in operation since 1997 and is contracted to serve 56 men and 16 women. This facility is funded primarily by the Ohio Department of Rehabilitation and Corrections (ODRC). Services include substance abuse treatment, domestic violence, skill building, education, cognitive restructuring, life-skills, anger management, financial planning, and employment readiness. Lorain/Medina CBCF was visited by a University of Cincinnati research team on August 23, 2006. At the time of the visit, there were 56 male offenders and 14 female offenders. Sandra Wright was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program is well established and supported by the criminal justice community and community at large.
- While the program is coed, males and females are kept in separate treatment groups and separate living environments.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program should regularly consult the literature related to effective interventions with offenders
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- Problems or crises should be handled with a problem-solving approach and staff and management should attempt to resolve any conflict in order to work more harmoniously.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff receive an annual performance evaluation.
- Administration and treatment staff appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- Staff should receive clinical supervision by a licensed professional such as a psychologist, counselor or social worker.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.
- Staff should have more input into the structure of the program.
- Security staff lack support for the treatment efforts of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI to further assess substance abuse need, the Pride in Delinquency to assess criminal attitude and the TABE to assess education level, all of which are standardized and validated tools.
- The program conducts reassessment using the LSI-R and TABE.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, personality, mental health, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse and employment).
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- There are mechanisms that provide offenders with the opportunity for input into the structure of the program, such as a suggestion box for all residents and community meeting for the female participants.
- The types of rewards used by the program and procedure for reinforcing behavior appear appropriate.
- Staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, group activities, and thinking reports.
- The program offers training to 85% of family members geared at assisting families to provide prosocial support for the offenders.
- Program completion is in part determined by the acquisition of prosocial skills.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program; 80% of offenders participate in such services.

Recommendations for Improvement:

- The emphasis on structured skill building, including the use of modeling and role play needs to be increased across all groups. Likewise, the use of graduated rehearsal wherein offenders are taught skills in increasingly difficult situations should be increased.
- While much of the treatment is based upon a cognitive-behavioral model, the program still uses 12-step elements as a treatment model.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, phone calls out and drug testing), the monitoring mechanisms should be enhanced.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offenders from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4 to 1.

- Some of the types of punishers used by the program are not appropriate, such as isolation and shaming techniques. Techniques such as this can increase rather than decrease the target inappropriate behavior. The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if escape were impossible, if they were not spread out and if prosocial alternatives were taught.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- While the program conducts file reviews and tracks recidivism measures, the program could improve internal quality assurance by having a program manager observe the delivery of treatment and provide feedback to staff.
- The program should provide increased monitoring of contractual and external providers, also consisting of observation of the delivery of treatment.

Descriptive Statistics for both the LORAIN MEDINA CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (99)	50.0 (99)	50.0 (123)	50.0 (123)
Female	50.0 (38)	50.0 (38)	50.0 (25)	50.0 (25)
Race				
White	50.0 (88)	50.0 (88)	50.0 (85)	50.0 (85)
Non-white	50.0 (49)	50.0 (49)	50.0 (63)	50.0 (63)
Marital Status				
Married	47.1 (16)	52.9 (18)	60.6 (20)	39.4 (13)
Single/not married	50.4 (121)	49.6 (119)	50.4 (128)	49.6 (126)
Age Category				
16 to 23	52.6 (30)	47.4 (27)	44.6 (37)	55.4 (46)
24 to 30	44.7 (34)	55.3 (42)	51.4 (36)	48.6 (34)
31-39	47.0 (31)	53.0 (35)	50.0 (36)	50.0 (36)
40+	56.0 (42)	44.0 (33)	54.9 (39)	45.1 (32)
Mean Age	33.9	32.4	33.0	33.6
SD	10.8	9.8	10.7	9.4

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for LORAIN MEDINA Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.8	0.8	0.8	1.1
SD	1.2	1.5	1.3	1.5
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	47.9 (69)	52.1 (75)	68.0 (68)	32.0 (32)
Yes	52.3 (68)	47.7 (62)	40.8 (80)	59.2 (116)
Offense Level**				
Felony 1	66.7 (4)	33.3 (2)	17.4 (4)	82.6 (19)
Felony 2	50.0 (6)	50.0 (6)	15.2 (7)	84.8 (39)
Felony 3	44.4 (24)	55.6 (30)	38.4 (28)	61.6 (45)
Felony 4	44.4 (28)	55.6 (35)	62.0 (31)	38.0 (19)
Felony 5/M	54.0 (75)	46.0 (64)	75.0 (78)	25.0 (26)
Offense Category*				
Violent/person	27.0 (10)	73.0 (27)	13.7 (10)	86.3 (63)
Sex	N/A	N/A	N/A	N/A
Drugs	58.8 (70)	41.2 (49)	74.7 (65)	25.3 (22)
Property	44.3 (31)	55.7 (39)	53.5 (46)	46.5 (40)
Traffic/DUI	58.3 (7)	41.7 (5)	100.0 (7)	0.0 (0)
Other	52.8 (19)	47.2 (17)	46.5 (20)	53.5 (23)
Substance Abuse Problem**				
No	35.3 (6)	64.7 (11)	15.0 (6)	85.0 (34)
Yes	51.0 (131)	49.0 (126)	55.5 (142)	44.5 (114)
Employment Problem***				
No	41.4 (70)	58.6 (99)	53.4 (71)	46.6 (62)
Yes	63.8 (67)	36.2 (38)	47.2 (77)	52.8 (86)
Emotional Problem**				
No	50.5 (105)	49.5 (103)	62.1 (113)	37.9 (69)
Yes	48.5 (32)	51.5 (34)	30.7 (35)	69.3 (79)
Risk Categories				
Low	50.0 (14)	50.0 (14)	50.0 (13)	50.0 (13)
Moderate	50.0 (105)	50.0 (105)	50.0 (98)	50.0 (98)
High	50.0 (18)	50.0 (18)	50.0 (37)	50.0 (37)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	24.8 (137)	22.5 (137)	36.7 (123)	35.5 (123)
Females	6.2 (137)	6.3 (137)	21.5 (25)	21.6 (25)
Overall	31 (137)	28.8 (137)	34.1 (148)	33.1 (148)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the LORAIN MEDINA CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	73.5 (83)	66.7 (16)	82.5 (99)	85.7 (24)
Female	26.5 (30)	33.3 (8)	17.5 (21)	14.3 (4)
Race				
White	64.6 (73)	62.5 (15)	58.3 (70)	53.6 (15)
Non-white	35.4 (40)	37.5 (9)	41.7 (50)	46.4 (13)
Marital Status				
Married	10.6 (12)	16.7 (4)	11.7 (14)	21.4 (6)
Single/not married	89.4 (101)	83.3 (20)	88.3 (106)	78.6 (22)
Age Category				
16 to 23	22.1 (25)	20.8 (5)	25.8 (31)	21.4 (6)
24 to 30	23.0 (26)	33.3 (8)	22.5 (27)	32.1 (9)
31-39	23.0 (26)	20.8 (5)	23.3 (28)	28.6 (8)
40+	31.9 (36)	25.0 (6)	28.3 (34)	17.9 (5)
Mean Age	34.0	33.3	33.1	32.4
SD	10.9	10.6	10.8	10.3

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for LORAIN MEDINA by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.7	0.9	0.8	0.9
SD	1.2	1.4	1.3	1.4
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	54.0 (61)	33.3 (8)	50.0 (60)	28.6 (8)
Yes	46.0 (52)	66.7 (16)	50.0 (60)	71.4 (20)
Offense Level				
Felony 1	2.7 (3)	4.2 (1)	2.5 (3)	3.6 (1)
Felony 2	5.3 (6)	0.0 (0)	5.0 (6)	3.6 (1)
Felony 3	18.6 (21)	12.5 (3)	20.8 (25)	10.7 (3)
Felony 4	19.5 (22)	25.0 (6)	20.0 (24)	25.0 (7)
Felony 5/M	54.0 (61)	58.3 (14)	51.7 (62)	57.1 (16)
Offense Category				
Violent/person	8.0 (9)	4.2 (1)	7.5 (9)	3.6 (1)
Sex	N/A	N/A	N/A	N/A
Drugs	46.9 (53)	70.8 (17)	42.5 (51)	50.0 (14)
Property	23.0 (26)	20.8 (5)	29.2 (35)	39.3 (11)
Traffic/DUI	6.2 (7)	0.0 (0)	5.8 (7)	0.0 (0)
Other	15.9 (18)	4.2 (1)	15.0 (18)	7.1 (2)
Substance Abuse Problem				
No	4.4 (5)	4.2 (1)	4.2 (5)	3.6 (1)
Yes	95.6 (108)	95.8 (23)	95.8 (115)	96.4 (27)
Employment Problem*				
No	59.3 (67)	12.5 (3)	56.7 (68)	10.7 (3)
Yes	40.7 (46)	87.5 (21)	43.3 (52)	89.3 (25)
Emotional Problem				
No	77.0 (87)	75.0 (18)	76.7 (92)	75.0 (21)
Yes	23.0 (26)	25.0 (6)	23.3 (28)	25.0 (7)
Risk Categories				
Low	10.6 (12)	8.3 (2)	10.0 (12)	3.6 (1)
Moderate	77.0 (87)	75.0 (18)	68.3 (82)	57.1 (16)
High	12.4 (14)	16.7 (4)	21.7 (26)	39.3 (11)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	24.3 (113)	27.1 (24)	34.8 (99)	44.3 (24)
Females	5.8 (113)	8.1 (24)	21.2 (21)	23.3 (4)
Overall	30.1 (113)	35.2 (24)	32.4 (120)	41.3 (28)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for LORAIN/MEDINA--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)*
All Participants				
Treatment	19.0 (26)	7.1 (1)	21.9 (23)	11.1 (2)
Comparison	25.5 (35)	0.0 (0)	21.9 (23)	66.7 (12)
Successful Completers				
Treatment	17.7 (20)	8.3 (1)	20.7 (18)	7.1 (1)
Comparison	25.7 (29)	0.0 (0)	23.0 (20)	64.3 (9)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LORAIN/MEDINA--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)**
All Participants				
Treatment	25.5 (35)	14.3 (2)	25.7(27)	33.3 (6)
Comparison	33.6 (46)	0.0 (0)	32.4(34)	66.7 (12)
Successful Completers				
Treatment	23.0 (26)	16.7 (2)	23.0 (20)	28.6 (4)
Comparison	32.7 (37)	0.0 (0)	32.2 (28)	64.3 (9)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LORAIN/MEDINA--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)*
All Participants				
Treatment	35.8 (49)	21.4 (3)	39 (41)	27.8 (5)
Comparison	36.5 (50)	14.3 (2)	33.3 (35)	72.2 (13)
Successful Completers				
Treatment	28.3 (32)	16.7 (2)	31.0 (27)	21.4 (3)
Comparison	36.3 (41)	16.7 (2)	33.3 (29)	71.4 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for LORAIN-MEDINA--CBCF/Parole Sample

	Risk Levels			
	All***	Low	Moderate	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	23.6 (35)	7.7 (1)	24.5 (24)	27.0 (10)
Comparison	31.8 (47)	7.7 (1)	27.6 (27)	51.4 (19)
Successful Completers				
Treatment	20.0 (24)	8.3 (1)	22.0 (18)	19.2 (5)
Comparison	31.7 (38)	8.3 (1)	28.0 (23)	53.8 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LORAIN-MEDINA--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate	High***
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.7 (44)	15.4 (2)	27.6 (27)	40.5 (15)
Comparison	39.2 (58)	7.7 (1)	35.7 (35)	59.5 (22)
Successful Completers				
Treatment	25.8 (31)	16.7 (2)	24.4 (20)	34.6 (9)
Comparison	39.2 (47)	8.3 (1)	36.6 (30)	61.5 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LORAIN-MEDINA--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.2 (58)	23.1 (3)	38.8 (38)	45.9 (17)
Comparison	37.2 (55)	15.4 (2)	32.7 (32)	56.8 (21)
Successful Completers				
Treatment	30.8 (37)	16.7 (2)	30.5 (25)	38.5 (10)
Comparison	38.3 (46)	16.7 (2)	34.1 (28)	61.5 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Lucas County Community Treatment Center

Lucas County Community Treatment Center is a Community Based Corrections Facility located in Toledo, Ohio. This facility serves adult males and females who are probationers or parole/Post-Release Control offender released from the Ohio Department of Rehabilitation and Correction (ODRC). Lucas County CTC has been in operation since 1995 and is contracted to serve 96 men and 30 women. This facility is funded by ODRC. Services include substance abuse, education, mental health, employment readiness, anger management, parenting, life-skills, domestic violence, grief and loss, skill-building, and cognitive restructuring. Lucas County CTC was visited by a University of Cincinnati research team on September 13, 2006. At the time of the visit, there were 59 male offenders and 23 female offenders. Shaun McConnell was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the creator of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should provide formalized training to staff.
- The program director should provide regular direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff are administered an annual performance evaluation.
- Staff have a moderate amount of input into the structure of the program and administrative and treatment staff appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Security staff appear to lack support of the treatment efforts of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment. The program also uses the Addiction Severity Index (ASI) to further assess substance abuse need.
- The program uses the following responsivity tools: the TABE and CASAS educational assessments and a medical screener.
- The program conducts reassessment using the LSI-R.
- Based upon file review, the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a wider spectrum of standardized responsivity assessments to assess such areas as personality, mental health, and motivation.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, social skill development, domestic violence, and employment).
- The program offers a High Risk group in addition to Thinking for a Change geared at graduated practice of prosocial skills.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The program's average length of stay is 3.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The program is effective at monitoring offenders while in the community.
- The program provides the structure for offenders to give input into the operation of the program via a resident spokesperson.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 82%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, processing, and relapse prevention planning.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program; 85% of offenders participate in such services.

Recommendations for Improvement:

- While there are elements of social learning and the cognitive-behavioral model in the program such as the Thinking for a Change group, other aspects of treatment are based upon a 12-step, self-help, and an eclectic model.
- The program should offer structured skill building opportunities across a majority of groups, including increased use of modeling and role play.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.

- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if they were individualized, consistently applied, immediate, not spread out, matched the infraction, escape were impossible and if prosocial alternatives were taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- While the program offers a group session for family members with whom the offender will be living with geared at reviewing expectations, the program should offer more extensive training to family members around ways to provide prosocial support for the offenders.

Quality Assurance

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment services, supervision of offender assessments, supervision of training protocol for treatment curriculum, supervision of programs and staff certification updates, recidivism tracking and monitoring the aftercare program.
- The program is collecting recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.

Descriptive Statistics for both the LUCAS CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (155)	50.0 (155)	50.0 (205)	50.0 (205)
Female	50.0 (42)	50.0 (42)	50.0 (27)	50.0 (27)
Race				
White	50.0 (104)	50.0 (104)	50.0 (110)	50.0 (110)
Non-white	50.0 (93)	50.0 (93)	50.0 (122)	50.0 (122)
Marital Status				
Married	44.0 (22)	56.0 (28)	45.3 (24)	54.7 (29)
Single/not married	50.9 (175)	49.1 (169)	52.7 (208)	47.3 (187)
Age Category				
16 to 23	51.3 (58)	48.7 (55)	50.0 (68)	50.0 (68)
24 to 30	49.5 (53)	50.5 (54)	52.4 (65)	47.6 (59)
31-39	52.4 (43)	47.6 (39)	45.3 (53)	54.7 (64)
40+	46.7 (43)	53.3 (49)	52.9 (46)	47.1 (41)
Mean Age	31.1	31.5	30.7	33.1
SD	10.0	10.4	9.6	9.1

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for LUCAS Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.42	0.88	0.7	1.4
SD	1.0	1.7	1.3	1.9
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	48.1 (90)	51.9 (97)	71.3 (92)	28.7 (37)
Yes	51.7 (107)	48.3 (100)	41.8 (140)	58.2 (195)
Offense Level**				
Felony 1	50.0 (4)	50.0 (4)	16.2 (6)	83.8 (31)
Felony 2	45.8 (11)	54.2 (13)	21.4 (12)	78.6 (44)
Felony 3	52.5 (31)	47.5 (28)	35.6 (36)	64.4 (65)
Felony 4	55.9 (76)	44.1 (60)	72.4 (92)	27.6 (35)
Felony 5/M	44.9 (75)	55.1 (92)	60.1 (86)	39.9 (57)
Offense Category**				
Violent/person	54.7 (47)	45.3 (39)	35.5 (50)	64.5 (91)
Sex	50.0 (2)	50.0 (2)	50.0 (2)	50.0 (2)
Drugs	45.5 (65)	54.5 (78)	66 (70)	34 (36)
Property	41.9 (36)	58.1 (50)	42.2 (54)	57.8 (74)
Traffic/DUI	72.7 (8)	27.3 (3)	90.0 (9)	10.0 (1)
Other	60.9 (39)	39.1 (25)	62.7 (47)	37.3 (28)
Substance Abuse Problem*				
No	25.0 (5)	75.0 (15)	7.6 (5)	92.4 (61)
Yes	51.3 (192)	48.7 (182)	57 (227)	43 (171)
Employment Problem*				
No	0.0 (0)	100.0 (133)	0.0 (0)	100.0 (96)
Yes	75.5 (197)	24.5 (64)	63.0 (232)	37.0 (136)
Emotional Problem**				
No	47.9 (136)	52.1 (148)	56.4 (158)	43.6 (122)
Yes	55.5 (61)	44.5 (49)	40.2 (74)	59.8 (110)
Risk Categories				
Low	50.0 (11)	50.0 (11)	50.0 (7)	50.0 (7)
Moderate	50.0 (155)	50.0 (155)	50.0 (157)	50.0 (157)
High	50.0 (31)	50.0 (31)	50.0 (68)	50.0 (68)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	30.7 (197)	26.3 (197)	41.3 (205)	37.6 (205)
Females	5.1 (197)	4.3 (197)	24.3 (27)	23.1 (27)
Overall	35.9 (197)	30.7 (197)	39.3 (232)	36.0 (232)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the LUCAS CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	76.1 (118)	88.1 (37)	86.6 (155)	94.3 (50)
Female	23.9 (37)	11.9 (5)	13.4 (24)	5.7 (3)
Race**				
White	55.5 (86)	42.9 (18)	50.8 (91)	35.8 (19)
Non-white	44.5 (69)	57.1 (24)	49.2 (88)	64.2 (34)
Marital Status				
Married	12.3 (19)	7.1 (3)	10.1 (18)	11.3 (6)
Single/not married	87.7 (136)	92.9 (39)	89.9 (161)	88.7 (47)
Age Category*				
16 to 23	24.5 (38)	47.6 (20)	25.1 (45)	43.4 (23)
24 to 30	31.0 (48)	11.9 (5)	30.7 (55)	18.9 (10)
31-39	20.6 (32)	26.2 (11)	22.3 (40)	24.5 (13)
40+	23.9 (37)	14.3 (6)	21.8 (39)	13.2 (7)
Mean Age	31.8	28.5	31.4	28.5
SD	10.1	9.2	9.8	8.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for LUCAS CBCF/ISP and CBCF/Parole by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.4	0.5	0.6	0.9
SD	1.0	0.7	1.3	1.3
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	50.3 (78)	28.6 (12)	43.6 (78)	26.4 (14)
Yes	49.7 (77)	71.4 (30)	56.4 (101)	73.6 (39)
Offense Level				
Felony 1	1.9 (3)	2.4 (1)	2.2 (4)	3.8 (2)
Felony 2	6.5 (10)	2.4 (1)	6.7 (12)	0.0 (0)
Felony 3	14.2 (22)	21.4 (9)	15.1 (27)	17 (9)
Felony 4	37.4 (58)	42.9 (18)	38.0 (68)	45.3 (24)
Felony 5/M	40.0 (62)	31.0 (13)	38.0 (68)	34.0 (18)
Offense Category				
Violent/person	23.2 (36)	26.2 (11)	22.3 (40)	18.9 (10)
Sex	0.6 (1)	2.4 (1)	0.6 (1)	1.9 (1)
Drugs	34.2 (53)	28.6 (12)	31.3 (56)	26.4 (14)
Property	19.4 (30)	14.3 (6)	23.5 (42)	22.6 (12)
Traffic/DUI	5.2 (8)	0.0 (0)	5.0 (9)	0.0 (0)
Other	17.4 (27)	28.6 (12)	17.3 (31)	30.2 (16)
Substance Abuse Problem				
No	1.9 (3)	4.8 (2)	1.7 (3)	3.8 (2)
Yes	98.1 (152)	95.2 (40)	98.3 (176)	96.2 (51)
Employment Problem				
No	N/A	N/A	N/A	N/A
Yes	100.0 (155)	100.0 (42)	100.0 (179)	100.0 (53)
Emotional Problem**				
No	71.0 (110)	61.9 (26)	72.1 (129)	54.7 (29)
Yes	29.0 (45)	38.1 (16)	27.9 (50)	45.3 (24)
Risk Categories				
Low	7.1 (11)	0.0 (0)	3.9 (7)	0.0 (0)
Moderate	78.7 (122)	78.6 (33)	69.3 (124)	62.3 (33)
High	14.2 (22)	21.4 (9)	26.8 (48)	37.7 (20)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	29.3 (155)	36.3 (42)	40.5 (155)	43.5 (50)
Females	5.7 (155)	3.0 (42)	24 (24)	26.5 (3)
Overall	35 (155)	39.3 (42)	38.3 (179)	42.6 (53)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for LUCAS CIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)*
All Participants				
Treatment	29.9 (59)	9.1 (1)	32.3 (50)	25.8 (8)
Comparison	32.0 (63)	9.1 (1)	27.1 (42)	64.5 (20)
Successful Completers				
Treatment	26.5 (41)	9.1 (1)	30.3 (37)	13.6 (3)
Comparison	31.0 (48)	9.1 (1)	26.2 (32)	68.2 (15)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LUCAS CIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)*
All Participants				
Treatment	32.5 (64)	18.2 (2)	34.8 (54)	25.8 (8)
Comparison	35.0 (69)	9.1 (1)	31.0 (48)	64.5 (20)
Successful Completers				
Treatment	29 (45)	18.2 (2)	32.8 (40)	13.6 (3)
Comparison	34.8 (54)	9.1 (1)	31.1 (38)	68.2 (15)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LUCAS CIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)**	%(N)
All Participants				
Treatment	44.7 (88)	36.4 (4)	42.6 (66)	58.1 (18)
Comparison	38.1 (75)	18.2 (2)	32.3 (50)	74.2 (23)
Successful Completers				
Treatment	39.4 (61)	36.4 (4)	37.7 (46)	50.0 (11)
Comparison	36.1 (56)	18.2 (2)	31.1 (38)	72.7 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for LUCAS CTY--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate**	High***
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.5 (73)	0.0 (0)	30.6 (48)	36.8 (25)
Comparison	27.6 (64)	14.3 (1)	19.7 (31)	47.1 (32)
Successful Completers				
Treatment	27.4 (49)	0.0 (0)	28.2 (35)	29.2 (14)
Comparison	29.1 (52)	14.3 (1)	20.2 (25)	54.2 (26)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for LUCAS CTY--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.5 (80)	14.3 (1)	33.1 (52)	39.7 (27)
Comparison	38.4 (89)	14.3 (1)	29.9 (47)	60.3 (41)
Successful Completers				
Treatment	30.2 (54)	14.3 (1)	30.6 (38)	31.3 (15)
Comparison	38.5 (69)	14.3 (1)	29.8 (37)	64.6 (31)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for LUCAS CTY--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.0 (102)	28.6 (2)	38.2 (60)	45.6 (31)
Comparison	29.3 (68)	0.0 (0)	23.6 (37)	58.8 (40)
Successful Completers				
Treatment	38.5 (69)	28.6 (2)	34.7 (43)	50.0 (24)
Comparison	27.4 (49)	0.0 (0)	21.8 (27)	45.8 (22)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Mahoning County CBCF

Mahoning County CBCF is a Community Based Corrections Facility located in Youngstown, Ohio. This facility serves adult males placed on probation as well as drug court offenders. Mahoning County CBCF has been in operation since 1987 and is contracted to serve 70 men. This facility is funded by Ohio Department of Rehabilitation and Correction (ODRC) and the county. Services include substance abuse treatment, education, skill building, anger management, parenting skills, and employment readiness. Mahoning County CBCF was visited by a University of Cincinnati research team on August 11, 2006. At the time of the visit, there were 54 residents. Eric Brown was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training, and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- Funding is stable and adequate, allowing the program to operate as designed.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff receive clinical supervision by a licensed psychologist, the frequency of supervision should increase.
- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the CCA risk and need assessment as an actuarial tool used to assess risk for recidivism and criminogenic needs.
- In addition to a psychosocial assessment, the program uses the SASSI and SAQ to assess substance abuse need as well as a vocational assessment.
- Relative to responsivity tools, the program uses the MMPI to assess personality, CASAS to assess education level, and a problem identification assessment.

Recommendations for Improvement:

- The program should provide re-assessment of risk and need factors.
- At least 70% of offenders in the program should be moderate to high risk for recidivism.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out, and home and job checks.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Structured curricula or manuals are used for all groups and all groups are facilitated from beginning to end by staff.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Staff are matched to groups based on experience and skill level.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While several program components are based upon a cognitive-behavioral model, the substance abuse treatment still has 12-step and educational elements.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- Residents should be provided with a formal mechanism of giving input into the structure of the program, e.g., a suggestion box, community meeting, or resident spokesperson.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.

- The procedure by which offenders are punished could be improved so that punishers are immediate, individualized, varied, match the infraction, not spread out, and escape from punishers is impossible. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 88%. This rate should fall between 65 and 85%.
- The program should offer ongoing training to family members who might assist in providing prosocial support for the offenders.
- The program does not provide structured aftercare services for all offenders completing treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, supervision of assessments, and peer review.
- The program has participated in past program evaluations.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for both the MAHONING CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (160)	50.0 (160)	50.0 (185)	50.0 (185)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (80)	50.0 (80)	50.0 (84)	50.0 (84)
Non-white	50.0 (80)	50.0 (80)	50.0 (101)	50.0 (101)
Marital Status				
Married	37.2 (16)	62.8 (27)	48.7 (19)	51.3 (20)
Single/not married	52.0 (144)	48.0 (133)	51.7 (166)	48.3 (155)
Age Category				
16 to 23	59.6 (53)	40.4 (36)	51.7 (60)	48.3 (56)
24 to 30	51.3 (40)	48.7 (38)	51.6 (49)	48.4 (46)
31-39	45.2 (38)	54.8 (46)	48.4 (44)	51.6 (47)
40+	42.0 (29)	58.0 (40)	47.1 (32)	52.9 (36)
Mean Age	29.9	32.6	29.9	33.9
SD	9.5	10.0	9.4	10.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for MAHONING Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.5	0.6	0.5	1.2
SD	0.9	1.1	0.9	1.8
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	57.0 (110)	43.0 (83)	72.5 (121)	27.5 (46)
Yes	39.4 (50)	60.6 (77)	31.5 (64)	68.5 (139)
Offense Level**				
Felony 1	52.6 (9)	43.8 (7)	25.6 (10)	74.4 (29)
Felony 2	42.9 (9)	57.1 (12)	18.1 (13)	81.9 (59)
Felony 3	44.9 (22)	55.1 (27)	38.0 (27)	62.0 (44)
Felony 4	51.8 (57)	48.2 (53)	74.4 (67)	25.6 (23)
Felony 5/M	50.8 (63)	49.2 (61)	69.4 (68)	30.6 (30)
Offense Category**				
Violent/person	48.7 (37)	51.3 (39)	32.3 (43)	67.7 (90)
Sex	N/A	N/A	50.0 (1)	50.0 (1)
Drugs	48.8 (63)	51.2 (66)	67.3 (72)	32.7 (35)
Property	56.1 (32)	43.9 (25)	59.7 (40)	40.3 (27)
Traffic/DUI	50.0 (4)	50.0 (4)	75.0 (3)	25.0 (1)
Other	48.0 (24)	52.0 (26)	45.6 (26)	54.4 (31)
Substance Abuse Problem*				
No	64.2 (34)	35.8 (19)	42.1 (40)	57.9 (55)
Yes	47.2 (126)	52.8 (141)	52.7 (145)	47.3 (130)
Employment Problem*				
No	76.4 (120)	23.6 (37)	58.9 (136)	41.1 (95)
Yes	48.8 (40)	51.2 (42)	35.3 (49)	64.7 (90)
Emotional Problem				
No	47.8 (109)	52.2 (119)	53.2 (125)	46.8 (110)
Yes	55.4 (51)	44.6 (41)	44.4 (60)	55.6 (75)
Risk Categories				
Low	50.0 (18)	50.0 (18)	50.0 (18)	50.0 (18)
Moderate	50.0 (130)	50.0 (130)	50.0 (143)	50.0 (143)
High	50.0 (12)	50.0 (12)	50.0 (24)	50.0 (24)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	27.8 (160)	29.1 (160)	28.8 (185)	31.5 (185)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the MAHONING CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
	% (N)	% (N)	% (N)	% (N)
Gender				
Male	100.0 (138)	100.0 (22)	100.0 (162)	100.0 (23)
Female	N/A	N/A	N/A	N/A
Race				
White	51.4 (71)	40.9 (9)	46.9 (76)	34.8 (8)
Non-white	48.6 (67)	59.1 (13)	53.1 (86)	65.2 (15)
Marital Status				
Married	10.9 (15)	4.5 (1)	10.5 (17)	8.7 (2)
Single/not married	89.1 (123)	95.5 (21)	89.5 (145)	91.3 (21)
Age Category*				
16 to 23	29.0 (40)	59.1 (13)	28.4 (46)	60.9 (14)
24 to 30	27.5 (38)	9.1 (2)	29.0 (47)	8.7 (2)
31-39	25.4 (35)	13.6 (3)	25.3 (41)	13 (3)
40+	18.1 (25)	18.2 (4)	17.3 (28)	17.4 (4)
Mean Age	30.3	27.7	30.3	27.4
SD	9.3	10.5	9.3	10.4

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for MAHONING by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.5	0.6	0.6	0.5
SD	0.9	0.9	0.9	10.4
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	68.1 (94)	72.7 (16)	64.8 (105)	69.6 (16)
Yes	31.9 (44)	27.3 (6)	35.2 (57)	30.4 (7)
Offense Level				
Felony 1	6.5 (9)	0.0 (0)	6.2 (10)	0.0 (0)
Felony 2	5.8 (8)	4.5 (1)	7.4 (12)	4.3 (1)
Felony 3	13 (18)	18.2 (4)	14.2 (23)	17.4 (4)
Felony 4	34.8 (48)	40.9 (9)	35.2 (57)	43.5 (10)
Felony 5/M	39.9 (55)	36.4 (8)	37 (60)	34.8 (8)
Offense Category				
Violent/person	23.2 (32)	22.7 (5)	23.5 (38)	21.7 (5)
Sex	N/A	N/A	0.6 (1)	0.0 (0)
Drugs	40.6 (56)	31.8 (7)	39.5 (64)	34.8 (8)
Property	20.3 (28)	18.2 (4)	21.6 (35)	21.7 (5)
Traffic/DUI	2.2 (3)	4.5 (1)	1.2 (2)	4.3 (1)
Other	13.8 (19)	22.7 (5)	13.6 (22)	17.4 (4)
Substance Abuse Problem				
No	18.8 (26)	36.4 (8)	19.8 (32)	34.8 (8)
Yes	81.2 (112)	63.6 (14)	80.2 (130)	65.2 (15)
Employment Problem*				
No	81.2 (112)	36.4 (8)	79 (128)	34.8 (8)
Yes	18.8 (26)	63.6 (14)	21.0 (34)	65.2 (15)
Emotional Problem				
No	68.1 (94)	68.2 (15)	67.3 (109)	69.6 (16)
Yes	31.9 (44)	31.8 (7)	32.7 (53)	30.4 (7)
Risk Categories				
Low	13.0 (18)	0.0 (0)	11.1 (18)	0.0 (0)
Moderate	80.4 (111)	86.4 (19)	76.5 (124)	82.6 (19)
High	6.5 (9)	13.6 (3)	12.3 (20)	17.4 (4)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	27.1 (138)	31.8 (22)	28.2 (162)	32.6 (23)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for MAHONING--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.8 (46)	11.1 (2)	29.2 (38)	50 (6)
Comparison	26.3 (42)	5.6 (1)	26.2 (34)	58.3 (7)
Successful Completers				
Treatment	26.8 (37)	11.1 (2)	27.8 (31)	44.4 (4)
Comparison	26.8 (37)	5.6 (1)	27 (30)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for MAHONING--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.9 (59)	17.1 (6)	37.7 (49)	50.0 (6)
Comparison	31.9 (51)	20.0 (7)	32.3 (42)	58.3 (7)
Successful Completers				
Treatment	34.1 (47)	22.2 (4)	35.1 (39)	44.4 (4)
Comparison	33.3 (46)	11.1 (2)	34.2 (38)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for MAHONING--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)**	%(N)	%(N)**	%(N)
All Participants				
Treatment	39.4 (63)	16.7 (3)	40.8 (53)	58.3 (7)
Comparison	28.8 (46)	11.1 (2)	28.5 (37)	58.3 (7)
Successful Completers				
Treatment	34.1 (47)	16.7 (3)	35.1 (39)	55.6 (5)
Comparison	28.3 (39)	11.1 (2)	27.9 (31)	66.7 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for MAHONING--CBCF/Parole Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.1 (52)	11.1 (2)	29.4 (42)	33.3 (8)
Comparison	34.1 (63)	11.1 (2)	35.7 (51)	41.7 (10)
Successful Completers				
Treatment	25.9 (42)	11.1 (2)	28.2 (35)	25.0 (5)
Comparison	32.7 (53)	11.1 (2)	33.9 (42)	45.0 (9)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for MAHONING--CBCF/Parole Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.2 (67)	22.2 (4)	37.1 (53)	41.7 (10)
Comparison	41.6 (77)	11.1 (2)	44.1 (63)	50.0 (12)
Successful Completers				
Treatment	33.3 (54)	22.2 (4)	34.7 (43)	35.0 (7)
Comparison	40.1 (65)	11.1 (2)	42.7 (53)	50.0 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for MAHONING--CBCF/Parole Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.8 (68)	16.7 (3)	38.5 (55)	41.7 (10)
Comparison	36.2 (67)	27.8 (5)	36.4 (52)	41.7 (10)
Successful Completers				
Treatment	31.5 (51)	16.7 (3)	33.1 (41)	35.0 (7)
Comparison	34.0 (55)	27.8 (5)	33.9 (42)	40.0 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

MonDay Community Correctional Institution

MonDay Community Correctional Institution is a Community Based Corrections Facility located in Dayton, Ohio. This facility serves adult males and females who are probationers, offenders on judicial release, and offenders placed on probation plus parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). MonDay Community Correctional Institution has been in operation since 1978 and is contracted to serve 110 men and 70 women. This facility is funded by ODRC, as well as RSAT and educational grants. The primary services provided by the program are substance abuse treatment, employment readiness, skill building, education, cognitive restructuring, anger management, and parenting. MonDay Community Correctional Institution was visited by a University of Cincinnati research team on October 17, 2006. At the time of the visit, there were 105 male offenders and 65 female offenders. Mike Flannery was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- Males and females are kept in separate treatment programs.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature and staff can attend local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding for the program had been relatively unstable over the previous two years.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an annual performance evaluation.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- More staff training should relate to effective correctional practices, service delivery skills, and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- In addition to a psychosocial assessment, the program uses the ASUS to further assess substance abuse need as well as the Trumpet as a Therapeutic Community tool.
- The program uses the TABE educational assessment and the Client Motivation Readiness (CMR) as responsivity assessments.
- The program conducts reassessment using the LSI-R and Trumpet.

Recommendations for Improvement:

- The program should have a wider spectrum of standardized responsivity assessments to assess such areas as personality, mental health, and learning styles.

Treatment

Strengths:

- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls out and drug testing,).
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment by having a longer length of stay in the program. Likewise, higher risk offenders are separated from lower risk individuals in the program via separate living quarters.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 84%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, processing, and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.
- Approximately 90% of offenders discharged from the program are referred to external providers for aftercare services.

Recommendations for Improvement:

- While many of the program's targets are criminogenic in nature (i.e., substance abuse, criminal thinking, social skill development, relapse prevention and employment readiness), others are not designed to target a criminogenic need area (e.g., codependency, successful living, and process group). At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play across all groups. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.

- While some of the treatment uses cognitive-behavioral principles, the program also relies on a 12-step and Therapeutic Community model to treat offenders.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, individualized and based upon the demonstration of a prosocial behavior.
- The procedure by which offenders are punished could be improved if punishers were immediately applied, individualized, consistently applied, not spread out, and if prosocial alternatives were taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment services with staff feedback, and conducting re-assessments.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation.
- The program should provide increased monitoring of external providers consisting of direct observation of treatment delivery.

Descriptive Statistics for both the MONDAY CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (198)	50.0 (198)	50.0 (236)	50.0 (236)
Female	50.0 (110)	50.0 (110)	50.0 (61)	50.0 (61)
Race				
White	50.0 (196)	50.0 (196)	50.0 (165)	50.0 (165)
Non-white	50.0 (112)	50.0 (112)	50.0 (132)	50.0 (132)
Marital Status*				
Married	26.1 (18)	73.9 (51)	29.1 (16)	70.9 (39)
Single/not married	53.0 (290)	47.0 (257)	55.6 (281)	44.4 (224)
Age Category***				
16 to 23	60.0 (87)	40.0 (58)	52.4 (89)	47.6 (81)
24 to 30	49.4 (80)	50.6 (82)	53.9 (82)	46.1 (70)
31-39	49.4 (76)	50.6 (78)	41.8 (59)	58.2 (82)
40+	41.9 (65)	58.1 (90)	51.1 (67)	48.9 (64)
Mean Age	30.9	33.3	30.8	34.3
SD	9.1	9.8	9.6	9.9

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for MONDAY Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.4	0.8	0.5	1.1
SD	0.9	1.7	1.2	1.5
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	52.7 (176)	47.3 (158)	69.6 (158)	30.4 (69)
Yes	46.8 (132)	53.2 (150)	37.9 (139)	62.1 (228)
Offense Level**				
Felony 1	27.3 (3)	72.7 (8)	4.4 (2)	95.6 (43)
Felony 2	57.8 (26)	42.2 (19)	22.1 (23)	77.9 (81)
Felony 3	52.6 (51)	47.4 (46)	33.8 (44)	66.2 (86)
Felony 4	50.9 (81)	49.1 (78)	68.1 (79)	31.9 (37)
Felony 5/M	48.4 (147)	51.6 (157)	74.9 (149)	25.1 (50)
Offense Category*				
Violent/person	56.1 (64)	43.9 (50)	28.9 (55)	71.1 (135)
Sex	50.0 (4)	50.0 (4)	50.0 (5)	50.0 (5)
Drugs	56.5 (152)	43.5 (117)	76.6 (141)	23.4 (43)
Property	39.7 (54)	60.3 (82)	47.4 (63)	52.6 (70)
Traffic/DUI	57.1 (8)	42.9 (6)	60.0 (6)	40.0 (4)
Other	34.7 (26)	65.3 (49)	40.3 (27)	59.7 (40)
Substance Abuse Problem*				
No	5.6 (2)	94.4 (34)	4.3 (4)	95.7 (89)
Yes	52.8 (306)	47.2 (274)	58.5 (293)	41.5 (208)
Employment Problem*				
No	29.3 (87)	70.7 (210)	40.0 (84)	60.0 (126)
Yes	69.3 (221)	30.7 (98)	55.5 (213)	44.5 (171)
Emotional Problem**				
No	50.0 (210)	50.0 (210)	59.1 (221)	40.9 (153)
Yes	50.0 (98)	50.0 (98)	34.5 (76)	65.5 (144)
Risk Categories				
Low	50.0 (38)	50.0 (38)	50.0 (33)	50.0 (33)
Moderate	50.0 (241)	50.0 (241)	50.0 (209)	50.0 (209)
High	50.0 (29)	50.0 (29)	50.0 (55)	50.0 (55)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	22.1 (308)	20.2 (308)	36.2 (236)	34.6 (236)
Females	8.3 (308)	7.6 (308)	22.5 (61)	20.5 (61)
Overall	30.4 (308)	27.8 (308)	33.4 (297)	31.7 (297)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the MONDAY CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	65.5 (169)	58.0 (29)	81.1 (197)	72.2 (39)
Female	34.5 (89)	42.0 (21)	18.9 (46)	27.8 (15)
Race				
White	64.3 (166)	60.0 (30)	55.1 (134)	57.4 (31)
Non-white	35.7 (92)	40.0 (20)	44.9 (109)	42.6 (23)
Marital Status				
Married	6.2 (16)	4.0 (2)	5.8 (14)	3.7 (2)
Single/not married	93.8 (242)	96.0 (48)	94.2 (229)	96.3 (52)
Age Category				
16 to 23	25.6 (66)	42.0 (21)	28.0 (68)	38.9 (21)
24 to 30	27.1 (70)	20.0 (10)	28.8 (70)	22.2 (12)
31-39	26.4 (68)	16.0 (8)	20.2 (49)	18.5 (10)
40+	20.9 (54)	22.0 (11)	23.0 (56)	20.4 (11)
Mean Age	31.1	30.0	31.1	29.9
SD	9.0	9.9	9.6	9.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for MONDAY by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.4	0.5	0.5	0.7
SD	0.9	1.1	1.2	1.2
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	58.5 (151)	50.0 (25)	55.6 (135)	42.6 (23)
Yes	41.5 (107)	50.0 (25)	44.4 (108)	57.4 (31)
Offense Level				
Felony 1	0.8 (2)	2.0 (1)	0.8 (2)	0.0 (0)
Felony 2	8.1 (21)	10.0 (5)	7.8 (19)	7.4 (4)
Felony 3	17.4 (45)	12.0 (6)	15.2 (37)	13.0 (7)
Felony 4	24.8 (64)	34.0 (17)	25.9 (63)	29.6 (16)
Felony 5/M	48.8 (126)	42.0 (21)	50.2 (122)	50.0 (27)
Offense Category				
Violent/person	21.3 (55)	18.0 (9)	20.2 (49)	11.1 (6)
Sex	1.6 (4)	0.0 (0)	2.1 (5)	0.0 (0)
Drugs	50.8 (131)	42.0 (21)	48.1 (117)	44.4 (24)
Property	16.3 (42)	24.0 (12)	19.3 (47)	29.6 (16)
Traffic/DUI	2.7 (7)	2.0 (1)	2.1 (5)	1.9 (1)
Other	7.4 (19)	14.0 (7)	8.2 (20)	13 (7)
Substance Abuse Problem				
No	0.4 (1)	2.0 (1)	0.8 (2)	3.7 (2)
Yes	99.6 (257)	98.0 (49)	99.2 (241)	96.3 (52)
Employment Problem*				
No	32.6 (84)	6.0 (3)	33.3 (81)	5.6 (3)
Yes	67.4 (174)	94.0 (47)	66.7 (162)	94.4 (51)
Emotional Problem				
No	70.2 (181)	58.0 (29)	76.1 (185)	66.7 (36)
Yes	29.8 (77)	42.0 (21)	23.9 (58)	33.3 (18)
Risk Categories**				
Low	12.4 (32)	12.0 (6)	11.5 (28)	9.3 (5)
Moderate	79.8 (206)	70.0 (35)	72.8 (177)	59.3 (32)
High	7.8 (20)	18.0 (9)	15.6 (38)	31.5 (17)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	21.8 (258)	23.4 (50)	34.8 (197)	43.3 (39)
Females	8.0 (258)	10.0 (50)	22.2 (46)	23.6 (15)
Overall	29.8 (258)	33.4 (50)	32.4 (243)	37.8 (54)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for MONDAY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)*	%(N)*	%(N)**	%(N)
All Participants				
Treatment	32.1 (99)	28.9 (11)	29.9 (72)	55.2 (16)
Comparison	21.1 (65)	7.9 (3)	19.1 (46)	55.2 (16)
Successful Completers				
Treatment	28.3 (73)	28.1 (9)	26.2 (54)	50.0 (10)
Comparison	21.3 (55)	6.3 (2)	19.9 (41)	60.0 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for MONDAY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)*	%(N)*	%(N)**	%(N)
All Participants				
Treatment	38.3 (118)	31.6 (12)	37.3 (90)	55.2 (16)
Comparison	25.3 (78)	7.9 (3)	24.5 (59)	55.2 (16)
Successful Completers				
Treatment	34.5 (89)	31.3 (10)	33.5 (69)	50.0 (10)
Comparison	26 (67)	6.3 (2)	25.7 (53)	60.0 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for MONDAY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)*	%(N)*	%(N)*	%(N)
All Participants				
Treatment	47.7 (147)	52.6 (20)	45.6 (110)	58.6 (17)
Comparison	29.9 (92)	13.2 (5)	29.0 (70)	58.6 (17)
Successful Completers				
Treatment	41.1 (106)	43.8 (14)	40.3 (83)	45.0 (9)
Comparison	28.7 (74)	12.5 (4)	28.2 (58)	60.0 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for MONDAY--CBCF/Parole Sample

	Risk Levels			
	All*	Low*	Moderate	High**
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.4 (117)	33.3 (11)	34.4 (72)	61.8 (34)
Comparison	28.3 (84)	9.1 (3)	27.8 (58)	41.8 (23)
Successful Completers				
Treatment	35.4 (86)	32.1 (9)	29.9 (53)	63.2 (24)
Comparison	26.7 (65)	7.1 (2)	25.4 (45)	47.4 (18)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for MONDAY--CBCF/Parole Sample

	Risk Levels			
	All**	Low*	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	45.1 (134)	36.4 (12)	41.1 (86)	65.5 (36)
Comparison	37.4 (111)	15.2 (5)	37.3 (78)	50.9 (28)
Successful Completers				
Treatment	41.2 (100)	35.7 (10)	36.7 (65)	65.8 (25)
Comparison	35.0 (85)	10.7 (3)	33.9 (60)	57.9 (22)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for MONDAY--CBCF/Parole Sample

	Risk Levels			
	All*	Low*	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	49.5 (147)	54.5 (18)	43.5 (91)	69.1 (38)
Comparison	26.9 (80)	6.1 (2)	29.7 (62)	29.1 (16)
Successful Completers				
Treatment	41.6 (101)	46.4 (13)	36.7 (65)	60.5 (23)
Comparison	25.5 (62)	3.6 (1)	27.7 (49)	31.6 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Northeast Ohio Community Alternative Program (NEOCAP)

NorthEast Ohio Community Alternative Program (NEOCAP) is a Community Based Corrections Facility located in Warren, Ohio. This facility serves adult males and females placed on probation and judicial release from the Ohio Department of Rehabilitation and Correction (ODRC). NEOCAP has been in operation since 1997 and is contracted to serve 94 men and 31 women. This facility is funded primarily by ODRC. Services include substance abuse treatment, education, domestic violence, skill building, cognitive restructuring, anger management, and employment readiness. NEOCAP was visited by a University of Cincinnati research team on August 9, 2006. At the time of the visit, there were 69 male offenders and 25 female offenders. Lori Carson was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is adequate and stable, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach.
- Males and females do not share living spaces and are kept in separate treatment groups.

Recommendations for Improvement:

- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult a wider range of peer-reviewed literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Concern was expressed regarding unresolved conflict/tension between staff and management. Such issues should be addressed to improve the capacity to deliver effective services.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional.
- Staff are assessed annually with a performance evaluation.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should have regular clinical staff meetings where client progress is reviewed.
- More staff training should relate to service delivery areas, including effective correctional practices and the cognitive-behavioral model.
- Staff have a limited amount of input into the structure of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses several tools to further assess criminogenic need domains including the SASSI and Addiction Severity Index (ASI) to assess substance abuse need, as well as the Anger Disorder Scale (ADS) to assess aggression and the How I Think (HIT) tool to assess criminal attitude.
- The program uses several responsivity tools: the TABE educational assessment, the Problem Identification tool to identify general problem areas, the Beck Depression Inventory, the Jesness Inventory to assess personality, and the Adult Self Assessment Questionnaire (ADSAQ) and Socrates to assess motivation.
- The program conducts reassessment using the LSI-R.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- Much of the treatment is based upon a cognitive-behavioral model, along with the social learning and motivational enhancement models.
- The program engages offenders in skill training and practice via the regular use of modeling and role play. Likewise, graduated rehearsal is used to teach residents skills in increasingly difficult situations.
- The program's average length of stay is 5.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Structured curricula or manuals are used for all groups.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out and review of receipts.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment via additional treatment groups.
- Staff are matched to groups based upon experience.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The program should provide offenders with the opportunity for input into the structure of the program (e.g., a suggestion box, community meeting or resident spokesperson).
- The frequency of rewards used to reinforce offender behavior should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.

- The process by which offenders are punished could be improved by ensuring that the punishers are consistently applied, individualized, varied, not spread out, immediately applied following the infraction, and that prosocial alternatives are taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 89%. This rate should fall between 65 and 85%.
- While families are offered an overview of the program and family sessions as needed, fewer than 10% of families participate in family intervention. The program should offer a training program to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, it is only given to offenders with substance abuse issues.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of assessments, observation of offender re-assessments and review of cases following a termination or relapse.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of staff on service delivery. Likewise, both contractual and external providers should be observed delivering treatment to monitor the quality of services.

Descriptive Statistics for both the NEOCAP CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (173)	50.0 (173)	50.0 (151)	50.0 (151)
Female	50.0 (60)	50.0 (60)	50.0 (78)	50.0 (78)
Race				
White	50.0 (196)	50.0 (196)	50.0 (187)	50.0 (187)
Non-white	50.0 (37)	50.0 (37)	50.0 (42)	50.0 (42)
Marital Status*				
Married	36.1 (22)	63.9 (39)	37.3 (25)	62.7 (42)
Single/not married	52.1 (211)	47.9 (194)	56.7 (204)	43.3 (156)
Age Category*				
16 to 23	58.9 (76)	41.1 (53)	49.3 (66)	50.7 (68)
24 to 30	44.3 (58)	55.7 (73)	50.4 (65)	49.6 (64)
31-39	38.4 (33)	61.6 (53)	38.8 (33)	61.2 (52)
40+	55.0 (66)	45.0 (54)	59.1 (65)	40.9 (45)
Mean Age	31.1	31.8	31.5	33.5
SD	9.9	9.9	9.8	10.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for NEOCAP Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.2	0.5	0.4	0.6
SD	0.6	0.8	0.8	1.1
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	47.6 (138)	52.4 (152)	62.1 (146)	37.9 (89)
Yes	54.0 (95)	46.0 (81)	37.2 (83)	62.8 (140)
Offense Level**				
Felony 1	0.0 (0)	100.0 (0)	0.0 (0)	100.0 (20)
Felony 2	40.0 (6)	60.0 (9)	8.1 (5)	91.9 (57)
Felony 3	53.5 (46)	46.5 (40)	40.5 (45)	59.5 (66)
Felony 4	56.8 (83)	43.2 (63)	73.0 (81)	27.0 (30)
Felony 5/M	45.0 (98)	55.0 (120)	63.6 (98)	36.4 (56)
Offense Category**				
Violent/person	52.4 (43)	47.6 (39)	32.8 (40)	67.2 (82)
Sex	50.0 (3)	50.0 (3)	50.0 (3)	50.0 (3)
Drugs	51.7 (92)	48.3 (86)	77.1 (91)	22.9 (27)
Property	43.8 (56)	56.2 (72)	43.9 (61)	56.1 (78)
Traffic/DUI	66.7 (16)	33.3 (8)	94.1 (16)	5.9 (1)
Other	47.9 (23)	52.1 (25)	32.1 (18)	67.9 (38)
Substance Abuse Problem*				
No	7.7 (3)	92.3 (36)	7.4 (4)	92.6 (50)
Yes	53.9 (230)	46.1 (197)	55.7 (225)	44.3 (179)
Employment Problem*				
No	75.6 (146)	24.4 (47)	56.0 (126)	44.0 (99)
Yes	61.7 (87)	38.3 (54)	44.2 (103)	55.8 (130)
Emotional Problem**				
No	48.6 (152)	51.4 (161)	55.2 (144)	44.8 (117)
Yes	52.9 (81)	47.1 (72)	43.1 (85)	56.9 (112)
Risk Categories				
Low	50.0 (35)	50.0 (35)	50.0 (35)	50.0 (35)
Moderate	50.0 (181)	50.0 (181)	50.0 (161)	50.0 (161)
High	50.0 (17)	50.0 (17)	50.0 (33)	50.0 (33)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	22.3 (233)	22 (233)	31.2 (151)	32.3 (151)
Females	5.8 (233)	5.3 (233)	23.2 (78)	23.8 (77)
Overall	28.1 (233)	27.3 (233)	28.5 (229)	29.3 (229)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the NEOCAP CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	73.4 (149)	80.0 (24)	64.1 (125)	76.5 (26)
Female	26.6 (54)	20.0 (6)	35.9 (70)	23.5 (8)
Race				
White	85.2 (173)	76.7 (23)	83.1 (162)	73.5 (25)
Non-white	14.8 (30)	23.3 (7)	16.9 (33)	26.5 (9)
Marital Status				
Married	9.9 (20)	6.7 (2)	11.8 (23)	5.9 (2)
Single/not married	90.1 (183)	93.3 (28)	88.2 (172)	94.1 (32)
Age Category*				
16 to 23	28.1 (57)	63.3 (19)	24.6 (48)	52.9 (18)
24 to 30	26.6 (54)	13.3 (4)	29.2 (57)	23.5 (8)
31-39	14.8 (30)	10.0 (3)	15.4 (30)	8.8 (3)
40+	30.5 (62)	13.3 (4)	30.8 (60)	14.7 (5)
Mean Age	31.8	26.4	32.3	27.1
SD	9.8	9.0	9.8	8.9

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for NEOCAP by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.2	0.4	0.3	0.7
SD	0.6	0.9	0.7	1.2
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	65.0 (132)	20.0 (6)	69.2 (135)	32.4 (11)
Yes	35.0 (71)	80.0 (24)	30.8 (60)	67.6 (23)
Offense Level				
Felony 1	N/A	N/A	N/A	N/A
Felony 2	2.0 (4)	6.7 (2)	2.1 (4)	2.9 (1)
Felony 3	20.2 (41)	16.7 (5)	20.5 (40)	14.7 (5)
Felony 4	36.5 (74)	30.0 (9)	36.4 (71)	29.4 (10)
Felony 5/M	41.4 (84)	46.7 (14)	41.0 (80)	52.9 (18)
Offense Category				
Violent/person	17.7 (36)	23.3 (7)	17.4 (34)	17.6 (6)
Sex	1.0 (2)	3.3 (1)	1.0 (2)	2.9 (1)
Drugs	40.4 (82)	33.3 (10)	41.5 (81)	29.4 (10)
Property	24.1 (49)	23.3 (7)	24.6 (48)	38.2 (13)
Traffic/DUI	6.9 (14)	6.7 (2)	7.2 (14)	5.9 (2)
Other	9.9 (20)	10.0 (3)	8.2 (16)	5.9 (2)
Substance Abuse Problem				
No	1.0 (2)	3.3 (1)	1.5 (3)	2.9 (1)
Yes	99.0 (201)	96.7 (29)	98.5 (192)	97.1 (33)
Employment Problem*				
No	71.9 (146)	0.0 (0)	64.6 (126)	0.0 (0)
Yes	28.1 (57)	100.0 (30)	35.4 (69)	100.0 (34)
Emotional Problem				
No	66.5 (135)	56.7 (17)	64.1 (125)	55.9 (19)
Yes	33.5 (68)	43.3 (13)	35.9 (70)	44.1 (15)
Risk Categories*				
Low	17.2 (35)	0.0 (0)	17.9 (35)	0.0 (0)
Moderate	78.8 (160)	70.0 (21)	72.8 (142)	55.9 (19)
High	3.9 (8)	30.0 (9)	9.2 (18)	44.1 (15)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	20.6 (203)	34.0 (30)	28.4 (125)	44.9 (26)
Females	5.9 (203)	5.3 (30)	23.0 (70)	26.3 (8)
Overall	26.5 (203)	39.3 (30)	26.4 (195)	40.5 (34)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for NEOCAP--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)***	Low %(N)	Moderate %(N)*	High %(N)
All Participants				
Treatment	15.9 (37)	11.4 (4)	16.0 (29)	23.5 (4)
Comparison	24.5 (57)	11.4 (4)	24.9 (45)	47.1 (8)
Successful Completers				
Treatment	14.8 (30)	11.4 (4)	15.6 (25)	12.5 (1)
Comparison	23.2 (47)	11.4 (4)	24.4 (39)	50.0 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for NEOCAP--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	24.0 (56)	17.1 (6)	25.4 (46)	23.5 (4)
Comparison	29.6 (69)	20.0 (7)	29.8 (54)	47.1 (8)
Successful Completers				
Treatment	22.2 (45)	17.1 (6)	23.8 (38)	12.5 (1)
Comparison	29.1 (59)	20.0 (7)	30.0 (48)	50.0 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for NEOCAP--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	43.3 (101)	31.4 (11)	43.6 (79)	64.7 (11)
Comparison	35.6 (83)	22.9 (8)	35.9 (65)	58.8 (10)
Successful Completers				
Treatment	37.9 (77)	31.4 (11)	38.8 (62)	50.0 (4)
Comparison	35.0 (71)	22.9 (8)	36.9 (59)	50.0 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for NEOCAP--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	15.3 (35)	11.4 (4)	14.9 (24)	21.2 (7)
Comparison	15.3 (35)	2.9 (1)	13.0 (21)	39.4 (13)
Successful Completers				
Treatment	13.8 (27)	11.4 (4)	14.8 (21)	11.1 (2)
Comparison	12.8 (25)	2.9 (1)	13.4 (19)	27.8 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for NEOCAP--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	23.1(53)	17.1 (6)	23.0 (37)	30.3 (10)
Comparison	22.3(51)	5.7 (2)	21.7 (35)	42.4 (14)
Successful Completers				
Treatment	21.5 (42)	17.1 (6)	22.5 (32)	22.2 (4)
Comparison	20.5 (40)	5.7 (2)	22.5 (32)	33.3 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for NEOCAP--CBCF/Parole Sample

	Risk Levels			
	All*	Low*	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.1 (101)	31.4 (11)	44.7 (72)	54.5 (18)
Comparison	21.0 (48)	0.0 (0)	21.7 (35)	39.4 (13)
Successful Completers				
Treatment	38.5 (75)	31.4 (11)	40.1 (57)	38.9 (7)
Comparison	20.0 (39)	0.0 (0)	23.2 (33)	33.3 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Northwest Community Corrections Center

Northwest Community Corrections Center is a Community Based Correctional Facility located in Bowling Green, Ohio. This facility serves adult males probationers. Northwest CCC has been in operation since 1999 and is contracted to serve 60 men. This facility is funded by ODRC. Services in the corrections program include substance abuse treatment, relapse prevention, victim awareness, vocation, cognitive restructuring, social skills, education and aftercare. Northwest CCC was visited by a University of Cincinnati research team on November 8, 2006. At the time of the visit, there were 64 male residents in the program. Gary Incorvia was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, and actively supervising staff.
- The program director provides direct services via group treatment, conducting assessments, and carrying a caseload of clients in the program.
- The program is well established and is supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director has a limited role in the formalized training of staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Inadequate funding has made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff are evaluated annually with a performance evaluation.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- Clinical staff meetings where cases are reviewed should be held at least twice per month.
- Staff should receive additional initial training and more training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment. The program also uses the ASUS to further assess substance abuse need.
- The program uses the following responsivity tools: the TABE and AZTEC educational assessments, the CMR to assess motivation, the CAI to assess general client needs and a mental health screener.
- The program conducts reassessment using the LSI-R, TABE, CAI and mental health tool.
- Offender risk levels are formally tracked, and the program targets moderate to high risk offenders.

Recommendations for Improvement:

- The program should identify more extensive exclusionary criteria.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, relapse prevention, and substance abuse).
- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The program is effective at monitoring offenders while on passes to the community via drug testing, schedules/logs, probation officers, site visits and phone calls in and out.
- Treatment varies by risk as higher risk offenders are required to attend additional treatment groups.
- The program provides the structure for offenders to give input into the operation of the program via a suggestion box, community meeting and resident spokesperson.
- The types of rewards used by the program and process for reinforcing behavior appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via homework assignments, processing, developing a relapse prevention plan, and group activities.
- Program completion is determined via acquisition of prosocial skills.
- The program completion rate is 76%, which falls within the recommended range of 65 to 85%.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program; approximately 75% of offenders participate in such services.

Recommendations for Improvement:

- While there are elements of cognitive-behavioral treatment in the program, other aspects of the treatment is based upon a 12-step, self-help, restorative justice and a Therapeutic Community model.
- There should be increased emphasis on structured skill building via the increased use of modeling and role playing across groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- All of the groups should utilize a curriculum to structure the treatment. Unstructured process oriented groups should be avoided.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions. Offenders should only attend groups that are identified as a need area for that individual.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.

- Some of the types of punishers used by the program are not appropriate, such as isolation, physical interventions and shaming techniques. Techniques such as this can increase rather than decrease the target inappropriate behavior. Likewise the process by which offenders are punished could be improved by improving staff consistency, ensuring that the punishers are based upon the demonstration of an antisocial behavior, disallowing escape from punishers, and immediately applying the punisher following the infraction.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- While the program attempts to provide a family intervention component, only about 30% of the families participate.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, recidivism tracking, conducting offender re-assessments, staff feedback, supervision of program and staff certification updates, monitoring of the aftercare program, and observation of treatment services.
- The program collects recidivism data on offenders discharged from Northwest CCC.

Recommendations for Improvement:

- The program should provide increased monitoring of external providers consisting of direct observation of treatment delivery.

Descriptive Statistics for both the NORTHWEST CCC CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (105)	50.0 (105)	50.0 (103)	50.0 (103)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (82)	50.0 (82)	50.0 (78)	50.0 (78)
Non-white	50.0 (23)	50.0 (23)	50.0 (25)	50.0 (25)
Marital Status				
Married	33.3 (6)	66.7 (12)	36.8 (7)	63.2 (12)
Single/not married	51.6 (99)	48.4 (93)	51.9 (96)	48.1 (89)
Age Category***				
16 to 23	68.1 (49)	31.9 (23)	54.3 (50)	45.7 (42)
24 to 30	45.1 (23)	54.9 (28)	35.1 (20)	64.9 (37)
31-39	35.2 (19)	64.8 (35)	59.4 (19)	40.6 (13)
40+	42.4 (14)	57.6 (19)	56.0 (14)	44.0 (11)
Mean Age	27.7	31.5	27.6	30.1
SD	9.1	9.6	9.1	8.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for NORTHWEST CCC Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.5	0.8	0.6	1.0
SD	0.8	1.5	0.9	1.4
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	50.4 (59)	49.6 (58)	60.0 (57)	40.0 (38)
Yes	49.5 (46)	50.5 (47)	41.4 (46)	58.6 (65)
Offense Level**				
Felony 1	50.0 (1)	50.0 (1)	8.3 (1)	91.7 (11)
Felony 2	66.7 (12)	33.3 (6)	32.4 (11)	67.6 (23)
Felony 3	46.5 (20)	53.5 (23)	37.8 (17)	62.2 (28)
Felony 4	58.1 (36)	41.9 (26)	67.9 (36)	32.1 (17)
Felony 5/M	42.4 (36)	57.6 (49)	61.3 (38)	38.7 (24)
Offense Category***				
Violent/person	72.5 (37)	27.5 (14)	50.0 (27)	50.0 (27)
Sex	50.0 (6)	50.0 (6)	50.0 (9)	50.0 (9)
Drugs	34.5 (20)	65.5 (38)	62.5 (20)	37.5 (12)
Property	44.3 (31)	55.7 (39)	44.6 (37)	55.4 (46)
Traffic/DUI	33.3 (1)	66.7 (2)	100.0 (1)	0.0 (0)
Other	62.5 (10)	37.5 (6)	50.0 (9)	50.0 (9)
Substance Abuse Problem*				
No	7.1 (1)	92.9 (13)	4.3 (1)	95.7 (22)
Yes	53.1 (104)	46.9 (92)	55.7 (102)	44.3 (81)
Employment Problem*				
No	25.0 (25)	75.0 (75)	34.2 (26)	65.8 (50)
Yes	72.7 (80)	27.3 (30)	59.2 (77)	40.8 (53)
Emotional Problem				
No	45.5 (61)	54.5 (73)	49.6 (60)	50.4 (61)
Yes	57.9 (44)	42.1 (32)	50.6 (43)	49.4 (42)
Risk Categories				
Low	50.0 (3)	50.0 (3)	50.0 (3)	50.0 (3)
Moderate	50.0 (79)	50.0 (79)	50.0 (70)	50.0 (70)
High	50.0 (23)	50.0 (23)	50.0 (30)	50.0 (30)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	36.7 (105)	33.2 (105)	37.7 (103)	36.6 (103)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the NORTHWEST CCC CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (77)	100.0 (28)	100.0 (74)	100.0 (29)
Female	N/A	N/A	N/A	N/A
Race				
White	77.9 (60)	78.6 (22)	75.7 (56)	75.9 (22)
Non-white	22.1 (17)	21.4 (6)	24.3 (18)	24.1 (7)
Marital Status				
Married	7.8 (6)	0.0 (0)	9.5 (7)	0.0 (0)
Single/not married	92.2 (71)	100.0 (28)	90.5 (67)	100.0 (29)
Age Category				
16 to 23	45.5 (35)	50.0 (14)	45.9 (34)	55.2 (16)
24 to 30	22.1 (17)	21.4 (6)	18.9 (14)	20.7 (6)
31-39	20.8 (16)	10.7 (3)	23.0 (17)	6.9 (2)
40+	11.7 (9)	17.9 (5)	12.2 (9)	17.2 (5)
Mean Age	27.5	28.1	27.7	27.3
SD	8.2	11.3	8.3	11.1

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for NORTHWEST CCC by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.5	0.5	0.6	0.5
SD	0.8	0.8	1.0	0.9
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	61.0 (47)	42.9 (12)	60.8 (45)	41.4 (12)
Yes	39.0 (30)	57.1 (16)	39.2 (29)	58.6 (17)
Offense Level				
Felony 1	1.3 (1)	0.0 (0)	1.4 (1)	0.0 (0)
Felony 2	11.7 (9)	10.7 (3)	10.8 (8)	10.3 (3)
Felony 3	22.1 (17)	10.7 (3)	20.3 (15)	6.9 (2)
Felony 4	36.4 (28)	28.6 (8)	37.8 (28)	27.6 (8)
Felony 5/M	28.6 (22)	50.0 (14)	29.7 (22)	55.2 (16)
Offense Category				
Violent/person	41.6 (32)	17.9 (5)	32.4 (24)	10.3 (3)
Sex	5.2 (4)	7.1 (2)	6.8 (5)	13.8 (4)
Drugs	20.8 (16)	14.3 (4)	21.6 (16)	13.8 (4)
Property	26.0 (20)	39.3 (11)	32.4 (24)	44.8 (13)
Traffic/DUI	0.0 (0)	3.6 (1)	0.0 (0)	3.4 (1)
Other	6.5 (5)	17.9 (5)	6.8 (5)	13.8 (4)
Substance Abuse Problem				
No	1.3 (1)	0.0 (0)	1.4 (1)	0.0 (0)
Yes	98.7 (76)	100.0 (28)	98.6 (73)	100.0 (29)
Employment Problem*				
No	32.5 (25)	0.0 (0)	35.1 (26)	0.0 (0)
Yes	67.5 (52)	100.0 (28)	64.9 (48)	100.0 (29)
Emotional Problem*				
No	63.6 (49)	42.9 (12)	64.9 (48)	41.4 (12)
Yes	36.4 (28)	57.1 (16)	35.1 (26)	58.6 (17)
Risk Categories*				
Low	3.9 (3)	0.0 (0)	4.1 (3)	0.0 (0)
Moderate	81.8 (63)	57.1 (16)	74.3 (55)	51.7 (15)
High	14.3 (11)	42.9 (12)	21.6 (16)	48.3 (14)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	35.1 (77)	41.1 (28)	36 (74)	42.2 (29)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for NORTHWEST CCC--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.6 (30)	0.0 (0)	26.6 (21)	39.1 (9)
Comparison	22.9 (24)	33.3 (1)	22.8 (18)	21.7 (5)
Successful Completers				
Treatment	22.1 (17)	0.0 (0)	22.2 (14)	27.3 (3)
Comparison	19.5 (15)	33.3 (10)	17.5 (11)	27.3 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for NORTHWEST CCC--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.2 (37)	33.3 (1)	32.9 (26)	43.5 (10)
Comparison	26.7 (28)	33.3 (1)	26.6 (21)	26.1 (6)
Successful Completers				
Treatment	31.2 (24)	33.3 (1)	30.2 (19)	36.4 (4)
Comparison	23.4 (18)	33.3 (1)	20.6 (13)	36.4 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for NORTHWEST CCC--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)*	%(N)	%(N)*	%(N)
All Participants				
Treatment	54.3 (57)	66.7 (2)	49.4 (39)	69.6 (16)
Comparison	37.1 (39)	33.3 (1)	29.1(23)	65.2 (15)
Successful Completers				
Treatment	44.2 (34)	66.7 (2)	41.3 (26)	54.5 (6)
Comparison	29.9 (23)	33.3 (1)	23.8 (15)	63.6 (7)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for NORTHWEST CCC--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.1 (30)	0.0 (0)	25.7 (18)	40.0 (12)
Comparison	24.3 (25)	33.3 (1)	18.6 (13)	36.7 (11)
Successful Completers				
Treatment	21.6 (16)	0.0 (0)	20.0 (11)	31.3 (5)
Comparison	20.3 (15)	33.3 (1)	18.2 (10)	25.0 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for NORTHWEST CCC--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.9 (37)	33.3 (1)	32.9 (23)	43.3 (13)
Comparison	30.1 (31)	33.3 (1)	22.9 (16)	46.7 (14)
Successful Completers				
Treatment	31.1 (23)	33.3 (1)	29.1 (16)	37.5 (6)
Comparison	27.0 (20)	33.3 (1)	23.6 (13)	37.5 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for NORTHWEST CCC--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	57.3 (59)	66.7 (2)	51.4 (36)	70.0 (21)
Comparison	35.9 (37)	66.7 (2)	27.1 (19)	53.3 (16)
Successful Completers				
Treatment	47.3 (35)	66.7 (2)	41.8 (23)	62.5 (10)
Comparison	33.8 (25)	66.7 (2)	27.3 (15)	50.0 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Oriana Cliff Skeen CBCF

Oriana Cliff Skeen is a Community Based Corrections Facility located in Akron, Ohio. This facility serves adult females placed on probation as well those on judicial release from the Ohio Department of Rehabilitation and Correction (ODRC). Oriana Cliff Skeen CBCF has been in operation since 2000 and is contracted to serve 60 women. This facility is funded primarily by ODRC. Services include substance abuse treatment, education, anger management, cognitive restructuring, financial skills, skill building, women's issues, lifeskills, and employment readiness. Oriana Cliff Skeen CBCF was visited by a University of Cincinnati research team on August 16, 2006. At the time of the visit, there were 52 offenders. Sharon Lewis was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services to offenders, via group treatment and carrying a small caseload of offenders in the program.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program is well established and supported by the criminal justice community and community at large.
- The program avoids co-ed treatment.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer and peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- The program should work to improve how problems or crises are handled.
- Staff and management should work to resolve any tension or unresolved conflict so as to work together more harmoniously.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices, skills in service delivery and the cognitive-behavioral model.
- Staff should have more input into the structure of the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- In addition to a psychosocial assessment, the program uses the SASSI and MAST to assess substance abuse need as well as an employment assessment.
- The program uses the SORT as an educational assessment, in addition to a mental health and medical screener.
- While program staff does not conduct a general risk/need assessment, the program does have access to the overall and domain scores of the Level of Service Inventory-Revised (LSI-R). This tool is administered by the intake department on all offenders admitted to the program.
- The program appears target primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should identify a wider range of written exclusionary criteria.
- The program should have a spectrum of standardized responsivity assessments to fully assess such areas as motivation, mental health, personality, and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment). Likewise, while the program does offer a gender specific group that addresses female responsivity issues, at least 75% of the time criminogenic areas are targeted.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Graduated rehearsal is used to teach resident skills in increasingly difficult situations via a booster group.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment by attending additional treatment groups and staying in the program longer.
- Higher risk offenders are separated from lower risk individuals in the program by attending separate treatment groups.
- Staff are matched to groups based on experience.
- Offenders have the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate as does the procedure for reinforcing behavior.
- The program completion rate is 83%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While much of the treatment is based upon the cognitive-behavioral and social learning models, substance abuse treatment still relies upon the 12-step model.
- Structured curricula or manuals should be used for all groups.
- Although structured skill building (e.g. modeling and role play) is used regularly in Thinking for a Change, these techniques are not used frequently enough in the other groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.

- Responsivity, in addition to risk and need factors should guide how offenders are matched to interventions.
- While there are some mechanisms in place to monitor offenders while in the community (drug tests. schedules and phone calls) monitoring should be increased.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved so that punishers are immediate, consistently applied, individualized, undesirable by the offender, varied, not spread out, and escape from punishers should be impossible.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family beyond "family night" so that family members can be trained to assist in providing prosocial support for the offenders.
- While aftercare services are provided by Transitional Services, only about 30% of offenders participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, supervision of training protocol for treatment curriculum, tracking offender recidivism, monitoring aftercare program, and auditing of the CCIS database.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should increase the frequency with which service delivery is observed. Likewise, the program should also provide observation/ monitoring of both contractual and external providers.

Descriptive Statistics for both the ORIANA CLIFF SKEEN by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	N/A	N/A	N/A	N/A
Female	50.0 (121)	50.0 (121)	50.0 (64)	50.0 (64)
Race				
White	50.0 (90)	50.0 (90)	50.0 (33)	50.0 (33)
Non-white	50.0 (31)	50.0 (31)	50.0 (31)	50.0 (31)
Marital Status				
Married	56.8 (25)	43.2 (19)	50.0 (9)	50.0 (9)
Single/not married	48.5 (96)	51.5 (102)	61.1 (55)	38.9 (35)
Age Category				
16 to 23	56.0 (28)	44.0 (22)	48.1 (13)	51.9 (14)
24 to 30	49.3 (33)	50.7 (34)	53.6 (15)	46.4 (13)
31-39	38.0 (27)	62.0 (44)	35.0 (14)	65.0 (26)
40+	61.1 (33)	38.9 (21)	66.7 (22)	33.3 (11)
Mean Age	32.3	31.8	34.1	34.9
SD	9.5	8.1	10.0	9.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for ORIANA CLIFF SKEEN Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.6	0.6	0.8	1.0
SD	1.2	1.1	1.4	2.1
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	49.7 (79)	50.3 (80)	70.9 (39)	29.1 (16)
Yes	50.6 (42)	49.4 (41)	34.2 (25)	65.8 (48)
Offense Level**				
Felony 1	50.0 (1)	50.0 (1)	7.7 (1)	92.3 (12)
Felony 2	36.4 (4)	63.6 (7)	8.3 (1)	91.7 (11)
Felony 3	61.1 (22)	38.9 (14)	45.2 (14)	54.8 (17)
Felony 4	52.8 (28)	47.2 (25)	64.0 (16)	36.0 (9)
Felony 5/M	47.1 (66)	52.9 (74)	68.1 (32)	31.9 (15)
Offense Category**				
Violent/person	54.3 (19)	45.7 (16)	36.4 (12)	63.6 (21)
Sex	N/A	N/A	N/A	N/A
Drugs	54.1 (59)	45.9 (50)	73.2 (30)	26.8 (11)
Property	38.9 (28)	61.1 (44)	36.8 (14)	63.2 (24)
Traffic/DUI	60.0 (3)	40.0 (2)	100.0 (2)	0.0 (0)
Other	57.1 (12)	42.9 (9)	42.9 (6)	57.1 (8)
Substance Abuse Problem*				
No	20.0 (3)	80.0 (12)	11.1 (2)	88.9 (16)
Yes	52.0 (118)	48.0 (109)	56.4 (62)	43.6 (48)
Employment Problem***				
No	22.5 (25)	77.5 (86)	39.0 (16)	61.0 (25)
Yes	73.3 (96)	26.7 (35)	55.2 (48)	44.8 (39)
Emotional Problem***				
No	38.7 (41)	61.3 (65)	44.9 (22)	55.1 (27)
Yes	58.8 (80)	41.2 (56)	53.2 (42)	46.8 (37)
Risk Categories				
Low	50.0 (24)	50.0 (24)	50.0 (18)	50.0 (18)
Moderate	50.0 (86)	50.0 (86)	50.0 (38)	50.0 (38)
High	50.0 (11)	50.0 (11)	50.0 (8)	50.0 (8)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	N/A	N/A	N/A	N/A
Females	24.4 (121)	22.8 (121)	24.2 (64)	23.7 (64)
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the ORIANA CLIFF SKEEN CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	N/A	N/A	N/A	N/A
Female	100.0 (80)	100.0 (41)	100.0 (42)	100.0 (22)
Race*				
White	80.0 (64)	63.4 (26)	61.9 (26)	31.8 (7)
Non-white	20.0 (16)	36.6 (15)	38.1 (16)	68.2 (15)
Marital Status				
Married	22.5 (18)	17.1 (7)	16.7 (7)	9.1 (2)
Single/not married	77.5 (62)	82.9 (34)	83.3 (35)	90.9 (20)
Age Category				
16 to 23	26.3 (21)	17.1 (7)	23.8 (10)	13.6 (3)
24 to 30	23.8 (19)	34.1 (14)	19.0 (8)	31.8 (7)
31-39	18.8 (15)	29.3 (12)	16.7 (7)	31.8 (7)
40+	31.3 (25)	19.5 (8)	40.5 (17)	22.7 (5)
Mean Age	32.7	31.5	34.9	32.5
SD	10.2	8.2	10.8	8.6

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for ORIANA CLIFF SKEEN by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.5	0.8	0.5	1.2
SD	1.0	1.7	0.7	2.1
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	67.5 (54)	61.0 (25)	69.0 (29)	45.5 (10)
Yes	32.5 (26)	39.0 (16)	31.0 (13)	54.5 (12)
Offense Level				
Felony 1	1.3 (1)	0.0 (0)	2.4 (1)	0.0 (0)
Felony 2	3.8 (3)	2.4 (1)	0.0 (0)	4.5 (1)
Felony 3	20.0 (16)	14.6 (6)	23.8 (10)	18.2 (4)
Felony 4	21.3 (17)	26.8 (11)	23.8 (10)	27.3 (6)
Felony 5/M	53.8 (43)	56.1 (23)	50.0 (21)	50.0 (11)
Offense Category				
Violent/person	15.0 (12)	17.0 (7)	11.9 (5)	31.8 (7)
Sex	N/A	N/A	N/A	N/A
Drugs	45 (36)	56.1 (23)	50.0 (21)	40.9 (9)
Property	26.3 (21)	17.1 (7)	23.8 (10)	18.2 (4)
Traffic/DUI	3.8 (3)	0.0 (0)	4.8 (2)	0.0 (0)
Other	10.0 (8)	9.8 (4)	9.5 (4)	9.1 (2)
Substance Abuse Problem				
No	3.8 (3)	0.0 (0)	4.8 (2)	0.0 (0)
Yes	96.3 (77)	100.0 (41)	95.2 (40)	100.0 (22)
Employment Problem*				
No	30.0 (24)	2.4 (1)	35.7 (15)	4.5 (1)
Yes	70.0 (56)	97.6 (40)	64.3 (27)	95.5 (21)
Emotional Problem				
No	31.3 (25)	39.0 (16)	31.0 (13)	40.9 (9)
Yes	68.8 (55)	61.0 (25)	69.0 (29)	59.1 (13)
Risk Categories**				
Low	25 (20)	9.8 (4)	38.1 (16)	9.1 (2)
Moderate	67.5 (54)	78 (32)	52.4 (22)	72.7 (16)
High	7.5 (6)	12.2 (5)	9.5 (4)	18.2 (4)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	N/A	N/A	N/A	N/A
Females	23.5 (80)	26.2 (41)	22.6 (42)	27.1 (22)
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)***	%(N)	%(N)***	%(N)
All Participants				
Treatment	13.2 (16)	4.2 (1)	14.0 (12)	27.3 (3)
Comparison	12.4 (15)	0.0 (0)	16.3 (14)	9.1 (1)
Successful Completers				
Treatment	6.3 (5)	5.0 (1)	3.7 (2)	33.3 (2)
Comparison	16.3 (13)	0.0 (0)	22.2 (12)	16.7 (1)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)***	%(N)	%(N)***	%(N)
All Participants				
Treatment	19 (23)	8.3 (2)	20.9 (18)	27.3 (3)
Comparison	20.7 (25)	8.3 (2)	24.4 (21)	18.2 (2)
Successful Completers				
Treatment	8.8 (7)	5.0 (1)	7.4 (4)	33.3 (2)
Comparison	22.5 (18)	5.0 (1)	27.8 (15)	33.3 (2)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)**	%(N)	%(N)**	%(N)
All Participants				
Treatment	47.9 (58)	25.0 (6)	53.5 (46)	54.5 (6)
Comparison	30.6 (37)	29.2 (7)	30.2 (26)	36.4 (4)
Successful Completers				
Treatment	30.0 (24)	15.0 (3)	35.2 (19)	33.3 (2)
Comparison	27.5 (22)	25.0 (5)	25.9 (14)	50.0 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/Parole Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	14.1 (9)	5.6 (1)	15.8 (6)	25.0 (2)
Comparison	12.5 (8)	0.0 (0)	13.2 (5)	37.5 (3)
Successful Completers				
Treatment	7.1 (3)	6.3 (1)	4.5 (1)	25.0 (1)
Comparison	14.3 (6)	0.0 (0)	13.6 (3)	75.0 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/Parole Sample

| | Risk Levels | | | |
| | All*** | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	18.8 (12)	5.6 (1)	23.7 (9)	25.0 (2)
Comparison	23.4 (15)	22.2 (4)	21.1 (8)	37.5 (3)
Successful Completers				
Treatment	7.1 (3)	6.3 (1)	4.5 (1)	25.0 (1)
Comparison	26.2 (11)	25.0 (4)	18.2 (4)	75.0 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA CLIFF SKEEN--CBCF/Parole Sample

| | Risk Levels | | | |
| | All* | Low | Moderate* | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.2 (27)	22.2 (4)	50.0 (19)	50.0 (4)
Comparison	17.2 (11)	0.0 (0)	23.7 (9)	25.0 (2)
Successful Completers				
Treatment	23.8 (10)	12.5 (2)	31.8 (7)	25.0 (1)
Comparison	11.9 (5)	0.0 (0)	13.6 (3)	50.0 (2)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Oriana Crosswaeh CBCF

Oriana Crosswaeh is a Community Based Corrections Facility located in Tiffin, Ohio. This facility serves adult males placed on probation and probation plus parole/Post-Release Control. Oriana Crosswaeh has been in operation since 1999 and is contracted to serve 54 men. This facility is funded primarily by Ohio Department of Rehabilitation and Correction (ODRC). Services include substance abuse treatment, domestic violence, skill building, education, cognitive restructuring, anger management, financial planning, parenting, and employment readiness. Oriana Crosswaeh was visited by a University of Cincinnati research team on September 11, 2006. At the time of the visit, there were 55 offenders. Jason Varney was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the creator of the current program and is involved in selecting, training, and supervising staff.
- Funding is stable, allowing the program to operate as designed.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- While the program director conducts a monthly resident meeting with offenders in the program, he should have more direct involvement with offenders.
- The program should regularly consult a range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training and much of the training relates to the theory and practice of interventions used by the program.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment. The program also uses the SASSI, MAST and DAST to further assess substance abuse need as well as an employment assessment.

- The program uses the following responsivity tools: the TABE and SORT educational assessments and a self assessment of general needs.
- The program formally tracks offender risk level and targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a wider spectrum of standardized responsivity assessments to assess such areas as motivation, personality and mental health. Such assessments should be validated tools.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse and employment).
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Structured curricula or manuals are be used for nearly all groups.
- The program offers a booster group wherein graduated practice techniques are used.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, higher risk offenders are offered separate treatment groups.
- Staff are matched to groups based on experience and skill level.
- The program offers a community meeting to provide offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate as well as the procedure for reinforcing and punishing behavior.
- Staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 76%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on practice and structured skill building, including the use of modeling and role play needs to be utilized across all groups, including substance abuse and parenting.
- While much of the treatment is based upon a cognitive-behavioral model, the program still relies on 12-step elements for substance abuse treatment.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10 and all groups should be staff led.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services should be provided to all offenders successfully discharged from the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, supervision of assessments, and tracking offender recidivism.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers, including the direct observation of services.

Descriptive Statistics for both the CROSSWAEH CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (107)	50.0 (107)	50.0 (105)	50.0 (105)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (81)	50.0 (81)	50.0 (74)	50.0 (74)
Non-white	50.0 (26)	50.0 (26)	50.0 (31)	50.0 (31)
Marital Status				
Married	52.0 (13)	48.0 (12)	40.0 (12)	60.0 (18)
Single/not married	49.7 (94)	50.3 (95)	53.1 (93)	46.9 (82)
Age Category				
16 to 23	52.1 (38)	47.9 (35)	48.6 (35)	51.4 (37)
24 to 30	45.0 (27)	55.0 (33)	46.7 (28)	53.3 (32)
31-39	55.3 (26)	44.7 (21)	56.3 (27)	43.8 (21)
40+	47.1 (16)	52.9 (18)	50.0 (15)	50.0 (15)
Mean Age	29.3	29.6	29.2	31.8
SD	8.8	9.4	8.1	9.6

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for CROSSWAEH Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.7	0.8	1.0	1.3
SD	1.2	1.5	1.4	1.6
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	44.1 (45)	55.9 (57)	48.8 (40)	51.2 (42)
Yes	55.4 (62)	44.6 (50)	50.8 (65)	49.2 (63)
Offense Level**				
Felony 1	100.0 (2)	0.0 (0)	25.0 (2)	75.0 (6)
Felony 2	50.0 (4)	50.0 (4)	8.0 (2)	92.0 (23)
Felony 3	44.7 (17)	55.3 (21)	39.1 (18)	60.9 (28)
Felony 4	57.1 (40)	42.9 (30)	72.7 (40)	27.3 (15)
Felony 5/M	45.8 (44)	54.2 (52)	56.6 (43)	43.4 (33)
Offense Category**				
Violent/person	58.8 (30)	41.2 (21)	50.0 (27)	50.0 (27)
Sex	N/A	N/A	N/A	N/A
Drugs	46.8 (29)	53.2 (33)	60.0 (24)	40.0 (16)
Property	44.4 (28)	55.6 (35)	42.5 (34)	57.5 (46)
Traffic/DUI	55.6 (5)	44.4 (4)	100.0 (6)	0.0 (0)
Other	51.7 (15)	48.3 (14)	46.7 (14)	53.3 (16)
Substance Abuse Problem*				
No	12.5 (2)	87.5 (14)	5.0 (1)	95.0 (19)
Yes	53.0 (105)	47.0 (93)	54.7 (104)	45.3 (86)
Employment Problem***				
No	44.5 (57)	55.5 (71)	48.1 (51)	51.9 (55)
Yes	58.1 (50)	41.9 (36)	51.9 (54)	48.1 (50)
Emotional Problem				
No	47.3 (71)	52.7 (79)	51.2 (64)	48.8 (61)
Yes	56.2 (36)	43.8 (28)	48.2 (41)	51.8 (44)
Risk Categories				
Low	50.0 (2)	50.0 (2)	50.0 (2)	50.0 (2)
Moderate	50.0 (81)	50.0 (81)	50.0 (63)	50.0 (63)
High	50.0 (24)	50.0 (24)	50.0 (40)	50.0 (40)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	35.5 (107)	33.9 (107)	38.4 (105)	37.1 (105)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the ORIANA CROSSWAEH CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (85)	100.0 (22)	100.0 (83)	100.0 (22)
Female	N/A	N/A	N/A	N/A
Race				
White	77.6 (66)	68.2 (15)	74.7 (62)	54.5 (12)
Non-white	22.4 (19)	31.8 (7)	25.3 (21)	45.5 (10)
Marital Status				
Married	12.9 (11)	9.1 (2)	9.6 (8)	18.2 (4)
Single/not married	87.1 (74)	90.9 (20)	90.4 (75)	81.8 (18)
Age Category*				
16 to 23	28.2 (24)	63.6 (14)	26.5 (22)	59.1 (13)
24 to 30	29.4 (25)	9.1 (2)	31.3 (26)	9.1 (2)
31-39	27.1 (23)	13.6 (3)	27.7 (23)	18.2 (4)
40+	15.3 (13)	13.6 (3)	14.5 (12)	13.6 (3)
Mean Age	30.0	26.7	30.0	26.9
SD	8.6	9.3	8.0	8.2

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for ORIANA CROSSWAEH by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.7	0.6	1.0	0.9
SD	1.2	1.0	1.4	1.1
Previous Conviction***	% (N)	% (N)	% (N)	% (N)
No	47.1 (40)	22.7 (5)	41 (34)	27.3 (6)
Yes	52.9 (45)	77.3 (17)	59 (49)	72.7 (16)
Offense Level				
Felony 1	2.4 (2)	0.0 (0)	2.4 (2)	0.0 (0)
Felony 2	3.5 (3)	4.5 (1)	1.2 (1)	4.5 (1)
Felony 3	15.3 (13)	18.2 (4)	16.9 (14)	18.2 (4)
Felony 4	37.6 (32)	36.4 (8)	37.3 (31)	40.9 (9)
Felony 5/M	41.2 (35)	40.9 (9)	42.2 (35)	36.4 (8)
Offense Category				
Violent/person	27.1 (23)	31.8 (7)	24.1 (20)	31.8 (7)
Sex	N/A	N/A	N/A	N/A
Drugs	29.4 (25)	18.2 (4)	25.3 (21)	13.6 (3)
Property	24.7 (21)	31.8 (7)	31.3 (26)	36.4 (8)
Traffic/DUI	5.9 (5)	0.0 (0)	6.0 (5)	4.5 (1)
Other	12.9 (11)	18.2 (4)	13.3 (11)	13.6 (3)
Substance Abuse Problem				
No	1.2 (1)	4.5 (1)	1.2 (1)	0.0 (0)
Yes	98.8 (84)	95.5 (21)	98.8 (82)	100.0 (22)
Employment Problem*				
No	67.1 (57)	0.0 (0)	61.4 (51)	0 (0)
Yes	32.9 (28)	100.0 (22)	38.6 (32)	100 (22)
Emotional Problem				
No	68.2 (58)	59.1 (13)	61.4 (51)	59.1 (13)
Yes	31.8 (27)	40.9 (9)	38.6 (32)	40.9 (9)
Risk Categories***				
Low	2.4 (2)	0.0 (0)	2.4 (2)	0.0 (0)
Moderate	81.2 (69)	54.5 (12)	65.1 (54)	40.9 (9)
High	16.5 (14)	45.5 (10)	32.5 (27)	59.1 (13)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	33.5 (85)	43.2 (22)	36.7 (83)	44.7 (22)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA CROSSWAEH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.1 (29)	0.0 (0)	27.2 (22)	29.2 (7)
Comparison	24.3 (26)	0.0 (0)	23.5 (19)	29.2 (7)
Successful Completers				
Treatment	28.2 (24)	0.0 (0)	29.0 (20)	28.6 (4)
Comparison	23.5 (20)	0.0 (0)	23.2 (16)	28.6 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA CROSSWAEH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.5 (38)	0.0 (0)	32.1 (26)	50.0 (12)
Comparison	31.8 (34)	50.0 (1)	30.9 (25)	33.3 (8)
Successful Completers				
Treatment	34.1 (29)	0.0 (0)	31.9 (22)	50.0 (7)
Comparison	31.8 (27)	50.0 (1)	30.4 (21)	35.7 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA CROSSWAEH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.1 (45)	0.0 (0)	37 (30)	62.5 (15)
Comparison	32.7 (35)	50.0 (1)	28.4 (23)	45.8 (11)
Successful Completers				
Treatment	36.5 (31)	0.0 (0)	33.3 (23)	57.1 (8)
Comparison	30.6 (26)	50.0 (1)	27.5 (19)	42.9 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA CROSSWEAH--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate***	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.4 (33)	0.0 (0)	31.7 (20)	32.5 (13)
Comparison	24.8 (26)	0.0 (0)	19.0 (12)	35.0 (14)
Successful Completers				
Treatment	32.5 (27)	0.0 (0)	35.2 (19)	29.6 (8)
Comparison	20.5 (17)	0.0 (0)	16.7 (9)	29.6 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA CROSSWEAH--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate***	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	41.0 (43)	0.0 (0)	38.1 (24)	47.5 (19)
Comparison	34.3 (36)	0.0 (0)	27.0 (17)	47.5 (19)
Successful Completers				
Treatment	39.8 (33)	0.0 (0)	38.9 (21)	44.4 (12)
Comparison	28.9 (24)	0.0 (0)	22.2 (12)	44.4 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA CROSSWEAH--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	45.7 (48)	0.0 (0)	38.1 (24)	60.0 (24)
Comparison	29.5 (31)	50.0 (1)	25.4 (16)	35.0 (14)
Successful Completers				
Treatment	41.0 (34)	0.0 (0)	35.2 (19)	55.6 (15)
Comparison	27.7 (23)	50.0 (1)	24.1 (13)	33.3 (9)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Oriana House--Summit County CBCF

Oriana Summit is a Community Based Corrections Facility located in Akron, Ohio. This facility serves adult males placed on probation or probation plus parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Summit County CBCF has been in operation since 1992 and is contracted to serve 124 men. This facility is funded primarily by ODRC. Services include substance abuse treatment, education, anger management, cognitive restructuring, financial planning, skill building, life skills and employment readiness. Summit County CBCF was visited by a University of Cincinnati research team on August 15, 2006. At the time of the visit, there were 91 offenders. Robert Dunn and Illya McGee were the identified program directors.

Program Leadership/Development

Strengths:

- The program directors had a significant role in the creation of the current program and are involved in selecting, training, and supervising staff.
- The program director provides direct services to offenders, via group treatment and working one resident supervisor shift per month.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is adequate and stable, allowing the program to operate as designed
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- While the program has consulted peer-reviewed literature related to effective interventions with offenders, they should do so on a more regular basis.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices, service delivery skills and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- In addition to a psychosocial assessment, the program uses the SASSI and MAST to assess substance abuse need as well as an employment assessment.
- The program uses the TABE and SORT as educational assessments.
- While program staff does not conduct a general risk/need assessment, the program does have access to the overall and domain scores of the Level of Service Inventory-Revised (LSI-R). This tool is administered by the intake department on all offenders admitted to the program.
- The program formally tracks offender risk level and targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess additional areas such areas as motivation, mental health, personality and learning styles.
- The program should provide re-assessment of risk and need factors on all offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug and alcohol testing, schedules/logs, phone calls in and out, a community service sheet and on-site visits.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment by attending additional treatment groups and staying in the program longer. Likewise, higher risk offenders are separated from lower risk individuals in the program via separating treatment groups by risk level.
- Graduated rehearsal is used to teach resident skills in increasingly difficult situations via a booster group.
- Offenders have the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing, homework assignments, group activities, and thinking reports.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by Transitional Services and about 75% of offenders participate in aftercare.

Recommendations for Improvement:

- While much of treatment is based upon the cognitive-behavioral and social learning models, substance abuse treatment still relies on the 12-step model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be used more consistently across all groups.
- Structured curricula or manuals should be used consistently for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Responsivity, in addition to risk and need factors should guide how offenders are matched to interventions.

- The frequency of rewards used to reinforce offender behavior should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, individualized, and based upon the demonstration of a prosocial behavior.
- The procedure by which offenders are punished could be improved by ensuring that punishers are issued consistently and immediately following the infraction. As well punishers should be individualized, varied, based upon the demonstration of an antisocial behavior and escape from punishers should be impossible.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members beyond family activities so that family members learn skills to provide prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, service delivery assessment, observation of treatment groups, staff feedback, monitoring training protocol for treatment curriculum, tracking offender recidivism, and auditing of the CCIS database.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased observation/monitoring of the service delivery of contractual and external providers.

Descriptive Statistics for both the ORIANA SUMMIT CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (226)	50.0 (226)	50.0 (282)	50.0 (282)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (108)	50.0 (108)	50.0 (121)	50.0 (121)
Non-white	50.0 (118)	50.0 (118)	50.0 (161)	50.0 (161)
Marital Status**				
Married	40.4 (23)	56.9 (34)	40.3 (27)	59.7 (40)
Single/not married	51.4 (203)	48.6 (192)	53.0 (255)	47.0 (226)
Age Category				
16 to 23	50.4 (58)	49.6 (57)	50.7 (68)	49.3 (66)
24 to 30	50.4 (60)	49.6 (59)	48.4 (75)	51.6 (80)
31-39	48.2 (53)	51.8 (57)	46.8 (65)	53.2 (74)
40+	50.9 (55)	49.1 (53)	54.4 (74)	45.6 (62)
Mean Age	31.6	31.9	32.1	35.0
SD	9.7	10.6	9.8	10.6

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for ORIANA SUMMIT Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.9	0.8	1.1	1.2
SD	1.4	1.3	1.5	1.5
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	53.8 (113)	46.2 (97)	70.3 (130)	29.7 (55)
Yes	46.7 (113)	53.3 (129)	40.1 (152)	59.9 (227)
Offense Level*				
Felony 1	14.3 (1)	85.7 (6)	2.1 (1)	97.9 (47)
Felony 2	27.3 (6)	72.7 (16)	7.7 (6)	92.3 (72)
Felony 3	68.0 (66)	32.0 (31)	53.1 (78)	46.9 (69)
Felony 4	52.4 (76)	47.6 (69)	73.3 (99)	26.7 (36)
Felony 5/M	42.5 (77)	57.5 (104)	62.8 (98)	37.2 (58)
Offense Category**				
Violent/person	47.6 (40)	52.4 (44)	26.9 (46)	73.1 (125)
Sex	50.0 (2)	50.0 (2)	50.0 (2)	50.0 (2)
Drugs	53.0 (87)	47.0 (77)	70.1 (110)	29.9 (47)
Property	39.6 (38)	60.4 (58)	44.9 (57)	55.1 (70)
Traffic/DUI	33.3 (2)	66.7 (4)	100.0 (2)	0.0 (0)
Other	58.2 (57)	41.8 (41)	63.1 (65)	36.9 (38)
Substance Abuse Problem*				
No	30.8 (12)	69.2 (27)	14.2 (15)	85.8 (91)
Yes	51.8 (214)	48.2 (199)	58.3 (267)	41.7 (191)
Employment Problem*				
No	46.9 (149)	53.1 (169)	59.3 (172)	40.7 (118)
Yes	57.5 (77)	42.5 (57)	40.1 (110)	59.9 (164)
Emotional Problem**				
No	49.1 (160)	50.9 (166)	59.4 (202)	40.6 (138)
Yes	52.4 (66)	47.6 (60)	35.7 (80)	64.3 (144)
Risk Categories				
Low	50.0 (17)	50.0 (17)	50.0 (17)	50.0 (17)
Moderate	50.0 (174)	50.0 (174)	50.0 (191)	50.0 (191)
High	50.0 (35)	50.0 (35)	50.0 (74)	50.0 (74)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	32.1	31.7	34.3 (282)	34.8 (280)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the ORIANA SUMMIT CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (149)	100.0 (77)	100.0 (178)	100.0 (104)
Female	N/A	N/A	N/A	N/A
Race				
White	47.0 (70)	49.4 (38)	41.0 (73)	46.2 (48)
Non-white	53.0 (79)	50.6 (39)	59.0 (105)	53.8 (56)
Marital Status				
Married	11.4 (17)	7.8 (6)	10.7 (19)	7.7 (8)
Single/not married	88.6 (132)	92.2 (71)	89.3 (159)	92.3 (96)
Age Category*				
16 to 23	19.5 (29)	37.7 (29)	18.5 (33)	33.7 (35)
24 to 30	27.5 (41)	24.7 (19)	28.7 (51)	23.1 (24)
31-39	22.8 (34)	24.7 (19)	21.3 (38)	26.0 (27)
40+	30.2 (45)	13.0 (10)	31.5 (56)	17.3 (18)
Mean Age	33.0	28.7	33.4	30.0
SD	10.0	8.5	10.1	9.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for ORIANA SUMMIT by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	1.1	0.6	1.2	1.0
SD	1.5	1.1	1.5	1.5
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	53.0 (79)	44.2 (34)	49.4 (88)	40.4 (42)
Yes	47.0 (70)	55.8 (43)	50.6 (90)	59.6 (62)
Offense Level				
Felony 1	0.0 (0)	1.3 (1)	0.0 (0)	1.0 (1)
Felony 2	2.7 (4)	2.6 (2)	2.2 (4)	1.9 (2)
Felony 3	33.6 (50)	20.8 (16)	32.0 (57)	20.2 (21)
Felony 4	30.9 (46)	39.0 (30)	33.1 (59)	38.5 (40)
Felony 5/M	32.9 (49)	36.4 (28)	32.6 (58)	38.5 (40)
Offense Category				
Violent/person	18.1 (27)	16.9 (13)	16.3 (29)	16.3 (17)
Sex	1.3 (2)	0.0 (0)	1.1 (2)	0.0 (0)
Drugs	40.9 (61)	33.8 (26)	40.4 (72)	36.5 (38)
Property	14.8 (22)	20.8 (16)	18.0 (32)	24.0 (25)
Traffic/DUI	0.7 (1)	1.3 (1)	0.6 (1)	1.0 (1)
Other	24.2 (36)	27.3 (21)	23.6 (42)	22.1 (23)
Substance Abuse Problem*				
No	7.4 (11)	1.3 (1)	7.3 (13)	1.9 (2)
Yes	92.6 (138)	98.7 (76)	92.7 (165)	98.1 (102)
Employment Problem*				
No	80.5 (120)	37.7 (29)	78.7 (140)	30.8 (32)
Yes	19.5 (29)	62.3 (48)	21.3 (38)	69.2 (72)
Emotional Problem**				
No	73.8 (110)	64.9 (50)	76.4 (136)	63.5 (66)
Yes	26.2 (39)	35.1 (27)	23.6 (42)	36.5 (38)
Risk Categories**				
Low	9.4 (14)	3.9 (3)	7.9 (14)	2.9 (3)
Moderate	77.2 (115)	76.6 (59)	71.9 (128)	60.6 (63)
High	13.4 (20)	19.5 (15)	20.2 (36)	36.5 (38)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	29.9 (149)	36.4 (77)	31.4 (178)	39.3 (104)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.1 (86)	17.6 (3)	39.1 (68)	42.9 (15)
Comparison	33.6 (76)	0.0 (0)	35.1 (61)	42.9 (15)
Successful Completers				
Treatment	31.5 (47)	14.3 (2)	33.9 (39)	30.0 (6)
Comparison	36.2 (54)	0.0 (0)	40.0 (46)	40.0 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)**	%(N)	%(N)	%(N)
All Participants				
Treatment	46.9 (106)	17.6 (3)	48.3 (84)	54.3 (19)
Comparison	37.6 (85)	0.0 (0)	40.2 (70)	42.9 (15)
Successful Completers				
Treatment	42.3 (63)	14.3 (2)	44.3 (51)	50.0 (10)
Comparison	39.6 (59)	0.0 (0)	44.3 (51)	40.0 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)**	%(N)	%(N)**	%(N)
All Participants				
Treatment	51.3 (116)	17.6 (3)	50.6 (88)	71.4 (25)
Comparison	39.8 (90)	11.8 (2)	39.7 (69)	54.3 (19)
Successful Completers				
Treatment	36.2 (54)	14.3 (2)	35.7 (41)	55.0 (11)
Comparison	40.9 (61)	7.1 (1)	44.3 (51)	45.0 (9)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/Parole Sample

| | Risk Levels | | | |
| | All** | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.4 (111)	17.6 (3)	39.3 (75)	44.6 (33)
Comparison	31.6 (89)	11.8 (2)	30.9 (59)	37.8 (28)
Successful Completers				
Treatment	34.8 (62)	14.3 (2)	35.9 (46)	38.9 (14)
Comparison	31.5 (56)	7.1 (1)	32.8 (42)	36.1 (13)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/Parole Sample

| | Risk Levels | | | |
| | All** | Low | Moderate** | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	48.2 (136)	17.6 (3)	48.2 (92)	55.4 (41)
Comparison	38.3 (108)	17.6 (3)	37.7 (72)	44.6 (33)
Successful Completers				
Treatment	45.5 (81)	14.3 (2)	46.1 (59)	55.6 (20)
Comparison	39.3 (70)	14.3 (2)	40.6 (52)	44.4 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for ORIANA SUMMIT--CBCF/Parole Sample

| | Risk Levels | | | |
| | All* | Low | Moderate* | High* |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	55.3 (156)	17.6 (3)	50.8 (97)	75.7 (56)
Comparison	29.4 (83)	23.5 (4)	26.7 (51)	37.8 (28)
Successful Completers				
Treatment	39.3 (70)	14.3 (2)	36.7 (47)	58.3 (21)
Comparison	28.7 (51)	14.3 (2)	27.3 (35)	38.9 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

River City Correctional Center

River City Correctional Center is a Community Based Corrections Facility located in Cincinnati, Ohio. This facility serves adult males and females who are probationers, work release offenders, on diversion, and offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). River City Correctional Center has been in operation since 1998 and is contracted to serve 108 men and 54 women. This facility is funded primarily by ODRC. The primary services provided by the program are substance abuse treatment, employment readiness, domestic violence, skill building, education, cognitive restructuring, life-skills, sex offender treatment, anger management, trauma intervention, financial planning and parenting. River City Correctional Center was visited by a University of Cincinnati research team on October 30, 2006. At the time of the visit, there were 108 male offenders and 41 female offenders. Helen Magers was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the creator of the current program and is involved in selecting, training and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Funding is adequate and stable, allowing the program to operate as designed.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- Males and females are kept in separate treatment programs.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should provide regular direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours on ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should receive additional initial and ongoing training related to the theory and practice of interventions used by the program, including effective correctional practices and the clinical skills related to working with offenders.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- In addition to a psychosocial assessment, the program uses the Kressel and the CMR to assess motivation.
- The program conducts reassessment using the LSI-R.
- Offender risk levels are formally tracked and the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a wider spectrum of standardized responsivity assessments to assess such areas as personality, mental health, education, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management, anger management, domestic violence, sexual deviance and employment).
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls in and out and drug testing).
- Staff are matched to groups based on desire to provide a particular service.
- River City provides structure for offenders to give input into the operation of the program via a suggestions box, community meeting and resident spokesperson(s).
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, processing and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program and 75% of offenders participate in such services.

Recommendations for Improvement:

- While many of the program's targets are criminogenic in nature, others are non-criminogenic such as self-esteem, inner child, emotional incest and power of writing. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While some pods have cognitive-behavioral elements, the program's primary treatment model is a therapeutic community, despite the empirical evidence supporting use of a cognitive-behavioral model.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.

- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved if staff consistently applied punishers, they were individualized, undesirable by the offenders, not spread out, and if and if prosocial alternatives were taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 87%. This rate should fall between 65 and 85%.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should strive to provide aftercare services to all residents discharged from the program (either internally or via external referrals).
- While the program provides services to family members who might assist in providing prosocial support for the offenders, only 45% of families participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, recidivism tracking, supervision of offender assessments, conducting re-assessments, staff feedback, supervision of program and staff certification updates, monitoring aftercare and observation of treatment services.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.
- While the program has participated in a past outcome evaluation, they failed to score better than the comparison group on recidivism measures.

Descriptive Statistics for both the RIVER CITY CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (233)	50.0 (233)	50.0 (279)	50.0 (279)
Female	50.0 (89)	50.0 (89)	50.0 (72)	50.0 (72)
Race				
White	50.0 (185)	50.0 (185)	50.0 (188)	50.0 (188)
Non-white	50.0 (137)	50.0 (137)	50.0 (163)	50.0 (163)
Marital Status***				
Married	58.9 (56)	41.1 (39)	51.3 (59)	48.7 (56)
Single/not married	48.5 (266)	51.5 (283)	52.8 (292)	47.2 (261)
Age Category***				
16 to 23	60.3 (108)	39.7 (71)	57.2 (111)	42.8 (83)
24 to 30	47.3 (78)	52.7 (87)	51.1 (92)	48.9 (88)
31-39	42.7 (67)	57.3 (90)	44.1 (75)	55.9 (95)
40+	48.3 (69)	51.7 (74)	46.2 (73)	53.8 (85)
Mean Age	30.4	32.3	30.6	35.1
SD	9.8	9.9	9.7	9.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for RIVER CITY Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.6	0.9	0.6	1.3
SD	1.2	1.4	1.2	1.8
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	54.8 (234)	45.2 (193)	74.0 (248)	26.0 (87)
Yes	40.6 (88)	59.4 (129)	28.1 (103)	71.9 (264)
Offense Level**				
Felony 1	22.2 (2)	77.8 (7)	6.4 (3)	93.6 (44)
Felony 2	55.6 (20)	44.4 (16)	21.5 (20)	78.5 (73)
Felony 3	49.5 (54)	50.5 (55)	33.3 (57)	66.7 (114)
Felony 4	52.1 (100)	47.9 (92)	69.8 (118)	30.2 (51)
Felony 5/M	49.0 (146)	51.0 (152)	68.9 (153)	31.1 (69)
Offense Category*				
Violent/person	37.3 (41)	62.7 (69)	22.6 (43)	77.4 (147)
Sex	50.0 (10)	50.0 (10)	50.0 (14)	50.0 (14)
Drugs	58.8 (167)	41.2 (117)	76.3 (183)	23.8 (57)
Property	42.0 (60)	58.0 (83)	45.1 (64)	54.9 (78)
Traffic/DUI	78.3 (18)	21.7 (5)	100.0 (19)	0.0 (0)
Other	40.6 (26)	59.4 (38)	33.7 (28)	66.3 (55)
Substance Abuse Problem*				
No	18.8 (9)	81.2 (39)	7.5 (9)	92.5 (111)
Yes	52.5 (313)	47.5 (283)	58.8 (342)	41.2 (240)
Employment Problem**				
No	36.1 (120)	63.9 (212)	46.4 (127)	53.6 (147)
Yes	64.7 (202)	35.3 (110)	52.3 (224)	47.7 (204)
Emotional Problem**				
No	50.7 (254)	49.3 (247)	58.6 (279)	41.4 (197)
Yes	47.6 (68)	52.4 (75)	31.9 (72)	68.1 (154)
Risk Categories				
Low	50.0 (33)	50.0 (33)	50.0 (33)	50.0 (33)
Moderate	50.0 (249)	50.0 (249)	50.0 (251)	50.0 (251)
High	50.0 (40)	50.0 (40)	50.0 (67)	50.0 (67)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	24.2 (322)	23.3 (322)	34.5 (279)	34.7 (279)
Females	6.1 (322)	5.9 (322)	22.4 (72)	22.5 (70)
Overall	30.3 (322)	29.2 (322)	32 (351)	32.1 (351)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the RIVER CITY CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	70.3 (185)	81.4 (48)	78.9 (221)	81.7 (58)
Female	29.7 (78)	18.6 (11)	21.1 (59)	18.3 (13)
Race*				
White	62.7 (165)	33.9 (20)	57.9 (162)	36.6 (26)
Non-white	37.3 (98)	66.1 (39)	42.1 (118)	63.4 (45)
Marital Status				
Married	19.0 (50)	10.2 (6)	18.2 (51)	11.3 (8)
Single/not married	81.0 (213)	89.8 (53)	81.8 (229)	88.7 (63)
Age Category				
16 to 23	30.4 (80)	47.5 (28)	28.9 (81)	42.3 (30)
24 to 30	25.5 (67)	18.6 (11)	26.8 (75)	23.9 (17)
31-39	21.7 (57)	16.9 (10)	22.5 (63)	16.9 (12)
40+	22.4 (59)	16.9 (10)	21.8 (61)	16.9 (12)
Mean Age	30.8	28.7	31.0	29.1
SD	9.7	10.1	9.6	9.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for RIVER CITY by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.6	0.6	0.6	0.8
SD	1.2	1.0	1.3	1.1
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	74.1 (195)	66.1 (39)	71.1 (199)	69.0 (49)
Yes	25.9 (68)	33.9 (20)	28.9 (81)	31.0 (22)
Offense Level				
Felony 1	0.4 (1)	1.7 (1)	0.7 (2)	1.4 (1)
Felony 2	6.8 (18)	3.4 (2)	6.4 (18)	2.8 (2)
Felony 3	16.7 (44)	16.9 (10)	16.8 (47)	14.1 (10)
Felony 4	31.2 (82)	30.5 (18)	33.9 (95)	32.4 (23)
Felony 5/M	44.9 (118)	47.5 (28)	42.1 (118)	49.3 (35)
Offense Category				
Violent/person	13.3 (35)	10.2 (6)	13.2 (37)	8.5 (6)
Sex	3.0 (8)	3.4 (2)	4.3 (12)	2.8 (2)
Drugs	51 (134)	55.9 (33)	51.4 (144)	54.9 (39)
Property	19.4 (51)	15.3 (9)	17.9 (50)	19.7 (14)
Traffic/DUI	5.7 (15)	5.1 (3)	5.7 (16)	4.2 (3)
Other	7.6 (20)	10.2 (6)	7.5 (21)	9.9 (7)
Substance Abuse Problem				
No	2.7 (7)	3.4 (2)	2.5 (7)	2.8 (2)
Yes	97.3 (256)	96.6 (57)	97.5 (273)	97.2 (69)
Employment Problem*				
No	45.2 (119)	1.7 (1)	45.0 (126)	1.4 (1)
Yes	54.8 (144)	98.3 (58)	55.0 (154)	98.6 (70)
Emotional Problem				
No	79.8 (210)	74.6 (44)	81.1 (227)	73.2 (52)
Yes	20.2 (53)	25.4 (15)	18.9 (53)	26.8 (19)
Risk Categories**				
Low	11.8 (31)	3.4 (2)	11.1 (31)	2.8 (2)
Moderate	77.9 (205)	74.6 (44)	73.6 (206)	63.4 (45)
High	10.3 (27)	22 (13)	15.4 (43)	33.8 (24)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	22.6 (263)	31.3 (59)	33.1 (221)	39.7 (58)
Females	6.5 (263)	4.5 (59)	21.5 (59)	26.1 (13)
Overall	29.1 (263)	36 (59)	30.7 (280)	37.2 (71)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for RIVER CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.7 (115)	9.1 (3)	37.8 (94)	45.0 (18)
Comparison	35.7 (115)	18.2 (6)	35.7 (89)	50.0 (20)
Successful Completers				
Treatment	29.3 (77)	6.5 (2)	30.2 (62)	48.1 (13)
Comparison	35.4 (93)	19.4 (6)	34.6 (71)	59.3 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for RIVER CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.0 (148)	15.2 (5)	47.8 (119)	60.0 (24)
Comparison	41.6 (134)	18.2 (6)	42.2 (105)	57.5 (23)
Successful Completers				
Treatment	39.2 (103)	12.9 (4)	41.0 (84)	55.6 (15)
Comparison	41.4 (109)	19.4 (6)	41.5 (85)	66.7 (18)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for RIVER CITY--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)***
All Participants				
Treatment	39.8 (128)	24.2 (8)	39.0 (97)	57.5 (23)
Comparison	39.8 (128)	21.2 (7)	37.8 (94)	67.5 (27)
Successful Completers				
Treatment	31.9 (84)	25.8 (8)	31.2 (64)	44.4 (12)
Comparison	38.8 (102)	22.6 (7)	37.1 (76)	70.4 (19)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for RIVER CITY--CBCF/Parole Sample

| | Risk Levels | | | |
| | All** | Low | Moderate** | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	37.3 (131)	9.1 (3)	37.5 (94)	50.7 (34)
Comparison	28.8 (101)	6.1 (2)	27.1 (68)	46.3 (31)
Successful Completers				
Treatment	29.6 (83)	6.5 (2)	29.6 (61)	46.5 (20)
Comparison	26.4 (74)	6.5 (2)	24.3 (50)	51.2 (22)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for RIVER CITY--CBCF/Parole Sample

| | Risk Levels | | | |
| | All* | Low | Moderate** | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.3 (166)	15.2 (5)	47.0 (118)	64.2 (43)
Comparison	37.3 (131)	9.1 (3)	36.7 (92)	53.7 (36)
Successful Completers				
Treatment	39.3 (110)	12.9 (4)	39.8 (82)	55.8 (24)
Comparison	34.6 (97)	9.7 (3)	34.0 (70)	55.8 (24)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for RIVER CITY--CBCF/Parole Sample

| | Risk Levels | | | |
| | All* | Low* | Moderate* | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.2 (141)	24.2 (8)	38.2 (96)	55.2 (37)
Comparison	26.8 (94)	3.0 (1)	26.3 (66)	40.3 (27)
Successful Completers				
Treatment	30.7 (86)	25.8 (8)	30.1 (62)	37.2 (16)
Comparison	25.0 (70)	3.2 (1)	23.8 (49)	46.5 (20)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

South Eastern Probation Treatment Alternative Correctional Facility (SEPTA)

South Eastern Probation Treatment Alternative Correctional Facility (SEPTA) is a Community Based Corrections Facility located in Nelsonville, Ohio. This facility serves adult males who are on probation, judicial release, community control, and offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). South Eastern Probation Treatment Alternative Correctional Facility has been in operation since 1990 and is contracted to serve 64 men. This facility is funded by ODRC and Able grants. The primary internal services provided by the program are substance abuse treatment, employment readiness, skill building, education, mental health, life-skills, anger management, and cognitive restructuring. South Eastern Probation Treatment Alternative Correctional Facility was visited by a University of Cincinnati research team on September 21, 2006. At the time of the visit, there were 60 male offenders. Scott Weaver was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services via group treatment, conducting assessments, carrying a caseload, and teaching GED classes to offenders in the program.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding has been relatively stable the past two years, significant funding limitations have significantly affected programming and staffing at SEPTA. Treatment groups have been cut as well as staff positions, and staff have not had raises in 5 years.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

- Staff should receive additional training related to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI, MAST and NCA to further assess substance abuse need, as well as the TABE to assess educational need.
- The program uses the following responsivity tools: the MMPI to assess personality and a lethality tool for all residents, as well as the Beck Depression Inventory and the Memory for Designs to assess organic brain damage on a small percentage of offenders.
- The program conducts reassessment using the LSI-R.
- Based upon file review, the program targets primarily moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management, anger management and employment).
- Several groups incorporate structured skill building via the modeling and role playing of prosocial skills. Likewise, graduated rehearsal is used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals are developed and followed for all groups.
- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls out and jobsite and furlough checks).
- The program provides the structure for offenders to give input into the operation of the program.
- Staff are matched to groups based on experience, desire to provide a particular service, and skill level.
- The types and range of rewards used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, homework assignments, processing, and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While there are elements of cognitive-behavioral treatment in the program such as the Thinking for a Change group, treatment is also based upon 12-step and reality therapy models.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While several of the groups incorporate structured skill building, these cognitive-behavioral techniques should be incorporated more consistently across all groups. Likewise, use of graduated rehearsal should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.

- Staff should use appropriate punishers, avoiding shaming techniques and long periods of isolation. Staff should also be trained on the identification of negative effects of punishers and how to intervene on such effects. The program could improve the application of punishers by ensuring they are consistently applied, immediately applied, individualized, varied, match the infraction, and that they are not spread out.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 64%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond probation or parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, supervision of training protocol for treatment curriculum, and quarterly observation of treatment services.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.
- The program provides monitoring of contractual providers consisting of direct observation of treatment delivery.

Recommendations for Improvement:

- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.
- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation.

Descriptive Statistics for both the SEPTA CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (112)	50.0 (112)	50.0 (86)	50.0 (86)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (106)	50.0 (106)	50.0 (79)	50.0 (79)
Non-white	50.0 (6)	50.0 (6)	50.0 (7)	50.0 (7)
Marital Status				
Married	39.5 (15)	60.5 (23)	37.0 (10)	63.0 (17)
Single/not married	52.2 (97)	47.8 (89)	54.7 (76)	45.3 (63)
Age Category*				
16 to 23	60.3 (38)	39.7 (25)	41.8 (23)	58.2 (32)
24 to 30	59.5 (44)	40.5 (30)	64.9 (37)	35.1 (20)
31-39	41.9 (18)	58.1 (25)	53.3 (16)	46.7 (14)
40+	27.3 (12)	72.7 (32)	33.3 (10)	66.7 (20)
Mean Age	28.0	33.2	28.6	33.5
SD	7.7	11.0	7.9	10.8

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for SEPTA Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.59	0.58	0.8	0.9
SD	0.9	1.0	1.1	1.4
Previous Conviction**	% (N)	% (N)	% (N)	% (N)
No	48.1 (62)	51.9 (67)	58.0 (51)	42.0 (37)
Yes	52.6 (50)	47.4 (45)	41.7 (35)	58.3 (49)
Offense Level*				
Felony 1	50.0 (2)	50.0 (2)	25.0 (2)	75.0 (6)
Felony 2	68.4 (13)	31.6 (6)	27.3 (9)	72.7 (24)
Felony 3	65.9 (29)	34.1 (15)	42.6 (20)	57.4 (27)
Felony 4	49.2 (31)	50.8 (32)	78.1 (25)	21.9 (7)
Felony 5/M	39.4 (37)	60.6 (57)	57.7 (30)	42.3 (22)
Offense Category				
Violent/person	58.7 (37)	41.3 (26)	46.2 (24)	53.8 (28)
Sex	50.0 (1)	50.0 (1)	50.0 (1)	50.0 (1)
Drugs	34.8 (23)	65.2 (43)	58.3 (14)	41.7 (10)
Property	53.2 (33)	46.8 (29)	49.3 (33)	50.7 (34)
Traffic/DUI	40.0 (2)	60.0 (3)	100.0 (2)	0.0 (0)
Other	61.5 (16)	38.5 (10)	48.0 (12)	52.0 (13)
Substance Abuse Problem**				
No	47.8 (11)	52.2 (12)	26.1 (6)	73.9 (17)
Yes	50.2 (101)	49.8 (100)	53.7 (80)	46.3 (69)
Employment Problem**				
No	50.9 (83)	49.1 (80)	57.6 (57)	42.4 (42)
Yes	47.5 (29)	52.5 (32)	39.7 (29)	60.3 (44)
Emotional Problem***				
No	42.9 (57)	57.1 (76)	45.9 (45)	54.1 (53)
Yes	60.4 (55)	39.6 (36)	55.4 (41)	44.6 (33)
Risk Categories				
Low	50.0 (11)	50.0 (11)	50.0 (11)	50.0 (11)
Moderate	50.0 (88)	50.0 (88)	50.0 (50)	50.0 (50)
High	50.0 (13)	50.0 (13)	50.0 (25)	50.0 (25)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	31.1 (112)	29.6 (112)	33.6 (86)	33.9 (86)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the SEPTA CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
	% (N)	% (N)	% (N)	% (N)
Gender				
Male	100.0 (82)	100.0 (30)	100.0 (55)	100.0 (31)
Female	N/A	N/A	N/A	N/A
Race				
White	95.1 (78)	93.3 (28)	92.7 (51)	90.3 (28)
Non-white	4.9 (4)	6.7 (2)	7.3 (4)	9.7 (3)
Marital Status				
Married	13.4 (11)	13.3 (4)	12.7 (7)	9.7 (3)
Single/not married	86.6 (71)	86.7 (26)	87.3 (48)	90.3 (28)
Age Category				
16 to 23	29.3 (24)	46.7 (14)	21.8 (12)	35.5 (11)
24 to 30	43.9 (36)	26.7 (8)	47.3 (26)	35.5 (11)
31-39	14.6 (12)	20.0 (6)	16.4 (9)	22.6 (7)
40+	12.2 (10)	6.7 (2)	14.5 (8)	6.5 (2)
Mean Age	28.5	26.4	29.6	26.8
SD	8.0	6.6	8.5	6.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for SEPTA by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.6	0.6	0.9	0.6
SD	1.0	0.7	1.2	0.8
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	54.9 (45)	56.7 (17)	60.0 (33)	58.1 (18)
Yes	45.1 (37)	43.3 (13)	40.0 (22)	41.9 (13)
Offense Level				
Felony 1	2.4 (2)	0.0 (0)	3.6 (2)	0.0 (0)
Felony 2	12.2 (10)	10.0 (3)	12.7 (7)	6.5 (2)
Felony 3	26.8 (22)	23.3 (7)	23.6 (13)	22.6 (7)
Felony 4	25.6 (21)	33.3 (10)	30.9 (17)	25.8 (8)
Felony 5/M	32.9 (27)	33.3 (10)	29.1 (16)	45.2 (14)
Offense Category				
Violent/person	36.6 (30)	23.3 (7)	34.5 (19)	16.1 (5)
Sex	1.2 (1)	0.0 (0)	1.8 (1)	0.0 (0)
Drugs	18.3 (15)	26.7 (8)	18.2 (10)	12.9 (4)
Property	28.0 (23)	33.3 (10)	29.1 (16)	54.8 (17)
Traffic/DUI	2.4 (2)	0.0 (0)	3.6 (2)	0.0 (0)
Other	13.4 (11)	16.7 (5)	12.7 (7)	16.1 (5)
Substance Abuse Problem				
No	8.5 (7)	13.3 (4)	7.3 (4)	6.5 (2)
Yes	91.5 (75)	86.7 (26)	92.7 (51)	93.5 (29)
Employment Problem*				
No	92.7 (76)	23.3 (7)	94.5 (52)	16.1 (5)
Yes	7.3 (6)	76.7 (23)	5.5 (3)	83.9 (26)
Emotional Problem				
No	48.8 (40)	56.7 (17)	45.5 (25)	64.5 (20)
Yes	51.2 (42)	43.3 (13)	54.5 (30)	35.5 (11)
Risk Categories*				
Low	12.2 (10)	3.3 (1)	18.2 (10)	3.2 (1)
Moderate	80.5 (66)	73.3 (22)	67.3 (37)	41.9 (13)
High	7.3 (6)	23.3 (7)	14.5 (8)	54.8 (17)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	28.8 (82)	37.2 (30)	29.1 (55)	41.6 (31)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for SEPTA--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	33.9 (38)	18.2 (2)	35.2 (31)	38.5 (5)
Comparison	29.5 (33)	27.3 (3)	26.1 (23)	53.8 (7)
Successful Completers				
Treatment	29.3 (24)	10.0 (1)	33.3 (22)	16.7 (1)
Comparison	30.5 (25)	30.0 (3)	28.8 (19)	50.0 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for SEPTA--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	36.6 (41)	27.3(3)	37.5 (33)	38.5 (5)
Comparison	33.0 (37)	27.3(3)	28.4 (25)	69.2 (9)
Successful Completers				
Treatment	30.5 (25)	20.0 (2)	33.3 (22)	16.7 (1)
Comparison	34.1 (28)	30.0 (3)	31.8 (21)	66.7 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for SEPTA--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)**	Low %(N)	Moderate %(N)**	High %(N)
All Participants				
Treatment	46.4 (52)	18.2 (2)	48.9 (43)	53.8 (7)
Comparison	33.0 (37)	18.2 (2)	30.7 (27)	61.5 (8)
Successful Completers				
Treatment	34.1 (28)	10.0 (1)	37.9 (25)	33.2 (2)
Comparison	31.7 (26)	20.0 (2)	30.3 (20)	66.7 (4)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for SEPTA--CBCF/Parole Sample

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	43.0 (37)	18.2 (2)	42.0 (21)	56.0 (14)
Comparison	30.2 (26)	18.2 (2)	30.0 (15)	36.0 (9)
Successful Completers				
Treatment	29.1 (16)	10.0 (1)	37.8 (14)	12.5 (1)
Comparison	34.5 (19)	20.0 (2)	32.4 (12)	62.5 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for SEPTA--CBCF/Parole Sample

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	45.3 (39)	27.3 (3)	44.0 (22)	56.0 (14)
Comparison	41.9 (36)	27.3 (3)	42.0 (21)	48.0 (12)
Successful Completers				
Treatment	30.9 (17)	20.0 (2)	37.8 (14)	12.5 (1)
Comparison	43.6 (24)	30.0 (3)	43.2 (16)	62.5 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for SEPTA--CBCF/Parole Sample

	Risk Levels			
	All* %(N)	Low %(N)	Moderate* %(N)	High* %(N)
All Participants				
Treatment	55.8 (48)	18.2 (2)	58.0 (29)	68.0 (17)
Comparison	29.1 (25)	27.3 (3)	30.0 (15)	28.0 (7)
Successful Completers				
Treatment	36.4 (20)	10.0 (1)	45.9 (17)	25.0 (2)
Comparison	30.9 (17)	30.0 (3)	29.7 (11)	37.5 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Structure, Therapy, Advocacy, and Restoration Community Justice Center (STAR)

Structure, Therapy, Advocacy, and Restoration Community Justice Center (STAR) is a Community Based Corrections Facility located in Franklin Furnace, Ohio. This facility primarily serves adult males who are on probation and judicial release, while occasionally serving offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). STAR Community Justice Center has been in operation since 2002 and is contracted to serve 62 men. This facility is primarily funded by ODRC and in the past was also funded by Title 1 and Able grants. The primary internal services provided by the program are education, anger management, skill building, employment readiness, substance abuse, and cognitive restructuring. STAR Community Justice Center was visited by a University of Cincinnati research team on September 22, 2006. At the time of the visit, there were 62 male offenders. Rob Sturgill was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is stable, some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an adequate number of hours on ongoing training and most training relates to clinical skills used to deliver effective programming.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment. The program also uses the ASUS to further assess substance abuse need.
- The program uses the following responsivity tools: the Trumpet to assess motivation, a need self assessment and the CASAS educational assessment.
- The program conducts reassessment using the LSI-R as well as occasional reassessment with the CASAS.
- Based upon file review, the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should consider incorporating a wider spectrum of standardized responsivity assessments to assess such areas as personality, mental health, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management and employment).
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The program is effective at monitoring offenders while on passes to the community via drug testing, checking receipts, employment checks, and phone calls in and out.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The program provides the structure for offenders to give input into the operation of the program via a suggestion box.
- The types of rewards and punishers used by the program appear appropriate.
- Staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 80.6%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, processing, and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While the program incorporates some cognitive behavioral elements, such as the Thinking for a Change group, the primary treatment model is a therapeutic community and substance abuse treatment still has 12-step elements.
- The program should offer structured skill building opportunities, including regular use of modeling and role play. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10 and all groups should be directed by staff.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.

- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The procedure for punishing could also be improved by ensuring that punishers are individualized, undesirable by the offenders, varied, match the infraction, are not spread out and immediately applied following the infraction.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- While the program attempts to provide a family intervention component via a "Loved Ones" group, only about 40% of the families participate.
- Aftercare services that are based upon a cognitive-behavioral model should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- While the program uses a few internal quality review mechanisms such as file reviews and client surveys, internal quality assurance could be improved by providing observation of direct service with feedback to staff. Likewise, the program should provide increased monitoring of contractual a providers consisting also of direct observation of treatment delivery.

Descriptive Statistics for both the STAR CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (102)	50.0 (102)	50.0 (99)	50.0 (99)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (85)	50.0 (85)	50.0 (80)	50.0 (80)
Non-white	50.0 (17)	50.0 (17)	50.0 (19)	50.0 (19)
Marital Status				
Married	42.9 (15)	57.1 (20)	46.2 (12)	53.8 (14)
Single/not married	50.3 (83)	49.7 (82)	51.6 (81)	48.4 (76)
Age Category				
16 to 23	50.0 (25)	50.0 (25)	39.1 (25)	60.9 (39)
24 to 30	60.8 (45)	39.2 (29)	62.9 (44)	37.1 (26)
31-39	41.5 (17)	58.5 (24)	48.6 (17)	51.4 (18)
40+	38.5 (15)	61.5 (24)	44.8 (13)	55.2 (16)
Mean Age	28.9	31.3	28.6	32.0
SD	7.7	9.5	7.5	10.1

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for STAR Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.4	1.0	0.4	1.2
SD	0.8	1.2	0.8	1.7
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	58.8 (80)	41.2 (56)	68.8 (77)	31.3 (35)
Yes	32.4 (22)	67.6 (46)	22.9 (19)	77.1 (64)
Offense Level**				
Felony 1	0.0 (0)	100.0 (1)	0.0 (0)	100.0 (17)
Felony 2	54.5 (6)	45.5 (5)	18.8 (3)	81.3 (13)
Felony 3	54.5 (24)	45.5 (20)	44.4 (24)	55.6 (30)
Felony 4	58.9 (43)	41.1 (30)	74.1 (40)	25.9 (14)
Felony 5/M	38.7 (29)	61.3 (46)	59.3 (32)	40.7 (22)
Offense Category*				
Violent/person	13.0 (3)	87.0 (20)	5.7 (3)	94.3 (50)
Sex	N/A	N/A	N/A	N/A
Drugs	57.5 (42)	42.5 (31)	80.9 (38)	19.1 (9)
Property	51.4 (37)	48.6 (35)	54.2 (39)	45.8 (33)
Traffic/DUI	66.7 (6)	33.3 (3)	100.0 (6)	0.0 (0)
Other	51.9 (14)	48.1 (13)	65.0 (13)	35.0 (7)
Substance Abuse Problem				
No	54.5 (12)	45.5 (10)	40.7 (11)	59.3 (16)
Yes	49.5 (90)	50.5 (92)	51.5 (88)	48.5 (83)
Employment Problem*				
No	28.9 (28)	71.1 (69)	30.1 (22)	69.9 (51)
Yes	69.2 (74)	30.8 (33)	61.6 (77)	38.4 (48)
Emotional Problem**				
No	53.1 (86)	46.9 (76)	61.0 (83)	39.0 (53)
Yes	38.1 (16)	61.9 (26)	25.8 (16)	74.2 (46)
Risk Categories				
Low	50.0 (4)	50.0 (4)	50.0 (4)	50.0 (4)
Moderate	50.0 (74)	50.0 (74)	50.0 (59)	50.0 (59)
High	50.0 (24)	50.0 (24)	50.0 (33)	50.0 (33)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	35.6 (102)	33.9 (102)	37.2 (96)	36.0 (96)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the STAR CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (76)	100.0 (26)	100.0 (73)	100.0 (26)
Female	N/A	N/A	N/A	N/A
Race				
White	86.8 (66)	73.1 (19)	83.6 (61)	73.1 (19)
Non-white	13.2 (10)	26.9 (7)	16.4 (12)	26.9 (7)
Marital Status				
Married	15.3 (11)	15.4 (4)	13.4 (9)	11.5 (3)
Single/not married	84.7 (61)	84.6 (22)	86.6 (58)	88.5 (23)
Age Category				
16 to 23	27.6 (21)	15.4 (4)	27.4 (20)	19.2 (5)
24 to 30	43.4 (33)	46.2 (12)	43.8 (32)	46.2 (12)
31-39	14.5 (11)	23.1 (6)	16.4 (12)	19.2 (5)
40+	14.5 (11)	15.4 (4)	12.3 (9)	15.4 (4)
Mean Age	28.5	30.0	28.4	29.4
SD	7.7	8.0	7.3	8.0

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for STAR by Termination Status

	CBCF/ISP		CBCF/Parole	
Variable	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.4	0.5	0.4	0.5
SD	0.7	1.0	0.8	1.0
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	82.9 (63)	65.4 (17)	84.3 (59)	69.2 (18)
Yes	17.1 (13)	34.6 (9)	15.7 (11)	30.8 (8)
Offense Level				
Felony 1	N/A	N/A	N/A	N/A
Felony 2	7.9 (6)	0.0 (0)	4.1 (3)	0.0 (0)
Felony 3	27.6 (21)	11.5 (3)	27.4 (20)	15.4 (4)
Felony 4	38.2 (29)	53.8 (14)	37.0 (27)	50.0 (13)
Felony 5/M	26.3 (20)	34.6 (9)	31.5 (23)	34.6 (9)
Offense Category				
Violent/person	3.9 (3)	0.0 (0)	4.1 (3)	0.0 (0)
Sex	N/A	N/A	N/A	N/A
Drugs	43.4 (33)	34.6 (9)	41.1 (30)	30.8 (8)
Property	31.6 (24)	50.0 (13)	34.2 (25)	53.8 (14)
Traffic/DUI	6.6 (5)	3.8 (1)	6.8 (5)	3.8 (1)
Other	14.5 (11)	11.5 (3)	13.7 (10)	11.5 (3)
Substance Abuse Problem				
No	14.5 (11)	3.8 (1)	13.7 (10)	3.8 (1)
Yes	85.5 (65)	96.2 (25)	86.3 (63)	96.2 (25)
Employment Problem*				
No	36.8 (28)	0.0 (0)	30.1 (22)	0.0 (0)
Yes	63.2 (48)	100.0 (26)	69.9 (51)	100.0 (26)
Emotional Problem*				
No	89.5 (68)	69.2 (18)	90.4 (66)	65.4 (17)
Yes	10.5 (8)	30.8 (8)	9.6 (7)	34.6 (9)
Risk Categories*				
Low	5.3 (4)	0.0 (0)	5.7 (4)	0.0 (0)
Moderate	80.3 (61)	50.0 (13)	67.1 (47)	46.2 (12)
High	14.5 (11)	50.0 (13)	27.1 (19)	53.8 (14)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	33.3 (76)	42.4 (26)	35.2 (70)	42.5 (26)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for STAR--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.2 (41)	25.0 (1)	33.8 (25)	62.5 (15)
Comparison	32.4 (33)	0.0 (0)	27 (20)	54.2 (13)
Successful Completers				
Treatment	28.9 (22)	25.0 (1)	29.5 (18)	27.3 (3)
Comparison	31.6 (24)	0.0 (0)	29.5 (18)	54.5 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for STAR--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.1 (47)	25.0 (1)	39.2 (29)	70.8 (17)
Comparison	35.3 (36)	0.0 (0)	31.1 (23)	54.2 (13)
Successful Completers				
Treatment	35.5 (27)	25.0 (1)	34.4 (21)	45.5 (5)
Comparison	35.5 (27)	0.0 (0)	34.4 (21)	54.5 (6)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for STAR--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	45.1 (46)	25.0 (1)	40.5 (30)	62.5 (15)
Comparison	38.2 (39)	0.0 (0)	36.5 (27)	50.0 (12)
Successful Completers				
Treatment	38.2 (29)	25.0 (1)	37.7 (23)	45.5 (5)
Comparison	39.5 (30)	0.0 (0)	41.0 (25)	45.5 (5)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

Table XX: New Felony Conviction by Group Membership and Risk Level for STAR--CBCF/Parole Sample

	Risk Levels			
	All**	Low	Moderate**	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	41.7 (40)	25.0 (1)	35.6 (21)	54.5 (18)
Comparison	29.2 (28)	25.0 (1)	15.3 (9)	54.5 (18)
Successful Completers				
Treatment	31.4 (22)	25.0 (1)	31.9 (15)	31.6 (6)
Comparison	28.6 (20)	25.0 (1)	19.1 (9)	52.6 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Table XX: Any New Conviction by Group Membership and Risk Level for STAR--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate**	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.9 (46)	25.0 (1)	42.4 (25)	60.6 (20)
Comparison	37.5 (36)	50.0 (2)	23.7 (14)	60.6 (20)
Successful Completers				
Treatment	38.6 (27)	25.0 (1)	38.3 (18)	42.1 (8)
Comparison	35.7 (25)	50.0 (2)	27.7 (13)	52.6 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for STAR--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.9 (45)	25.0 (1)	42.4 (25)	57.6 (19)
Comparison	42.7 (41)	25.0 (1)	32.2 (19)	63.6 (21)
Successful Completers				
Treatment	40.0 (28)	25.0 (1)	40.4 (19)	42.1 (80
Comparison	40.0 (28)	25.0 (1)	31.9 (15)	63.2 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Stark Regional Community Correctional Center

Stark Regional CCC is a Community Based Corrections Facility located in Louisville, Ohio. This facility serves adult males and females placed on probation. Stark Regional CCC has been in operation since 1992 and is contracted to serve 84 men and 21 women. This facility is funded by the Ohio Department of Rehabilitation and Correction (ODRC), federal funding, and Abel and Title 1 grants. Services include substance abuse treatment, education, mental health, cognitive restructuring, skill building, life-skills, parenting, and employment readiness. Stark Regional CCC was visited by a University of Cincinnati research team on August 17, 2006. At the time of the visit, the program was at capacity with 84 male and 21 female offenders. Dee Davison was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services, via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is adequate and stable, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- While the agency receives non-peer reviewed journals, the program should regularly consult a wider range or literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are receive an annual performance evaluation.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is not problematic for this program.

Recommendations for Improvement:

- More initial staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.

- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Level of Service Inventory-Revised (LSI-R) to assess offender risk level and criminogenic needs.
- In addition to a psychosocial assessment, the program uses the SAQ to assess substance abuse need and CASAS to assess education.
- A majority of offenders admitted to the program are moderate to high risk for recidivism.
- The program reassesses offenders using the LSI-R.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, personality, mental health, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Offenders are effectively monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out, and staff visits.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment via additional treatment requirements.
- The types of rewards and punishers used by the program appear appropriate, as does the procedure for reinforcing behavior.
- The program completion rate is 83%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, group activities, and thinking reports.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by transitional services to approximately 80% of offenders participate residential treatment.

Recommendations for Improvement:

- While some program components are based upon a cognitive-behavioral model, the substance abuse treatment still has 12-step/self help elements.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups.
- Although program uses graduated rehearsal, it should be used with all offenders as only 10% offenders receive it.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- Formal mechanisms should be in place that provide offenders with the opportunity for input into the structure of the program, e.g., a suggestion box, community meeting, or resident spokesperson.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved by ensuring that punishers immediately follow the infraction, they are individualized, undesirable by the offenders, not spread out, and alternative prosocial

behavior is taught to offenders. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.

- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders, beyond a program overview.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, and conducting offender re-assessments.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers, consisting of observation of service delivery.

Descriptive Statistics for both the STARK CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**	**Treatment Group** **% (N)**	**Comparison Group** **% (N)**
Gender				
Male	50.0 (178)	50.0 (178)	50.0 (216)	50.0 (216)
Female	50.0 (46)	50.0 (46)	50.0 (28)	50.0 (28)
Race				
White	50.0 (168)	50.0 (168)	50.0 (169)	50.0 (169)
Non-white	50.0 (56)	50.0 (56)	50.0 (75)	50.0 (75)
Marital Status				
Married	52.1 (25)	47.9 (23)	41.1 (23)	58.9 (33)
Single/not married	49.5 (197)	50.5 (201)	53.7 (220)	46.3 (190)
Age Category				
16 to 23	54.9 (67)	45.1 (55)	55.2 (80)	44.8 (65)
24 to 30	55.3 (52)	44.7 (42)	45.0 (50)	55.0 (61)
31-39	46.1 (53)	53.9 (62)	47.3 (61)	52.7 (68)
40+	44.4 (52)	55.6 (65)	51.5 (53)	48.5 (50)
Mean Age	31.6	33.3	31.2	34.1
SD	10.7	10.4	10.6	9.7

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for STARK Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	**Comparison Group**	**Treatment Group**	**Comparison Group**
Prior Incarcerations				
Mean (N)	0.8	0.7	1.0	1.1
SD	1.2	1.4	1.3	1.7
Previous Conviction**	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	50.7 (136)	49.3 (132)	71.4 (130)	28.6 (52)
Yes	48.9 (88)	51.1 (92)	37.3 (114)	62.7 (192)
Offense Level*				
Felony 1	57.1 (8)	42.9 (6)	17.1 (7)	82.9 (34)
Felony 2	73.0 (27)	27.0 (10)	34.6 (28)	65.4 (53)
Felony 3	55.6 (40)	44.4 (32)	41.5 (44)	58.5 (62)
Felony 4	50.0 (72)	50.0 (72)	66.4 (79)	33.6 (40)
Felony 5/M	42.5 (77)	57.5 (104)	61.0 (86)	39.0 (55)
Offense Category*				
Violent/person	61.2 (63)	38.8 (40)	38.7 (63)	61.3 (100)
Sex	50.0 (8)	50.0 (8)	50.0 (11)	50.0 (11)
Drugs	45.0 (72)	55.0 (88)	62.3 (71)	37.7 (43)
Property	40.8 (40)	59.2 (58)	41.0 (48)	59.0 (69)
Traffic/DUI	81.2 (13)	18.8 (3)	93.3 (14)	6.7 (1)
Other	50.9 (28)	49.1 (27)	64.9 (37)	35.1 (20)
Substance Abuse Problem*				
No	32.6 (14)	67.4 (29)	13.5 (12)	86.5 (77)
Yes	51.9 (210)	48.1 (195)	58.1 (232)	41.9 (167)
Employment Problem***				
No	37.2 (94)	62.8 (159)	48.3 (102)	51.7 (109)
Yes	66.7 (130)	33.3 (65)	51.3 (142)	48.7 (135)
Emotional Problem**				
No	48.6 (141)	51.4 (149)	54.9 (158)	45.1 (130)
Yes	52.5 (83)	47.5 (75)	43.0 (86)	57.0 (114)
Risk Categories				
Low	50.0 (36)	50.0 (36)	50.0 (29)	50.0 (29)
Moderate	50.0 (154)	50.0 (154)	50.0 (153)	50.0 (153)
High	50.0 (34)	50.0 (34)	50.0 (62)	50.0 (62)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	26.3 (224)	24.4 (224)	35.3 (216)	35.5 (215)
Females	4.5 (224)	4.1 (224)	21 (28)	19.5 (28)
Overall	30.8 (224)	28.5 (224)	33.7 (244)	33.5 (244)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the STARK CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
	% (N)	% (N)	% (N)	% (N)
Gender				
Male	78.6 (154)	85.7 (24)	87.4 (180)	94.7 (36)
Female	21.4 (42)	14.3 (4)	12.6 (26)	5.3 (2)
Race				
White	74.5 (146)	78.6 (22)	68.9 (142)	71.1 (27)
Non-white	25.5 (50)	21.4 (6)	31.1 (64)	28.9 (11)
Marital Status				
Married	12.3 (24)	3.7 (1)	10.2 (21)	5.3 (2)
Single/not married	87.7 (171)	96.3 (26)	89.8 (184)	94.7 (36)
Age Category				
16 to 23	28.6 (56)	39.3 (11)	30.6 (63)	44.7 (17)
24 to 30	21.4 (42)	35.7 (10)	19.4 (40)	26.3 (10)
31-39	24.5 (48)	17.9 (5)	26.2 (54)	18.4 (7)
40+	25.5 (50)	7.1 (2)	23.8 (49)	10.5 (4)
Mean Age	32.3	26.8	32.0	27.2
SD	10.9	8.0	10.8	8.6

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.8	1.2	1	1.3
SD	1.1	1.6	1.3	1.5
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	64.8 (127)	32.1 (9)	58.3 (120)	26.3 (10)
Yes	35.2 (69)	67.9 (19)	41.7 (86)	73.7 (28)
Offense Level				
Felony 1	3.6 (7)	3.6 (1)	2.9 (6)	2.6 (1)
Felony 2	11.7 (23)	14.3 (4)	11.7 (24)	10.5 (4)
Felony 3	17.9 (35)	17.9 (5)	18.0 (37)	18.4 (7)
Felony 4	32.1 (63)	32.1 (9)	32.0 (66)	34.2 (13)
Felony 5/M	34.7 (68)	32.1 (9)	35.4 (73)	34.2 (13)
Offense Category				
Violent/person	27.6 (54)	32.1 (9)	25.2 (52)	28.9 (11)
Sex	4.1 (8)	0.0 (0)	5.3 (11)	0.0 (0)
Drugs	34.2 (67)	17.9 (5)	30.6 (63)	21.1 (8)
Property	16.3 (32)	28.6 (8)	18.9 (39)	23.7 (9)
Traffic/DUI	6.1 (12)	3.6 (1)	6.3 (13)	2.6 (1)
Other	11.7 (23)	17.9 (5)	13.6 (28)	23.7 (9)
Substance Abuse Problem				
No	5.1 (10)	14.3 (4)	4.4 (9)	7.9 (3)
Yes	94.9 (186)	85.7 (24)	95.6 (197)	92.1 (35)
Employment Problem*				
No	46.4 (91)	10.7 (3)	48.1 (99)	7.9 (3)
Yes	53.6 (105)	89.3 (25)	51.9 (107)	92.1 (35)
Emotional Problem				
No	64.3 (126)	53.6 (15)	66.5 (137)	55.3 (21)
Yes	35.7 (70)	46.4 (13)	33.5 (69)	44.7 (17)
Risk Categories*				
Low	18.4 (36)	0.0 (0)	14.1 (29)	0.0 (0)
Moderate	69.4 (136)	64.3 (18)	65 (134)	50.0 (19)
High	12.2 (24)	35.7 (10)	20.9 (43)	50.0 (19)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	24.9 (196)	36.3 (28)	33.5 (180)	44.5 (36)
Females	4.6 (196)	3.4 (28)	20.6 (26)	26.2 (2)
Overall	29.5 (196)	40.0 (28)	31.9 (206)	43.5 (38)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for STARK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	25.9 (58)	13.9 (5)	24 (37)	47.1 (16)
Comparison	26.3 (59)	8.3 (3)	26 (40)	47.1 (16)
Successful Completers				
Treatment	22.4 (44)	13.9 (5)	22.1 (30)	37.5 (9)
Comparison	23.5 (46)	8.3 (3)	25.7 (35)	33.3 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for STARK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	32.6 (73)	19.4 (7)	31.8 (49)	50.0 (17)
Comparison	32.6 (73)	11.1 (4)	32.5 (50)	55.9 (19)
Successful Completers				
Treatment	29.1 (57)	19.4 (7)	29.4 (40)	41.7 (10)
Comparison	30.1 (59)	11.1 (4)	33.1 (45)	41.7 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for STARK--CBCF/ISP Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.4 (95)	22.2 (8)	40.3 (62)	73.5 (25)
Comparison	34.8 (78)	19.4 (7)	32.5 (50)	61.8 (21)
Successful Completers				
Treatment	36.2 (71)	22.2 (8)	35.3 (48)	62.5 (15)
Comparison	34.2 (67)	19.4 (7)	33.8 (46)	58.3 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for STARK--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.9 (73)	17.2 (5)	26.8 (41)	43.5 (27)
Comparison	32.0 (78)	3.4 (1)	32.7 (50)	43.5 (27)
Successful Completers				
Treatment	27.2 (56)	17.2 (5)	24.6 (33)	41.9 (18)
Comparison	32.5 (67)	3.4 (1)	34.3 (46)	46.5 (20)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for STARK--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.9 (90)	24.1 (7)	34.0 (52)	50.0 (31)
Comparison	45.9 (112)	10.3 (3)	46.4 (71)	61.3 (38)
Successful Completers				
Treatment	34.5 (71)	24.1 (7)	32.1 (43)	48.8 (21)
Comparison	45.6 (94)	10.3 (3)	46.3 (62)	67.4 (29)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for STARK--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	50.0 (122)	20.7 (6)	46.4 (71)	72.6 (45)
Comparison	33.6 (82)	3.4 (1)	35.9 (55)	41.9 (26)
Successful Completers				
Treatment	43.2 (89)	20.7 (6)	41.8 (56)	62.8 (27)
Comparison	33.5 (69)	3.4 (1)	38.1 (51)	39.5 (17)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Talbert House Community Corrections Center

Talbert House Community Corrections Center (CCC) is a Community Based Correction Facility located in Lebanon, Ohio. This facility serves adult male probationers. Talbert House CCC has been in operation since 1995 and is contracted to serve 110 men. This facility is primarily funded by the Ohio Department of Rehabilitation and Corrections. The internal services provided by the program include sex offender treatment, substance abuse treatment, employment readiness, domestic violence, skill building, education, mental health, life-skills, anger management, financial planning and cognitive restructuring. Talbert House Community Corrections Center was visited by a University of Cincinnati research team on November 7, 2006. At the time of the visit, there were 110 male offenders. Mike Simpson was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- While the program receives some non-peer reviewed literature and staff can attend local or national conferences, the program should regularly consult a wider range of peer reviewed literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is stable, some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours on ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and additional clinical skills training.
- Staff turnover is a significant issue and was described as disruptive to programming and facility safety. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment in addition to the Static 99 and Stable 2000 to assess static and dynamic risk factors related to sexual offending.
- The program also uses the SARA to assess needs related to domestic violence treatment and the How I Think tool to assess criminal attitude.
- In addition to a Diagnostic Assessment Form, the program uses the following responsivity tools: the CASAS educational and developmental assessment and the Jesness personality assessment developed for the offender population.
- The program conducts reassessment using the HIT, CASAS, Stable-2000 and LSI-R.
- Offender risk levels are formally tracked and the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program might consider adopting additional standardized responsivity assessments to assess such areas as mental health, motivation, and learning styles.

Treatment

Strengths:

- The large majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, sexual deviance, anger management, and employment).
- Much of the treatment is based upon the cognitive-behavioral model as well as motivational enhancement.
- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, high risk offenders are separated from lower risk individuals in the program via separate living quarters and treatment groups.
- Staff are matched to groups based on experience and skill level.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting, suggestion box and resident spokesperson.
- The types of rewards and punishers used by the program appear appropriate as is the procedure for reinforcing behavior.
- Program completion is determined by the objective measure of the acquisition of prosocial skills.
- The program teaches offenders to monitor and anticipate high risk situations via processing, developing a relapse prevention plan, group activities and homework assignments.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While structured skill building opportunities, including use of modeling and role play, appear to be used across nearly all groups, the frequency of use should be increased with the goal of using practice activities 40-50% of the time. Use of graduated rehearsal to teach residents skills in increasingly difficult situations should also be increased. Some programs meet this by offering an advanced practice group.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While structured curricula or manuals have been acquired or developed for most groups, they should be used for all groups and followed more consistently.
- Although there is some monitoring of offenders while on pass (e.g. schedules/logs and drug testing), the monitoring mechanisms should be enhanced.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education, and employment should be increased.
- Although offenders are matched to interventions based upon risk and need, responsivity factors should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved by ensuring that the punishers are based upon the demonstration of an antisocial behavior, they are individualized, match the infractions and escape from punishers is disallowed. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 86%. This rate should fall between 65 and 85%.
- While the program offers a program orientation to family members as well as family activities, the program should provide training to family members who might assist in providing prosocial support for the offenders.
- The program should provide more structured aftercare opportunities for residents that include continued practice of the skills learned while in residential care.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, recidivism tracking, conducting re-assessments, supervision of the assessment process, staff feedback, supervision of training protocol for training curriculum and observation of treatment services.
- Contractual providers are also observed delivering treatment.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation.

Descriptive Statistics for both the TALBERT HOUSE CCC CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (208)	50.0 (208)	50.0 (267)	50.0 (267)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (174)	50.0 (174)	50.0 (222)	50.0 (222)
Non-white	50.0 (34)	50.0 (34)	50.0 (45)	50.0 (45)
Marital Status***				
Married	66.2 (43)	33.8 (22)	58.8 (50)	41.2 (35)
Single/not married	47.0 (165)	53.0 (186)	50.6 (217)	49.4 (212)
Age Category				
16 to 23	56.3 (58)	43.7 (45)	44.8 (77)	55.2 (95)
24 to 30	42.5 (48)	57.5 (65)	48.9 (65)	51.1 (68)
31-39	46.0 (46)	54.0 (54)	50.8 (64)	49.2 (62)
40+	56.0 (56)	44.0 (44)	59.2 (61)	40.8 (42)
Mean Age	32.1	32.1	31.4	32.6
SD	10.3	10.1	9.8	9.5

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for TALBERT HOUSE CCC Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.6	0.9	0.6	1.2
SD	1.1	1.9	1.2	1.6
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	61.7 (145)	38.3 (90)	78.0 (191)	22.0 (54)
Yes	34.8 (63)	65.2 (118)	26.3 (76)	73.7 (213)
Offense Level*				
Felony 1	20.0 (1)	80.0 (4)	3.7 (1)	96.3 (26)
Felony 2	30.4 (7)	69.6 (16)	16.4 (9)	83.6 (46)
Felony 3	58.1 (43)	41.9 (31)	39.3 (53)	60.7 (82)
Felony 4	57.1 (76)	42.9 (57)	65.5 (93)	34.5 (49)
Felony 5/M	44.8 (81)	55.2 (100)	63.4 (111)	36.6 (64)
Offense Category*				
Violent/person	22.2 (12)	77.8 (42)	12.5 (12)	87.5 (84)
Sex	50.0 (18)	50.0 (18)	50.0 (28)	50.0 (28)
Drugs	62.2 (92)	37.8 (56)	73.3 (99)	26.7 (36)
Property	35.5 (33)	64.5 (60)	46.2 (72)	53.8 (84)
Traffic/DUI	76.2 (16)	23.8 (5)	88.9 (16)	11.1 (2)
Other	57.8 (37)	42.2 (27)	54.8 (40)	45.2 (33)
Substance Abuse Problem**				
No	38.5 (15)	61.5 (24)	17.9 (17)	82.1 (78)
Yes	51.2 (193)	48.8 (184)	56.9 (250)	43.1 (189)
Employment Problem*				
No	0.6 (1)	99.4 (155)	1.1 (1)	98.9 (90)
Yes	79.6 (207)	20.4 (53)	60.0 (266)	40.0 (177)
Emotional Problem***				
No	45.4 (128)	54.6 (154)	52.9 (164)	47.1 (146)
Yes	59.7 (80)	40.3 (54)	46.0 (103)	54.0 (121)
Risk Categories				
Low	50.0 (1)	50.0 (1)	50.0 (1)	50.0 (1)
Moderate	50.0 (166)	50.0 (166)	50.0 (178)	50.0 (178)
High	50.0 (41)	50.0 (41)	50.0 (88)	50.0 (88)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	36.6 (208)	32.2 (208)	38.3 (267)	38.5 (267)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the TALBERT HOUSE CCC CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (187)	100.0 (21)	100.0 (241)	100.0 (26)
Female	N/A	N/A	N/A	N/A
Race				
White	84.5 (158)	76.2 (16)	84.2 (203)	73.1 (19)
Non-white	15.5 (29)	23.8 (5)	15.8 (38)	26.9 (7)
Marital Status				
Married	20.9 (39)	19.0 (4)	19.1 (46)	15.4 (4)
Single/not married	79.1 (148)	81.0 (17)	80.9 (195)	84.6 (22)
Age Category				
16 to 23	26.2 (49)	42.9 (9)	27.4 (66)	42.3 (11)
24 to 30	22.5 (42)	28.6 (6)	24.1 (58)	26.9 (7)
31-39	21.9 (41)	23.8 (5)	23.7 (57)	26.9 (7)
40+	29.4 (55)	4.8 (1)	24.9 (60)	3.8 (1)
Mean Age	32.7	26.9	31.9	27.0
SD	10.4	6.7	9.9	6.6

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE CCC by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.6	0.7	0.6	0.8
SD	1.1	1.2	1.2	1.2
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	69.0 (129)	76.2 (16)	71.4 (172)	73.1 (19)
Yes	31.0 (58)	23.8 (5)	28.6 (69)	26.9 (7)
Offense Level				
Felony 1	0.5 (1)	0.0 (0)	0.4 (1)	0.0 (0)
Felony 2	3.2 (6)	4.8 (1)	3.3 (8)	3.8 (1)
Felony 3	19.8 (37)	28.6 (6)	19.5 (47)	23.1 (6)
Felony 4	37.4 (70)	28.6 (6)	34.9 (84)	34.6 (9)
Felony 5/M	39 (73)	38.1 (8)	41.9 (101)	38.5 (10)
Offense Category				
Violent/person	6.4 (12)	0.0 (0)	5.0 (12)	0.0 (0)
Sex	9.1 (17)	4.8 (1)	10.8 (26)	7.7 (2)
Drugs	44.9 (84)	38.1 (8)	36.9 (89)	38.5 (10)
Property	13.9 (26)	33.3 (7)	26.1 (63)	34.6 (9)
Traffic/DUI	7.5 (14)	9.5 (2)	5.8 (14)	7.7 (2)
Other	18.2 (34)	14.3 (3)	15.4 (37)	11.5 (3)
Substance Abuse Problem				
No	7.0 (13)	9.5 (2)	6.2 (15)	7.7 (2)
Yes	93 (174)	90.5 (19)	93.8 (226)	92.3 (24)
Employment Problem				
No	0.5 (1)	0.0 (0)	0.4 (1)	0.0 (0)
Yes	99.5 (186)	100.0 (21)	99.6 (240)	100.0 (26)
Emotional Problem				
No	63.1 (118)	47.6 (10)	62.7 (151)	50.0 (13)
Yes	36.9 (69)	52.4 (11)	37.3 (90)	50.0 (13)
Risk Categories				
Low	0.5 (1)	0.0 (0)	0.4 (1)	0.0 (0)
Moderate	81.8 (153)	61.9 (13)	67.6 (163)	57.7 (15)
High	17.6 (33)	38.1 (8)	32.0 (77)	42.3 (11)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	36.2 (187)	39.5 (21)	38.1 (241)	40.9 (26)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for TALBERT House CCC--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	26.9 (56)	0.0 (0)	26.4 (44)	29.3 (12)
Comparison	28.4 (59)	0.0 (0)	24.1 (40)	46.3 (19)
Successful Completers				
Treatment	25.7 (48)	0.0 (0)	25.5 (39)	27.3 (9)
Comparison	27.8 (52)	0.0 (0)	24.8 (38)	42.4 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for TALBERT House CCC--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.6 (72)	0.0 (0)	34.3 (57)	36.6 (15)
Comparison	36.5 (76)	0.0 (0)	33.7 (56)	48.8 (20)
Successful Completers				
Treatment	33.2 (62)	0.0 (0)	33.3 (51)	33.3 (11)
Comparison	35.3 (66)	0.0 (0)	34.0 (52)	42.4 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for TALBERT House CCC--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)**	%(N)
All Participants				
Treatment	40.9 (85)	0.0 (0)	39.8 (66)	46.3 (19)
Comparison	33.7 (70)	0.0 (0)	30.1 (50)	48.8 (20)
Successful Completers				
Treatment	39.0 (73)	0.0 (0)	37.9 (58)	45.5 (15)
Comparison	33.7 (63)	0.0 (0)	32.0 (49)	42.4 (14)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for TALBERT HOUSE CCC--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.5 (84)	0.0 (0)	27.0 (48)	40.9 (36)
Comparison	30.7 (82)	0.0 (0)	23.6 (42)	45.5 (40)
Successful Completers				
Treatment	29.5 (71)	0.0 (0)	25.2 (41)	39.0 (30)
Comparison	30.3 (73)	0.0 (0)	23.9 (39)	44.2 (34)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for TALBERT HOUSE CCC--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.3 (105)	0.0 (0)	34.8 (62)	48.9 (43)
Comparison	40.8 (109)	0.0 (0)	32.0 (57)	59.1 (52)
Successful Completers				
Treatment	37.3 (90)	0.0 (0)	33.1 (54)	46.8 (36)
Comparison	40.2 (97)	0.0 (0)	31.3 (51)	59.7 (46)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for TALBERT HOUSE CCC--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.8 (109)	0.0 (0)	38.2 (68)	46.6 (41)
Comparison	35.2 (94)	0.0 (0)	30.3 (54)	45.5 (40)
Successful Completers				
Treatment	38.6 (93)	0.0 (0)	36.2 (59)	44.2 (34)
Comparison	34.9 (84)	0.0 (0)	30.7 (50)	44.2 (34)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

West Central Community Correctional Facility

West Central Community Correctional Facility is a Community Based Corrections Facility located in Marysville, Ohio. This facility serves adult males who are on probation, judicial release or diversion from the Ohio Department of Rehabilitation and Correction (ODRC). West Central Community Correctional Facility has been in operation since 1999 and is contracted to serve 90 men. This facility is primarily funded by ODRC. The internal services provided by the program are substance abuse treatment, employment readiness, domestic violence, education, life-skills, anger management, financial planning, and parenting. West Central Community Correctional Facility was visited by a University of Cincinnati research team on October 23, 2006. At the time of the visit, there were 77 male offenders. Carole Harvey was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the originator of the current program and is involved in selecting, training and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program should regularly consult a wide range of peer-reviewed literature related to effective interventions with offenders.
- Funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training related to service delivery.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI, MAST and CAST to further assess substance abuse need.
- In addition to a biopsychosocial, the program uses the following responsivity tools: the TABE educational assessment, the Work Styles as a personality tool, and the Kressel/Trumpet and CCMR to assess motivation.
- The program conducts reassessment using the LSI-R and Kressel/Trumpet.
- Offender risk levels are formally tracked and the program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should identify a fuller spectrum of exclusionary criteria.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger management, relapse prevention and employment).
- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Staff are matched to groups based on experience, motivation to provide a particular service, and skill level.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting and resident spokesperson.
- The types of rewards used by the program appear appropriate.
- Program completion is in part determined by the acquisition of prosocial skills.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, processing, and developing a relapse prevention plan.
- The program completion rate is 80%, which falls within the recommended range of 65 to 85%.
- Appropriate discharge planning has been implemented.
- The program provides aftercare to residents. Approximately 80% of the offenders participate in such services.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature (i.e., substance abuse), many are non-criminogenic such as parenting, budgeting, abuse survivor, codependency, STD/HIV and pharmacology. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While there are elements of cognitive-behavioral treatment in the program, the primary treatment model is a Therapeutic Community.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Structured curricula or manuals should be used for all groups and all groups should be staff led.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, drug testing, site checks, and verification slips), the monitoring mechanisms should be enhanced.
- Treatment should be structured to vary by risk so that higher risk offenders receive a higher dosage of treatment and attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.

- The frequency of rewards used to reinforce offender behavior needs to be increased. Rewards should outweigh punishers by a ratio of at least 4:1.
- Some of the types of punishers used by the program are not appropriate, such as shaming techniques, physical intervention and isolation.
- The process by which offenders are punished could be improved by improving staff consistency, ensuring that the punishers match the infractions, disallowing escape from punishers and individualizing punishments.
- While the program attempts to provide a family intervention component, only about 40% of the families participate.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment services, conducting offender re-assessments, staff feedback, supervision of training protocol for treatment curriculum, supervision of program and staff certification updates, recidivism tracking and monitoring the aftercare program.
- The program provides some monitoring of contractual providers consisting of direct observation of treatment delivery.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- The program should increase the frequency of observation of internal treatment as well as provide increased monitoring of external providers consisting also of direct observation of treatment delivery.

Descriptive Statistics for both the WEST CENTRAL CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (178)	50.0 (178)	50.0 (174)	50.0 (174)
Female	N/A	N/A	N/A	N/A
Race				
White	50.0 (149)	50.0 (149)	50.0 (141)	50.0 (141)
Non-white	50.0 (29)	50.0 (29)	50.0 (33)	50.0 (33)
Marital Status				
Married	58.5 (24)	41.5 (17)	39.6 (19)	60.4 (29)
Single/not married	48.9 (154)	51.1 (161)	52.7 (155)	47.3 (139)
Age Category				
16 to 23	49.6 (56)	50.4 (57)	45.1 (51)	54.9 (62)
24 to 30	45.2 (47)	54.8 (57)	49.5 (48)	50.5 (49)
31-39	58.8 (47)	41.2 (33)	53.4 (47)	46.6 (41)
40+	47.5 (28)	52.5 (31)	56.0 (28)	44.0 (22)
Mean Age	29.5	30.1	29.9	31.5
SD	8.4	10.3	8.6	8.8

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for WEST CENTRAL Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.7	0.7	0.9	1.3
SD	1.3	1.4	1.4	1.7
Previous Conviction*	% (N)	% (N)	% (N)	% (N)
No	44.3 (86)	55.7 (108)	56.7 (80)	43.3 (61)
Yes	56.8 (92)	43.2 (70)	45.4 (94)	54.6 (113)
Offense Level**				
Felony 1	33.3 (2)	66.7 (4)	6.3 (1)	93.8 (15)
Felony 2	60.0 (6)	40.0 (4)	11.6 (5)	88.4 (38)
Felony 3	46.6 (27)	53.4 (31)	35.9 (23)	64.1 (41)
Felony 4	50.5 (55)	49.5 (54)	60.0 (54)	40.0 (36)
Felony 5/M	50.9 (88)	49.1 (85)	67.4 (91)	32.6 (44)
Offense Category**				
Violent/person	56.9 (37)	43.1 (28)	36 (32)	64 (57)
Sex	50.0 (4)	50.0 (4)	50.0 (4)	50.0 (4)
Drugs	43.2 (48)	56.8 (63)	62.7 (42)	37.3 (25)
Property	46.1 (53)	53.9 (62)	47.1 (66)	52.9 (74)
Traffic/DUI	50.0 (8)	50.0 (8)	90.0 (9)	10.0 (1)
Other	68.3 (28)	31.7 (13)	61.8 (21)	38.2 (13)
Substance Abuse Problem*				
No	22.7 (5)	77.3 (17)	6.7 (3)	93.3 (42)
Yes	51.8 (173)	48.2 (161)	56.4 (171)	43.6 (132)
Employment Problem***				
No	40.7 (87)	59.3 (127)	46.7 (71)	53.3 (81)
Yes	64.1 (91)	35.9 (51)	52.6 (103)	47.4 (93)
Emotional Problem				
No	47.7 (114)	52.3 (125)	51.9 (110)	48.1 (102)
Yes	54.7 (64)	45.3 (53)	47.1 (64)	52.9 (72)
Risk Categories				
Low	50.0 (5)	50.0 (5)	50.0 (5)	50.0 (5)
Moderate	50.0 (141)	50.0 (141)	50.0 (110)	50.0 (110)
High	50.0 (32)	50.0 (32)	50.0 (59)	50.0 (59)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	35.9 (178)	32.6 (178)	38.6 (174)	37.5 (174)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the WEST CENTRAL CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	100.0 (141)	100.0 (37)	100.0 (131)	100.0 (43)
Female	N/A	N/A	N/A	N/A
Race**				
White	81.6 (115)	91.9 (34)	77.1 (101)	93 (40)
Non-white	18.4 (26)	8.1 (3)	22.9 (30)	7.0 (3)
Marital Status				
Married	12.1 (17)	18.9 (7)	9.9 (13)	14.0 (6)
Single/not married	87.9 (124)	81.1 (30)	90.1 (118)	86.0 (37)
Age Category				
16 to 23	29.1 (41)	40.5 (15)	27.5 (36)	34.9 (15)
24 to 30	30.5 (43)	10.8 (4)	29.8 (39)	20.9 (9)
31-39	26.2 (37)	27.0 (10)	28.2 (37)	23.3 (10)
40+	14.2 (20)	21.6 (8)	14.5 (19)	20.9 (9)
Mean Age	29.3	30.3	29.8	30.1
SD	8.0	10.0	8.4	9.4

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for WEST CENTRAL by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.7	0.8	0.9	0.9
SD	1.3	1.2	1.4	1.2
Previous Conviction	% (N)	% (N)	% (N)	% (N)
No	48.9 (69)	45.9 (17)	45.8 (60)	46.5 (20)
Yes	51.1 (72)	54.1 (20)	54.2 (71)	53.5 (23)
Offense Level				
Felony 1	0.7 (1)	2.7 (1)	0.0 (0)	2.3 (1)
Felony 2	3.5 (5)	2.7 (1)	3.8 (5)	0.0 (0)
Felony 3	14.9 (21)	16.2 (6)	13.7 (18)	11.6 (5)
Felony 4	31.9 (45)	27 (10)	33.6 (44)	23.3 (10)
Felony 5/M	48.9 (69)	51.4 (19)	48.9 (64)	62.8 (27)
Offense Category				
Violent/person	20.6 (29)	21.6 (8)	19.1 (25)	16.3 (7)
Sex	2.1 (3)	2.7 (1)	2.3 (3)	2.3 (1)
Drugs	28.4 (40)	21.6 (8)	26.7 (35)	16.3 (7)
Property	29.8 (42)	29.7 (11)	35.1 (46)	46.5 (20)
Traffic/DUI	5.0 (7)	2.7 (1)	5.3 (7)	4.7 (2)
Other	14.2 (20)	21.6 (8)	11.5 (15)	14.0 (6)
Substance Abuse Problem				
No	2.1 (3)	5.4 (2)	1.5 (2)	2.3 (1)
Yes	97.9 (138)	94.6 (35)	98.5 (129)	97.7 (42)
Employment Problem*				
No	61.7 (87)	0.0 (0)	54.2 (71)	0.0 (0)
Yes	38.3 (54)	100.0 (37)	45.8 (60)	100.0 (43)
Emotional Problem**				
No	67.4 (95)	51.4 (19)	68.7 (90)	46.5 (20)
Yes	32.6 (46)	48.6 (18)	31.3 (41)	53.5 (23)
Risk Categories*				
Low	3.5 (5)	0.0 (0)	3.8 (5)	0.0 (0)
Moderate	83 (117)	64.9 (24)	69.5 (91)	44.2 (19)
High	13.5 (19)	35.1 (13)	26.7 (35)	55.8 (24)
Average Risk Scores	Mean (N)	Mean (N)	Mean (N)	Mean (N)
Males	34.4 (141)	41.3 (37)	36.9 (131)	43.7 (43)
Females	N/A	N/A	N/A	N/A
Overall	N/A	N/A	N/A	N/A

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for WEST CENTRAL CCF--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)*	Low %(N)	Moderate %(N)**	High %(N)
All Participants				
Treatment	38.2 (68)	20.0 (1)	36.9 (52)	46.9 (15)
Comparison	27.0 (48)	0.0 (0)	24.8 (35)	40.6 (13)
Successful Completers				
Treatment	36.9 (52)	20.0 (1)	34.2 (40)	57.9 (11)
Comparison	27.0 (38)	0.0 (0)	26.5 (31)	36.8 (7)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for WEST CENTRAL CCF--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)**	Low %(N)	Moderate %(N)**	High %(N)
All Participants				
Treatment	41.0 (73)	20.0 (1)	39.0 (55)	53.1 (17)
Comparison	31.5 (56)	0.0 (0)	28.4 (40)	50.0 (16)
Successful Completers				
Treatment	39.0 (55)	20.0 (1)	35.9 (42)	63.2 (12)
Comparison	32.6 (46)	0.0 (0)	30.8 (36)	52.6 (10)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for WEST CENTRAL CCF--CBCF/ISP Sample

| | Risk Levels | | | |
	All %(N)*	Low %(N)	Moderate %(N)*	High %(N)
All Participants				
Treatment	55.6 (99)	40.0 (2)	52.5 (74)	71.9 (23)
Comparison	36.0 (64)	0.0 (0)	31.9 (45)	59.4 (19)
Successful Completers				
Treatment	49.6 (70)	40.0 (2)	47.0 (55)	68.4 (13)
Comparison	33.3 (47)	0.0 (0)	29.9 (35)	63.2 (12)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for WEST CENTRAL--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.5 (67)	20.0 (1)	38.2 (42)	40.7 (24)
Comparison	27.0 (47)	0.0 (0)	19.1 (21)	44.1 (26)
Successful Completers				
Treatment	35.9 (47)	20.0 (1)	34.1 (31)	42.9 (15)
Comparison	25.2 (33)	0.0 (0)	17.6 (16)	48.6 (17)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for WEST CENTRAL--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.0 (73)	20.0 (1)	40.0 (44)	47.5 (28)
Comparison	38.5 (67)	0.0 (0)	30.0 (33)	57.6 (34)
Successful Completers				
Treatment	38.9 (51)	20.0 (1)	36.3 (33)	48.6 (17)
Comparison	36.6 (48)	0.0 (0)	28.6 (26)	62.9 (22)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for WEST CENTRAL--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	57.5 (100)	40.0 (2)	52.7 (58)	67.8 (40)
Comparison	32.8 (57)	0.0 (0)	30.0 (33)	40.7 (24)
Successful Completers				
Treatment	49.6 (65)	40.0 (2)	47.3 (43)	57.1 (20)
Comparison	32.8 (43)	0.0 (0)	29.7 (27)	45.7 (16)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Worth Center

Worth Center is a Community Based Corrections Facility located in Lima, Ohio. This facility serves adult males and females placed on probation and judicial release from the Ohio Department of Rehabilitation and Correction (ODRC). Worth Center has been in operation since 1993 and is contracted to serve 70 men and 24 women. This facility is funded by ODRC, Title 1 and Able funds. Services include substance abuse treatment, domestic violence, skill building, education, cognitive restructuring, life-skills, anger management, MRT, motivation and employment readiness. Worth Center was visited by a University of Cincinnati research team on September 8, 2006. At the time of the visit, the program was at full capacity. Sandy Monfort was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services with offenders via group treatment.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding is relatively stable, allowing the program to operate as designed.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- The program has accessed external consultants to advise on services.
- While the program is coed, males and females are kept in separate treatment groups.

Recommendations for Improvement:

- While the program receives literature exposure via local or national conferences, non-peer reviewed journals, and reviews facilitator guides before adopting curricula, the program should regularly consult a wider range of peer reviewed literature related to effective interventions with offenders.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI and Drug Use Screening Inventory (DUSI-R) to further assess substance abuse need and the Career Exploratory Inventory as a vocational tool.
- In addition to a biopsychosocial, the program uses the following responsivity tools: the TABE educational assessment, the Symptom Checklist (SCL-90), and the DUSI-R psychiatric domain.
- The program conducts reassessment using the LSI-R.
- Offender risk levels are formally tracked and the program targets primarily moderate to high risk males and high risk females.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, domestic violence, and employment).
- The treatment program is based upon a cognitive-behavioral model.
- All groups use a curriculum to structure treatment and only one group exceeds the maximum recommended facilitator to offender ratio of 1/10.
- In addition to cognitive behavioral curricula, the program offers a prosocial skills group wherein graduated rehearsal is used to teach residents skills in increasingly difficult situations.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls out and electronic monitoring.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment as they have a longer length of stay in treatment and attend additional treatment groups.
- Staff are matched to groups based on experience, motivation to provide a particular service, and skill level.
- There are mechanisms that provide offenders with the opportunity for input into the structure of the program, e.g., a suggestion box and a community meeting.
- The types of rewards and punishers used by the program appear appropriate as is the procedure by which offenders are reinforced.
- The program completion rate is 74%, which falls within the recommended range of 65 to 85%.
- Program completion is determined in part by the acquisition of prosocial skills.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building, including the use of modeling and role play should be used consistently across groups.
- Attempts should be made to separate higher risk offenders from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.

- The process by which offenders are punished could be improved by ensuring that the punishers are individualized, undesirable by the offenders, disallowing escape from punishers, and immediately applying the punisher following the infraction.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- While the program attempts to provide a family intervention component, only about 1% of the families participate in group intervention and there is no structured curriculum designed to teach families skills.
- While offenders may return to the facility to complete programming, formal aftercare services are not provided by the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, conducting offender re-assessments, supervision of assessments, supervision of training protocol for treatment curriculum, and supervision of program and staff certification updates.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- The program should provide increased monitoring of contractual and external providers, including observation of treatment delivery.

Descriptive Statistics for both the WORTH CBCF/ISP and CBCF/Parole Groups by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group % (N)	Comparison Group % (N)	Treatment Group % (N)	Comparison Group % (N)
Gender				
Male	50.0 (129)	50.0 (129)	50.0 (120)	50.0 (120)
Female	50.0 (42)	50.0 (42)	50.0 (63)	50.0 (63)
Race				
White	50.0 (140)	50.0 (140)	50.0 (144)	50.0 (144)
Non-white	50.0 (31)	50.0 (31)	50.0 (39)	50.0 (39)
Marital Status*				
Married	36.0 (18)	64.0 (32)	39.6 (21)	60.4 (32)
Single/not married	52.4 (153)	47.6 (139)	55.7 (162)	44.3 (129)
Age Category				
16 to 23	54.9 (62)	45.1 (51)	50.4 (63)	49.6 (62)
24 to 30	45.8 (54)	54.2 (64)	47.8 (55)	52.2 (60)
31-39	50.0 (28)	50.0 (28)	50.7 (36)	49.3 (35)
40+	49.1 (27)	50.9 (28)	52.7 (29)	47.3 (26)
Mean Age	28.9	29.6	29.4	31.6
SD	8.8	9.6	8.9	9.2

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for WORTH Risk/Need Factors by Group Membership

Variable	CBCF/ISP		CBCF/Parole	
	Treatment Group	Comparison Group	Treatment Group	Comparison Group
Prior Incarcerations				
Mean (N)	0.5	0.4	0.5	0.8
SD	1.3	0.9	1.1	1.3
Previous Conviction*	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	44.1 (86)	55.9 (109)	62.4 (98)	37.6 (59)
Yes	57.8 (85)	42.2 (62)	40.7 (85)	59.3 (124)
Offense Level**				
Felony 1	50.0 (1)	50.0 (1)	6.7 (1)	93.3 (14)
Felony 2	78.6 (11)	21.4 (3)	29.0 (9)	71.0 (22)
Felony 3	52.0 (26)	48.0 (24)	34.2 (27)	65.8 (52)
Felony 4	50.9 (57)	49.1 (55)	64.8 (57)	35.2 (31)
Felony 5/M	46.3 (76)	53.7 (88)	58.2 (89)	41.8 (64)
Offense Category*				
Violent/person	68.8 (53)	31.2 (24)	49.4 (42)	50.6 (43)
Sex	50.0 (1)	50.0 (1)	50.0 (1)	50.0 (1)
Drugs	39.7 (52)	60.3 (79)	70.7 (53)	29.3 (22)
Property	45.5 (40)	54.5 (48)	43.2 (64)	56.8 (84)
Traffic/DUI	61.1 (11)	38.9 (7)	100.0 (10)	0.0 (0)
Other	53.8 (14)	46.2 (12)	28.3 (13)	71.7 (33)
Substance Abuse Problem*				
No	0.0 (0)	100.0 (20)	0.0 (0)	100.0 (41)
Yes	53.1 (171)	46.9 (151)	56.3 (183)	43.7 (142)
Employment Problem*				
No	31.0 (61)	69.0 (136)	40.7 (55)	59.3 (80)
Yes	75.9 (110)	24.1 (35)	55.4 (128)	44.6 (103)
Emotional Problem**				
No	50.0 (108)	50.0 (108)	54.3 (107)	45.7 (90)
Yes	50.0 (63)	50.0 (63)	45.0 (76)	55.0 (93)
Risk Categories				
Low	50.0 (11)	50.0 (11)	50.0 (14)	50.0 (14)
Moderate	50.0 (146)	50.0 (146)	50.0 (133)	50.0 (133)
High	50.0 (14)	50.0 (14)	50.0 (36)	50.0 (36)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	26.7 (171)	23.3 (171)	38.4 (120)	37.4 (120)
Females	5.7 (171)	5.0 (171)	23.3 (63)	23.7 (63)
Overall	32.4 (171)	28.2 (171)	33.2 (183)	32.7 (183)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for both the WORTH CBCF/ISP and CBCF/Parole Groups by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful % (N)	Unsuccessful % (N)	Successful % (N)	Unsuccessful % (N)
Gender				
Male	73.3 (96)	82.5 (33)	62.4 (83)	74.0 (37)
Female	26.7 (35)	17.5 (7)	37.6 (50)	26.0 (13)
Race				
White	81.7 (107)	82.5 (33)	78.2 (104)	80.0 (40)
Non-white	18.3 (24)	17.5 (7)	21.8 (29)	20.0 (10)
Marital Status				
Married	11.5 (15)	7.5 (3)	13.5 (18)	6.0 (3)
Single/not married	88.5 (116)	92.5 (37)	86.5 (115)	94.0 (47)
Age Category*				
16 to 23	30.5 (40)	55.0 (22)	24.8 (33)	60.0 (30)
24 to 30	35.9 (47)	17.5 (7)	35.3 (47)	16.0 (8)
31-39	16.8 (22)	15.0 (6)	24.1 (32)	8.0 (4)
40+	16.8 (22)	12.5 (5)	15.8 (21)	16.0 (8)
Mean Age	29.5	26.8	30.5	26.5
SD	8.4	9.9	8.1	10.1

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

Descriptive Statistics for Risk/Need Factors for WORTH by Termination Status

Variable	CBCF/ISP		CBCF/Parole	
	Successful	Unsuccessful	Successful	Unsuccessful
Prior Incarcerations				
Mean (N)	0.6	0.3	0.6	0.4
SD	1.5	0.5	1.3	0.6
Previous Conviction	**% (N)**	**% (N)**	**% (N)**	**% (N)**
No	48.9 (64)	55 (22)	55.6 (74)	48.0 (24)
Yes	51.1 (67)	45 (18)	44.4 (59)	52.0 (26)
Offense Level				
Felony 1	0.8 (1)	0.0 (0)	0.8 (1)	0.0 (0)
Felony 2	7.6 (10)	2.5 (1)	6.0 (8)	2.0 (1)
Felony 3	16.0 (21)	12.5 (5)	17.3 (23)	8.0 (4)
Felony 4	31.3 (41)	40.0 (16)	27.1 (36)	42.0 (21)
Felony 5/M	44.3 (58)	45.0 (18)	48.9 (65)	48.0 (24)
Offense Category				
Violent/person	32.8 (43)	25.0 (10)	24.8 (33)	18.0 (9)
Sex	0.0 (0)	2.5 (1)	0.0 (0)	2.0 (1)
Drugs	31.3 (41)	27.5 (11)	30.8 (41)	24.0 (12)
Property	24.4 (32)	20.0 (8)	33.8 (45)	38.0 (19)
Traffic/DUI	6.1 (8)	7.5 (3)	6.0 (8)	4.0 (2)
Other	5.3 (7)	17.5 (7)	4.5 (6)	14.0 (7)
Substance Abuse Problem				
No	N/A	N/A	N/A	N/A
Yes	100.0 (131)	100.0 (40)	100.0 (133)	100.0 (50)
Employment Problem*				
No	45.8 (60)	2.5 (1)	40.6 (54)	2.0 (1)
Yes	54.2 (71)	97.5 (39)	59.4 (79)	98.0 (49)
Emotional Problem				
No	65.6 (86)	55.0 (22)	59.4 (79)	56.0 (28)
Yes	34.4 (45)	45.0 (18)	40.6 (54)	44.0 (22)
Risk Categories*				
Low	6.1 (8)	7.5 (3)	7.5 (10)	8.0 (4)
Moderate	88.5 (116)	75.0 (30)	78.9 (105)	56.0 (28)
High	5.3 (7)	17.5 (7)	13.5 (18)	36.0 (18)
Average Risk Scores	**Mean (N)**	**Mean (N)**	**Mean (N)**	**Mean (N)**
Males	25.0 (131)	32.2 (40)	36.5 (83)	42.8 (37)
Females	6.2 (131)	4.0 (40)	23.2 (50)	24.0 (13)
Overall	31.2 (131)	36.2 (40)	31.5 (133)	38.0 (50)

* significant difference at the .05 level for both the ISP and parole comparison groups

**significant difference at the .05 level for the CBCF/Parole group, but not the CBCF/ISP group

***significant difference at the .05 level for the CBCF/ISP group, but not the CBCF/Parole group

RECIDIVISM OUTCOMES FOR CBCF/ISP SAMPLE

New Felony Conviction by Group Membership and Risk Level for WORTH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.2 (50)	9.1 (1)	28.1 (41)	57.1 (8)
Comparison	22.8 (39)	9.1 (1)	21.2 (31)	50.0 (7)
Successful Completers				
Treatment	22.9 (30)	12.5 (1)	23.3 (27)	28.6 (2)
Comparison	16.8 (22)	12.5 (1)	16.4 (19)	28.6 (2)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for WORTH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.5 (59)	9.1 (1)	33.6 (49)	64.3 (9)
Comparison	29.2 (50)	9.1 (1)	28.8 (42)	50.0 (7)
Successful Completers				
Treatment	28.2 (37)	12.5 (1)	29.3 (34)	28.6 (2)
Comparison	24.4 (32)	12.5 (1)	25.0 (29)	28.6 (2)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for WORTH--CBCF/ISP Sample

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)*	%(N)	%(N)*	%(N)
All Participants				
Treatment	46.2 (79)	18.2 (2)	45.9 (67)	71.4 (10)
Comparison	30.4 (52)	0.0 (0)	29.5 (43)	64.3 (9)
Successful Completers				
Treatment	41.2 (54)	25.0 (2)	41.4 (48)	57.1 (4)
Comparison	26.0 (34)	0.0 (0)	26.7 (31)	42.9 (3)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

RECIDIVISM OUTCOMES FOR CBCF/Parole SAMPLE

New Felony Conviction by Group Membership and Risk Level for WORTH--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.3 (50)	7.1 (1)	21.8 (29)	55.6 (20)
Comparison	23.0 (42)	0.0 (0)	21.1 (28)	38.9 (14)
Successful Completers				
Treatment	21.1 (28)	10.0 (1)	18.1 (19)	44.4 (8)
Comparison	22.6 (30)	0.0 (0)	21.9 (23)	38.9 (7)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

Any New Conviction by Group Membership and Risk Level for WORTH--CBCF/Parole Sample

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	32.8 (60)	7.1 (1)	27.8 (37)	61.1 (22)
Comparison	37.2 (68)	14.3 (2)	33.1 (44)	61.1 (22)
Successful Completers				
Treatment	26.3 (35)	10.0 (1)	24.8 (26)	44.4 (8)
Comparison	36.1 (48)	0.0 (0)	33.3 (35)	72.2 (13)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

New Incarceration by Group Membership and Risk Level for WORTH--CBCF/Parole Sample

	Risk Levels			
	All*	Low	Moderate*	High*
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.8 (82)	14.3 (2)	41.4 (55)	69.4 (25)
Comparison	23.5 (43)	7.1 (1)	21.1 (28)	38.9 (14)
Successful Completers				
Treatment	38.3 (46)	20.0 (2)	37.1 (39)	55.6 (10)
Comparison	24.1 (32)	0.0 (0)	22.9 (24)	44.4 (8)

*Difference significant at p<.05 for both all participants and successful completers only

**Difference significant at p<.05 for all participants only

***Difference significant at p<.05 for successful completers only

APPENDIX C

HALFWAY HOUSE

PROGRAM PROFILES

Alternatives Agency Inc.

Alternatives Agency is a Halfway House located in Cleveland, Ohio. This facility serves adult males and females who are county probationers, work release offenders, and offenders placed on parole/Post-Release Control or Transitional Control from the Ohio Department of Rehabilitation and Correction (ODRC). Alternatives Agency has been in operation since 1995 and is contracted to serve 140 men and 20 women. This facility is funded by ODRC and Cuyahoga County. The primary internal services provided by the program are education and cognitive restructuring. The agency refers out for substance abuse treatment, employment readiness, parenting and life-skills. Alternatives Agency was visited by a University of Cincinnati research team on August 23, 2006. At the time of the visit, there were 121 male offenders and 9 female offenders. Charles Farone was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and training staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should provide closer supervision to staff consisting of regular staff meetings or individual meetings.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.
- Males and females should be kept in separate treatment programs.

Staff Characteristics

Strengths:

- Staff receive an adequate number of hours on ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- Clinical staff meetings are not held regularly.
- Any staff that deliver treatment should receive clinical supervision by a licensed professional.

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Staff should receive additional initial training and more training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio CCA risk assessment to classify offenders.

Recommendations for Improvement:

- While the program uses the Ohio CCA adult assessment to measure risk factors for offenders, this assessment does not measure a range of criminogenic needs.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.
- The program should be targeting moderate to high risk offenders. Approximately half of the offenders in the program were low risk at the time of the assessment.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, self-management and employment).
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- The group offered by the program is an appropriate size at 1 facilitator to 8 offenders.
- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. electronic monitoring, schedules/logs, phone calls out and drug testing, and signed verification).
- The program provides the structure for offenders to give input into the operation of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Thinking for a Change is the only group treatment currently offered by the program. While this is an evidence based curriculum, there should be a wider range of criminogenic needs addressed in the program. Likewise, considering the size of the program, a limited number of offenders have the opportunity to participate in this group.

- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be significantly increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1. Currently, punishers are used liberally while reinforcers are used sparingly.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if they were individualized, matched the infraction, escape were impossible and if prosocial alternatives were taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 56%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members who might assist in providing prosocial support for the offenders.
- The program should provide aftercare services beyond continuation of external referrals.

Quality Assurance

Recommendations for Improvement:

- While the program conducts file reviews and offender exit surveys, the program could improve internal quality assurance by having a program manager observe the delivery of treatment and providing feedback to staff.
- The program should improve monitoring of external providers via sharing of progress notes and observation of treatment.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.
- The program has participated in a formal evaluation, but failed to perform better than the comparison group on some measures of recidivism.

Descriptive Statistics for ALTERNATIVES by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (23)	50.0 (23)
Female	50.0 (401)	50.0 (401)
Race		
White	50.0 (132)	50.0 (132)
Non-white	50.0 (292)	50.0 (292)
Marital Status		
Married	48.9 (45)	51.1 (47)
Single/not married	50.9 (379)	49.1 (365)
Age Category*		
16 to 23	56.8 (159)	43.2 (121)
24 to 30	47.1 (97)	52.9 (109)
31-39	50.5 (96)	49.5 (94)
40+	41.9 (72)	58.1 (100)
Mean Age*	31.9	33.6
SD	9.6	10.4

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALTERNATIVES by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.6	1.3
SD	9.6	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	66.2 (298)	33.8 (152)
Yes	31.7 (126)	68.3 (272)
Offense Level		
Felony 1	48.4 (59)	51.6 (63)
Felony 2	48.6 (87)	51.4 (92)
Felony 3	48.9 (88)	51.1 (92)
Felony 4	45.7 (63)	54.3 (75)
Felony 5/M	55.5 (127)	44.5 (102)
Offense Category*		
Violent/person	45.8 (142)	54.2 (168)
Sex	N/A	N/A
Drugs	60.8 (186)	39.2 (120)
Property	43.8 (63)	56.3 (81)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	37.2 (32)	62.8 (54)
Substance Abuse Problem*		
No	31.2 (53)	68.8 (117)
Yes	54.7 (371)	45.3 (307)
Employment Problem		
No	50.9 (222)	49.1 (214)
Yes	49.0 (202)	51.0 (210)
Emotional Problem*		
No	56.7 (344)	43.3 (263)
Yes	33.2 (80)	66.8 (161)
Risk Categories		
Low	50.0 (53)	50.0 (53)
Moderate	50.0 (285)	50.0 (285)
High	50.0 (86)	50.0 (86)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	30.7	30.8
Females	1.1	1.1
Overall	31.8	31.9

*Difference significant at p<.05

Descriptive Statistics for ALTERNATIVES by Termination Status

	HWH	
Variable	**Successful**	**Unsuccessful**
	% (N)	**% (N)**
Gender*		
Male	92.7 (228)	97.2 (173)
Female	7.3 (18)	2.8 (5)
Race		
White	32.9 (81)	28.7 (51)
Non-white	67.1 (165)	71.3 (127)
Marital Status	11.0 (27)	10.1 (18)
Married	89.0 (219)	89.9 (160)
Single/not married		
Age Category		
16 to 23	33.7 (83)	42.7 (76)
24 to 30	25.6 (63)	19.1 (34)
31-39	23.2 (57)	21.9 (39)
40+	17.5 (43)	16.3 (29)
Mean Age	32.4	31.3
SD	9.5	9.7

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALTERNATIVES by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.4	1.8
SD	1.4	1.6
Previous Conviction	% (N)	% (N)
No	71.1 (175)	69.1 (123)
Yes	28.9 (71)	30.9 (55)
Offense Level		
Felony 1	15.4 (38)	11.8 (21)
Felony 2	17.1 (42)	25.3 (45)
Felony 3	21.1 (52)	20.2 (36)
Felony 4	17.1 (42)	11.8 (21)
Felony 5/M	29.3 (72)	30.9 (55)
Offense Category		
Violent/person	33.3 (82)	33.7 (60)
Sex	N/A	N/A
Drugs	44.3 (109)	43.3 (77)
Property	15.0 (37)	14.6 (26)
Traffic/DUI	0.4 (1)	0.0 (0)
Other	6.9 (17)	8.4 (15)
Substance Abuse Problem		
No	14.2 (35)	10.1 (18)
Yes	85.8 (211)	89.9 (160)
Employment Problem*		
No	63.8 (157)	36.5 (65)
Yes	36.2 (89)	63.5 (113)
Emotional Problem		
No	82.1 (202)	79.8 (142)
Yes	17.9 (44)	20.2 (36)
Risk Categories		
Low	14.6 (36)	9.6 (17)
Moderate	72.0 (177)	60.7 (108)
High	13.4 (33)	29.8 (53)
Average risk scores	Mean (N)	Mean (N)
Males*	28.1	34.3
Females	1.5	0.7
Overall*	29.5	35.0

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alternatives Agency Inc

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.2 (145)	22.6 (12)	31.9 (91)	48.8 (42)
Comparison	35 (148)	13.2 (7)	37.7 (107)	39.5 (34)
Successful Completers				
Treatment	23.6 (58) *	22.2 (8)	22.0 (39) *	33.3 (11)
Comparison	31.0 (76)	8.3 (3)	33.5 (59)	42.4 (14)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alternatives Agency Inc

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.0 (161)	24.5 (13)	35.8 (102)	53.5 (46)
Comparison	40.6 (172)	15.1 (8)	42.5 (121)	50.0 (43)
Successful Completers				
Treatment	26.8 (66)*	22.2 (8)	26.0 (46)*	36.4 (12)
Comparison	36.2 (89)	8.3 (3)	38.4 (68)	54.5 (18)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alternatives Agency Inc

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.6 (172)*	26.4 (14)	36.1 (103)	64.0 (55)*
Comparison	33.0 (140)	18.9 (10)	31.6 (90)	46.5 (40)
Successful Completers				
Treatment	17.9 (44)*	11.1 (4)	15.3 (27)*	39.4 (13)
Comparison	30.1 (74)	13.9 (5)	27.7 (49)	60.0 (20)

*Difference significant at p<.05

Alvis House Alum Creek

Alvis House Alum Creek is a Halfway House located in Columbus, Ohio. This facility serves adult males placed on probation, federal offenders and offenders placed on Transitional Control and parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Alvis House Alum Creek has been in operation since 1998 and is contracted to serve 104 men. This facility is funded by ODRC, Bureau of Prisons, and the United Way. Services include substance abuse treatment, anger management, cognitive restructuring, parenting, and employment readiness. Alvis House Alum Creek was visited by a University of Cincinnati research team on October 13, 2006. At the time of the visit, there were 103 offenders. Jennifer Massalino was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services, via conducting a monthly resident meeting with offenders in the program.
- Funding is adequate and stable, allowing the program to operate as designed.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- While the program receives literature exposure via local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Level of Service Inventory-Revised to asses risk and identify need factors for all residents.
- The program uses additional assessments of criminogenic needs, including the CAGE and a substance abuse questionnaire to further assess substance abuse need and the HIT to assess criminal thinking.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide consistent re-assessment of risk and need factors.
- The program should be primarily targeting moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out, and job and home checks.
- Staff are matched to groups based on desire to provide a particular service and professional experience.
- Offenders have the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- While the program has cognitive-behavioral elements, there are also 12-step and educational treatment models being used.

- Structured curricula or manuals should be used for all groups and all groups should be facilitated from beginning to end by staff.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Although offenders are matched to interventions based on need, risk and responsivity factors should also guide how offenders are matched to services.
- The frequency of rewards used to reinforce offender behavior should be increased.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are individualized, undesirable by the offenders, varied, escape is impossible and immediately applied following the inappropriate behavior. Likewise, punishers should be based upon the demonstration of antisocial behavior and prosocial alternatives should be taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 47%. This rate should fall between 65 and 85%.
- The program should offer structured training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond parole/probation supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is monitored by the Bureau of Prisons.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of training protocol for treatment curriculum, and monitoring of CCIS.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- Alvis House should provide separate reports of recidivism to all programs rather than aggregated agency recidivism.

Descriptive Statistics for ALVIS HOUSE ALUM CREEK by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (242)	50.0 (242)
Female	N/A	N/A
Race		
White	50.0 (108)	50.0 (108)
Non-white	50.0 (134)	50.0 (134)
Marital Status*		
Married	39.7 (23)	60.3 (35)
Single/not married	52.4 (219)	47.6 (199)
Age Category*		
16 to 23	42.6 (49)	57.4 (66)
24 to 30	41.9 (44)	58.1 (61)
31-39	59.2 (77)	40.8 (53)
40+	53.7 (72)	46.3 (62)
Mean Age*	37.0	34.7
SD	10.0	11.1

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE ALUM CREEK by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.3	1.4
SD	2.8	1.7
Previous Conviction*	**% (N)**	**% (N)**
No	71.2 (141)	28.8 (57)
Yes	35.3 (101)	64.7 (185)
Offense Level*		
Felony 1	65.9 (54)	34.1 (28)
Felony 2	51.4 (57)	48.6 (54)
Felony 3	43.4 (56)	56.6 (73)
Felony 4	49.1 (27)	50.9 (28)
Felony 5/M	44.9 (48)	55.1 (29)
Offense Category*		
Violent/person	51.2 (104)	48.8 (99)
Sex	N/A	N/A
Drugs	42.0 (37)	58.0 (51)
Property	59.3 (86)	40.7 (59)
Traffic/DUI	100.0 (2)	0.0 (0)
Other	28.3 (13)	71.7 (33)
Substance Abuse Problem*		
No	18.0 (18)	82.0 (82)
Yes	58.3 (224)	41.7 (160)
Employment Problem*		
No	55.1 (129)	44.9 (105)
Yes	45.2 (113)	54.8 (137)
Emotional Problem		
No	52.5 (179)	47.5 (162)
Yes	44.1 (63)	55.9 (80)
Risk Categories		
Low	50.0 (19)	50.0 (19)
Moderate	50.0 (155)	50.0 (155)
High	50.0 (68)	50.0 (68)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	34.6	35.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ALVIS HOUSE ALUM CREEK by Termination Status

Variable	HWH Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (114)	100.0 (128)
Female	N/A	N/A
Race		
White	43.9 (50)	45.3 (58)
Non-white	56.1 (64)	54.7 (70)
Marital Status		
Married	10.5 (12)	8.6 (11)
Single/not married	89.5 (102)	91.4 (117)
Age Category		
16 to 23	14.0 (16)	25.8 (33)
24 to 30	23.7 (27)	13.3 (17)
31-39	31.6 (36)	32.0 (41)
40+	30.7 (35)	28.9 (37)
Mean Age	37.9	36.2
SD	9.9	10.0

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE ALUM CREEK by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	2.1	2.4
SD	2.0	3.3
Previous Conviction	% (N)	% (N)
No	58.8 (67)	57.8 (74)
Yes	41.2 (47)	42.2 (54)
Offense Level		
Felony 1	21.1 (24)	23.4 (30)
Felony 2	19.3 (22)	27.3 (35)
Felony 3	27.2 (31)	19.5 (25)
Felony 4	12.3 (14)	10.2 (13)
Felony 5/M	20.2 (23)	19.5 (25)
Offense Category		
Violent/person	44.7 (51)	41.4 (53)
Sex	N/A	N/A
Drugs	17.5 (20)	13.3 (17)
Property	28.1 (32)	42.2 (54)
Traffic/DUI	1.8 (2)	0.0 (0)
Other	7.9 (9)	3.1 (4)
Substance Abuse Problem		
No	10.5 (12)	4.7 (6)
Yes	89.5 (102)	95.3 (122)
Employment Problem*		
No	71.9 (82)	36.7 (47)
Yes	28.1 (32)	63.3 (81)
Emotional Problem		
No	77.2 (88)	71.1 (91)
Yes	22.8 (26)	28.9 (37)
Risk Categories*		
Low	11.4 (13)	4.7 (6)
Moderate	71.1 (81)	57.8 (74)
High	17.5 (20)	37.5 (48)
Average risk scores	Mean (N)	Mean (N)
Males*	31.3	37.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Alum Creek

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.7 (67)	26.3 (5) *	25.2 (39)	33.8 (23)
Comparison	33.9 (82)	0.0 (0)	33.5 (52)	44.1 (30)
Successful Completers				
Treatment	18.4 (21) *	15.4 (2)	21.0 (17)	10.0 (2) *
Comparison	34.2 (39)	0.0 (0)	33.3 (27)	60.0 (12)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Alum Creek

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.3 (95)	26.3 (5)	33.5 (52)	55.9 (38)
Comparison	41.3 (100)	5.3 (1)	40.6 (63)	52.9 (36)
Successful Completers				
Treatment	26.3 (30) *	15.4 (2)	25.9 (21)	35.0 (7)
Comparison	37.7 (43)	0.0 (0)	37.0 (30)	65.0 (13)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Alum Creek

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.4 (88) *	31.6 (6) *	33.5 (52)	44.1 (30)
Comparison	28.1 (68)	0.0 (0)	24.5 (38)	44.1 (30)
Successful Completers				
Treatment	18.4 (21)	15.4 (2)	19.8 (16)	15.0 (3)
Comparison	19.3 (22)	0.0 (0)	18.5 (15)	35.0 (7)

*Difference significant at p<.05

Alvis House Breslin Hall

Alvis House Breslin Hall is a Halfway House located in Columbus, Ohio. This facility serves adult females placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Alvis House has been in operation since 1967 and Breslin Hall opened in 2006. It is contracted to serve 20 women. This facility is funded by ODRC, United Way, and private donations. Services include substance abuse education, cognitive restructuring, social skill development, and parenting. Alvis House Dunning Hall was visited by a University of Cincinnati research team on October 24, 2006. At the time of the visit, there were 17 offenders. Katie Warren was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program is supported by the criminal justice community and community at large.
- Funding is stable and adequate, allowing the program to operate as designed
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should regularly provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders and disseminate such literature to staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has been in operation less than a year, so needs time to become established.
- While the program is all female, women are referred to external co-ed groups. This practice should be reconsidered.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff and appear to support the treatment goals and ethical guidelines.
- Staff turnover is not currently a problem for the program.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More staff training, particularly initial training, should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff should have more input into the structure of the program.

Assessment

Strengths:

- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Services Inventory-Revised (LSI-R) to assess both risk level and a range of criminogenic need factors for all residents admitted to the program.
- The program also uses a tool to further assess substance abuse need.
- Staff were formally trained on the LSI-R.

Recommendations for Improvement:

- While the program has appropriate exclusionary criteria, staff report that about 20% of residents are inappropriate for the services being provided. The intake department should reevaluate how women are placed in the halfway house, or the program should enhance services to meet the needs of the women admitted.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as mental health, motivation, education, personality and learning styles.
- When assessing substance abuse need, the program should consider using a validated tool such as the Substance Abuse Subtle Screening Inventory (SASSI) or the Addiction Severity Index (ASI).
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The program's primary targets are criminogenic needs, including criminal thinking, social skill development (via Equip) and substance abuse.
- Structured curricula are used for all groups and staff are trained on curricula.
- The average facilitator to group member ratio is 1:7, which is an appropriate group size.
- The program's average length of stay is 5.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are effectively monitored while on passes to the community via drug testing, breathalyzers, schedules/logs, phone calls in and out and site checks.
- Offenders have the opportunity to provide input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The procedure by which offenders are reinforced is appropriate as rewards are varied, consistently applied, and based upon the demonstration of prosocial behavior.
- The program teaches offenders to monitor and anticipate high risk situations via group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Although some of the treatment is based upon a cognitive-behavioral model, the program still relies on a 12-step/education approach to address substance abuse issues.
- The program should consider targeting a wider range of criminogenic need areas (e.g. antisocial peers/relationships, antisocial personality, structured leisure, and family issues).
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be utilized across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Although offenders are assigned to groups based on need factors, risk and responsivity should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- The procedure by which offenders are punished could be improved by ensuring that punishment is individualized, consistently applied, based upon the demonstration of an antisocial behavior, and prosocial alternatives are taught following a punisher. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 90%, which falls outside the recommended range of 65 to 85%.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer programming to family members which consists of training families who might assist in providing prosocial support for the offenders.
- While offenders are referred to external providers for aftercare services, participation is not required by the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, observation of treatment groups and staff feedback.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of outside providers as well as more regular observation of contractual staff.

Descriptive Statistics for ALVIS H BRESLIN by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (37)	50.0 (37)
Race		
White	50.0 (22)	50.0 (22)
Non-white	50.0 (15)	50.0 (15)
Marital Status		
Married	66.7 (6)	33.3 (3)
Single/not married	50.0 (31)	50.0 (31)
Age Category		
16 to 23	40.0 (6)	60.0 (9)
24 to 30	58.3 (7)	41.7 (5)
31-39	55.6 (15)	44.4 (12)
40+	45.0 (9)	55.0 (11)
Mean Age	36.3	35.2
SD	8.6	10.5

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ALVIS H BRESLIN by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.3	1.0
SD	1.8	1.5
Previous Conviction	% (N)	% (N)
No	53.8 (21)	46.2 (18)
Yes	45.7 (16)	54.3 (19)
Offense Level		
Felony 1	100.0 (4)	0.0 (0)
Felony 2	28.6 (7)	71.4 (5)
Felony 3	33.3 (4)	66.7 (8)
Felony 4	45.5 (5)	54.5 (6)
Felony 5/M	55.0 (22)	45.0 (18)
Offense Category		
Violent/person	35.3 (6)	64.7 (11)
Sex	N/A	N/A
Drugs	61.5 (16)	38.5 (10)
Property	50.0 (12)	50.0 (12)
Traffic/DUI	N/A	N/A
Other	42.9 (3)	57.1 (4)
Substance Abuse Problem		
No	33.3 (3)	66.7 (6)
Yes	52.3 (34)	47.7 (31)
Employment Problem		
No	54.5 (18)	45.5 (15)
Yes	46.3 (19)	53.7 (22)
Emotional Problem*		
No	61.1 (22)	38.9 (14)
Yes	39.5 (15)	60.5 (23)
Risk Categories		
Low	50.0 (9)	50.0 (9)
Moderate	50.0 (19)	50.0 (19)
High	50.0 (9)	50.0 (9)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	25.5	24.7
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ALVIS H BRESLIN by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (18)	100.0 (19)
Race		
White	57.9 (11)	61.1 (11)
Non-white	42.1 (8)	38.9 (7)
Marital Status		
Married	15.8 (3)	16.7 (3)
Single/not married	84.2 (16)	83.3 (15)
Age Category		
16 to 23	15.8 (3)	16.7 (3)
24 to 30	15.8 (3)	22.2 (4)
31-39	31.6 (6)	50.0 (9)
40+	36.8 (7)	11.1 (2)
Mean Age	38.0	34.6
SD	9.3	7.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALVIS H BRESLIN by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.2	1.5
SD	1.1	2.4
Previous Conviction	**% (N)**	**% (N)**
No	52.6 (10)	61.1 (11)
Yes	47.4 (9)	38.9 (7)
Offense Level		
Felony 1	10.5 (2)	11.1 (2)
Felony 2	5.3 (1)	5.6 (1)
Felony 3	10.5 (2)	11.1 (2)
Felony 4	10.5 (2)	16.7 (3)
Felony 5/M	63.2 (12)	55.6 (10)
Offense Category		
Violent/person	15.8 (3)	16.7 (3)
Sex	N/A	N/A
Drugs	47.4 (9)	38.9 (7)
Property	31.6 (6)	33.3 (6)
Traffic/DUI	N/A	N/A
Other	5.3 (1)	11.1 (2)
Substance Abuse Problem		
No	5.3 (1)	11.1 (2)
Yes	94.7 (18)	88.9 (16)
Employment Problem*		
No	68.4 (13)	27.8 (5)
Yes	31.6 (6)	72.2 (13)
Emotional Problem		
No	73.7 (14)	44.4 (8)
Yes	26.3 (5)	55.6 (10)
Risk Categories		
Low	36.8 (7)	11.1 (2)
Moderate	36.8 (7)	66.7 (12)
High	26.3 (5)	22.2 (4)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	24.4	26.7
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Breslin Hall

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	13.5 (5)	11.1 (1)	10.5 (2)	22.2 (2)
Comparison	27.0 (10)	22.2 (2)	21.1 (4)	44.4 (4)
Successful Completers				
Treatment	10.5 (2)	0.0 (0)	14.3 (1)	20.0 (1)
Comparison	26.3 (5)	28.6 (2)	14.3 (1)	40.0 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Breslin Hall

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	32.4 (12)	22.2 (2)	31.6 (6)	44.4 (4)
Comparison	32.4 (12)	22.2 (2)	31.6 (6)	44.4 (4)
Successful Completers				
Treatment	26.3 (5)	14.3 (1)	28.6 (2)	40.0 (2)
Comparison	31.6 (6)	28.6 (2)	28.6 (2)	40.0 (2)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Breslin Hall

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	45.9 (17)	22.2 (2)	57.9 (11) *	44.4 (4)
Comparison	27.0 (10)	33.3 (3)	21.1 (4)	33.3 (3)
Successful Completers				
Treatment	26.3 (5)	14.3 (1)	42.9 (3)	20.0 (1)
Comparison	26.3 (5)	28.6 (2)	14.3 (1)	40.0 (2)

*Difference significant at p<.05

Alvis House Cope Center

Alvis House Cope Center is a Halfway House located in Dayton, Ohio. This facility serves adult males and females placed on county probation, federal probation/parole, and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). The majority of Cope Center residents come from the federal system. Alvis House Cope Center has been in operation since 1996 and is contracted to serve 25 men and 6 women. This facility is funded by ODRC and the Bureau of Prisons. Services include substance abuse treatment, cognitive restructuring, and employment readiness. Alvis House Cope Center was visited by a University of Cincinnati research team on October 20, 2006. At the time of the visit, there were 30 male and 6 female offenders. Joanna Jackson was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services as the employment coordinator and facilitator of resident meetings.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable and adequate enough to operate the program as designed
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program should have separate living spaces and treatment for male and female clients.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive an adequate number of hours of initial as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should receive clinical supervision by a licensed professional and attend clinical staff meetings regularly designated to the review of client progress.

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Level of Service Inventory-Revised to asses risk and identify need factors for all residents.
- The program also uses a mental health screener and a psychosocial assessment.
- The program provides re-assessment of risk and need factors with the LSI-R.

Recommendations for Improvement:

- Staff estimated that approximately 25% of residents admitted to the program are inappropriate for the services being provided. The program should have more discretion and improved screening of intakes.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles.
- Offender risk levels should be formally tracked and the large majority of offenders in the program should be moderate to high risk for recidivism.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10 and are facilitated from beginning to end by staff.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are effectively monitoring while on passes to the community via drug testing, schedules/logs, phone calls in and out and coordination with probation/parole officers.
- Offenders have the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- While the program has cognitive-behavioral elements, there are also 12-step and educational treatment models being used.
- Structured curricula or manuals should be used for all groups.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased. As such, offenders should be offered a wider spectrum of group treatment options.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, varied, consistently applied, individualized, and offenders clearly know why they are being reinforced.
- The procedure by which offenders are punished could be improved by ensuring that punishers are individualized, varied, seen as valuable for extinguishing behavior, not spread out and immediately applied following the inappropriate behavior. Likewise, punishers should be based upon the demonstration of antisocial behavior and prosocial alternatives should be taught
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 61%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 15% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is monitored by the Federal Bureau of Prisons.
- The program uses several internal quality review mechanisms including file review, client surveys, conducting offender re-assessments, and overseeing CCIS system.
- Alvis House collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide regular observation of treatment delivery with feedback and increased monitoring of both contractual and external providers.
- Alvis House should provide separate reports of recidivism to all programs rather than aggregated agency recidivism.

Descriptive Statistics for ALVIS HOUSE COPE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (46)	50.0 (46)
Female	50.0 (8)	50.0 (8)
Race		
White	50.0 (30)	50.0 (30)
Non-white	50.0 (24)	50.0 (24)
Marital Status		
Married	71.4 (5)	28.6 (2)
Single/not married	49.0 (49)	51.0 (51)
Age Category*		
16 to 23	24.1 (7)	75.9 (22)
24 to 30	38.1 (8)	61.9 (13)
31-39	61.5 (16)	38.5 (10)
40+	71.9 (23)	28.1 (9)
Mean Age*	39.0	31.4
SD	9.3	8.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE COPE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.4	1.0
SD	1.6	1.2
Previous Conviction*	**% (N)**	**% (N)**
No	72.7 (24)	27.3 (9)
Yes	40.0 (30)	60.0 (45)
Offense Level*		
Felony 1	79.2 (19)	20.8 (5)
Felony 2	57.1 (16)	42.9 (12)
Felony 3	42.3 (11)	57.7 (15)
Felony 4	11.1 (1)	88.9 (8)
Felony 5/M	33.3 (7)	66.7 (14)
Offense Category*		
Violent/person	71.2 (37)	28.8 (15)
Sex	N/A	N/A
Drugs	40.9 (9)	59.1 (13)
Property	26.9 (7)	73.1 (19)
Traffic/DUI	100.0 (1)	0.0 (0)
Other	0.0 (0)	100.0 (7)
Substance Abuse Problem*		
No	23.5 (4)	76.5 (13)
Yes	54.9 (50)	45.1 (41)
Employment Problem		
No	46.8 (22)	53.2 (25)
Yes	52.5 (32)	47.5 (29)
Emotional Problem*		
No	64.5 (40)	35.5 (22)
Yes	30.4 (14)	69.6 (32)
Risk Categories		
Low	50.0 (6)	50.0 (6)
Moderate	50.0 (35)	50.0 (35)
High	50.0 (13)	50.0 (13)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	29.8	32.8
Females	2.9	2.3
Overall	32.7	35.1

*Difference significant at p<.05

Descriptive Statistics for ALVIS HOUSE COPE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender*		
Male	60.0 (9)	94.9 (37)
Female	40.0 (6)	5.1 (2)
Race		
White	60.0 (9)	53.8 (21)
Non-white	40.0 (6)	46.2 (18)
Marital Status		
Married	6.7 (1)	10.3 (4)
Single/not married	93.3 (14)	89.7 (35)
Age Category		
16 to 23	6.7 (1)	15.4 (6)
24 to 30	26.7 (4)	10.3 (4)
31-39	40.0 (6)	25.6 (10)
40+	26.7 (4)	48.7 (19)
Mean Age	37.0 (15)	39.8 (39)
SD	8.6	9.5

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE COPE by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.5 (15)	2.7 (39)
SD	1.1	1.7
Previous Conviction	% (N)	% (N)
No	53.3 (8)	41.0 (16)
Yes	46.7 (7)	59.0 (23)
Offense Level		
Felony 1	26.7 (4)	38.5 (15)
Felony 2	20.0 (3)	33.3 (13)
Felony 3	26.7 (4)	17.9 (7)
Felony 4	6.7 (1)	N/A
Felony 5/M	20.0 (3)	10.3 (4)
Offense Category		
Violent/person	66.7 (10)	69.2 (27)
Sex	N/A	N/A
Drugs	20.0 (3)	15.4 (6)
Property	6.7 (1)	15.4 (6)
Traffic/DUI	6.7 (1)	N/A
Other	N/A	N/A
Substance Abuse Problem		
No	13.3 (2)	5.1 (2)
Yes	86.7 (13)	94.9 (37)
Employment Problem*		
No	66.7 (10)	30.8 (12)
Yes	33.3 (5)	69.2 (27)
Emotional Problem*		
No	53.3 (8)	82.1 (32)
Yes	46.7 (7)	17.9 (7)
Risk Categories		
Low	26.7 (4)	5.1 (2)
Moderate	60.0 (9)	66.7 (26)
High	13.3 (2)	28.2 (11)
Average risk scores*	Mean (N)	Mean (N)
Males	18.8 (9)	34.1 (37)
Females	8.1 (6)	0.9 (2)
Overall	26.9 (15)	34.9 (39)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Cope Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.8 (15)	16.7 (1)	22.9 (8)	46.2 (6)
Comparison	25.9 (14)	33.3 (2)	20.0 (7)	38.5 (5)
Successful Completers				
Treatment	26.7 (4)	25.0 (1)	22.2 (2)	50.0 (1)
Comparison	20.0 (3)	50.0 (2)	11.1 (1)	0.0 (0)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Cope Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.2 (19)	16.7 (1)	34.3 (12)	46.2 (6)
Comparison	33.3 (18)	33.3 (2)	32.9 (8)	61.5 (8)
Successful Completers				
Treatment	26.7 (4)	25.0 (1)	22.2 (2)	50.0 (1)
Comparison	20.0 (3)	50.0 (2)	11.1 (1)	0.0 (0)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Cope Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.4 (24)	33.3 (2)	42.9 (15)	53.8 (7)
Comparison	29.6 (16)	16.7 (1)	34.3 (12)	23.1 (3)
Successful Completers				
Treatment	20.0 (3)	25.0 (1)	11.1 (1)	50.0 (1)
Comparison	26.7 (4)	25.0 (1)	33.3 (3)	0.0 (0)

*Difference significant at p<.05

Alvis House Dunning Hall

Alvis House Dunning Hall is a Halfway House located in Columbus, Ohio. This facility serves adult females placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Alvis House has been in operation since 1967 and Dunning Hall opened in 1973 and is contracted to serve 34 women. This facility is funded by ODRC, United Way, and the federal government. Services include substance abuse education, cognitive restructuring, anger management, parenting, and financial management, employment readiness self-esteem and women's group. Alvis House Dunning Hall was visited by a University of Cincinnati research team on October 10, 2006. At the time of the visit, there were 31 offenders. Maria Watson was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, and supervising staff.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable, allowing the program to operate as designed
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- The program director should regularly provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders and disseminate such literature to staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More initial staff training, particularly ongoing training, should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Services Inventory-Revised (LSI-R) to assess both risk level and a range of criminogenic need factors for all residents admitted to the program.
- The program uses two additional tools to further assess criminogenic needs including the How I Think criminal attitude assessment and the substance abuse brief psychosocial.
- Staff were formally trained on the LSI-R.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- When assessing substance abuse need, the program should consider using a validated tool such as the Substance Abuse Subtle Screening Inventory (SASSI) or the Addiction Severity Index (ASI).
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out and site checks.
- Staff are matched to groups based on experience and skill level.
- Offenders have the opportunity to provide input into the structure of the program via a community meeting.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The types of rewards and punishers used by the program appear appropriate.
- The procedure by which offenders are reinforced is appropriate as rewards are varied, consistently applied, based upon the demonstration of prosocial behavior, and individualized.
- The program completion rate is 71%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Although much of the treatment is based upon a cognitive-behavioral model, the program still relies on a 12-step/education approach to address substance abuse and an insight-oriented approach for the women's group and self-esteem group.
- While some of the program's targets are criminogenic in nature, such as substance abuse and criminal attitudes, many are non-criminogenic such as mental health, victimization, parenting, self-esteem, nutrition and financial management. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Although offenders are assigned to groups based on need factors, risk and responsivity should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- The procedure by which offenders are punished could be improved by ensuring that punishment is seen as valuable by staff in extinguishing unwanted behavior and that they are based on the demonstration of antisocial behavior. Additionally punishers should be individualized, immediately applied, undesirable by the offenders and prosocial alternatives should be taught following a punisher. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer programming to family members which consists of training families who might assist in providing prosocial support for the offenders.
- While offenders are referred to external providers for aftercare services, participation is not required by the program and only about 5% of offenders choose to participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, observation of treatment groups, staff feedback and internal audits.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of outside providers as well as more regular observation of treatment groups.

Descriptive Statistics for ALVIS HOUSE DUNNING by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (67)	50.0 (67)
Race		
White	50.0 (49)	50.0 (49)
Non-white	50.0 (18)	50.0 (18)
Marital Status		
Married	52.6 (10)	47.4 (9)
Single/not married	51.8 (57)	48.2 (53)
Age Category		
16 to 23	45.5 (10)	54.5 (12)
24 to 30	45.5 (15)	54.5 (18)
31-39	54.9 (28)	45.1 (23)
40+	50.0 (14)	50.0 (14)
Mean Age	35.9	34.2
SD	8.7	9.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE DUNNING by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.4	1.3
SD	1.8	2.2
Previous Conviction*	**% (N)**	**% (N)**
No	65.5 (57)	34.5 (30)
Yes	21.3 (10)	78.7 (37)
Offense Level*		
Felony 1	62.5 (5)	37.5 (3)
Felony 2	60.9 (14)	39.1 (9)
Felony 3	20.8 (5)	79.2 (19)
Felony 4	37.5 (6)	62.5 (10)
Felony 5/M	58.7 (37)	41.3 (26)
Offense Category		
Violent/person	43.2 (19)	56.8 (25)
Sex	N/A	N/A
Drugs	56.1 (230	43.9 (18)
Property	57.9 (22)	42.1 (16)
Traffic/DUI	N/A	N/A
Other	27.3 (3)	72.7 (8)
Substance Abuse Problem*		
No	27.3 (6)	72.7 (16)
Yes	54.5 (61)	45.5 (51)
Employment Problem		
No	43.7 (31)	56.3 (40)
Yes	57.1 (36)	42.9 (27)
Emotional Problem		
No	45.8 (27)	54.2 (32)
Yes	53.3 (40)	46.7 (35)
Risk Categories		
Low	50.0 (19)	50.0 (19)
Moderate	50.0 (33)	50.0 (33)
High	50.0 (15)	50.0 (15)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	23.2	23.2
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ALVIS HOUSE DUNNING by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (40)	100.0 (27)
Race		
White	70.0 (28)	77.8 (21)
Non-white	30.0 (12)	22.2 (6)
Marital Status		
Married	20.0 (8)	7.4 (2)
Single/not married	80.0 (32)	92.6 (25)
Age Category		
16 to 23	5.0 (2)	29.6 (8)
24 to 30	25.0 (10)	18.5 (5)
31-39	45.0 (18)	37.0 (10)
40+	25.0 (10)	14.8 (4)
Mean Age*	38.1	32.7
SD	8.3	8.4

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE DUNNING by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.6	1.0
SD	2.0	1.3
Previous Conviction	% (N)	% (N)
No	90.0 (36)	77.8 (21)
Yes	10.0 (4)	22.2 (6)
Offense Level		
Felony 1	5.0 (2)	11.1 (3)
Felony 2	25.0 (10)	14.8 (4)
Felony 3	7.5 (3)	7.4 (2)
Felony 4	12.5 (5)	3.7 (1)
Felony 5/M	50.0 (20)	63.0 (17)
Offense Category		
Violent/person	30.0 (12)	25.9 (7)
Sex	N/A	N/A
Drugs	30.0 (12)	40.7 (11)
Property	37.5 (15)	25.9 (7)
Traffic/DUI	N/A	N/A
Other	2.5 (1)	7.4 (2)
Substance Abuse Problem		
No	12.5 (5)	3.7 (1)
Yes	87.5 (35)	96.3 (26)
Employment Problem		
No	52.5 (21)	37.0 (10)
Yes	47.5 (19)	63.0 (17)
Emotional Problem*		
No	52.5 (21)	22.2 (6)
Yes	47.5 (19)	77.8 (21)
Risk Categories*		
Low	37.5 (15)	14.8 (4)
Moderate	35.0 (14)	70.4 (19)
High	27.5 (11)	14.8 (4)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	22.7	24.0
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Dunning Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	14.9 (10)	0.0 (0)	15.2 (5)	33.3 (5)
Comparison	16.4 (11)	5.3 (1)	12.1 (4)	40.0 (6)
Successful Completers				
Treatment	17.5 (7)	0.0 (0)	21.4 (3)	36.4 (4)
Comparison	17.5 (7)	6.7 (1)	7.1 (1)	45.5 (5)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Dunning Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.9 (20)	5.3 (1)	33.3 (11)	53.3 (8)
Comparison	23.9 (16)	15.8 (3)	15.2 (5)	53.3 (8)
Successful Completers				
Treatment	32.5 (13)	6.7 (1)	35.7 (5)	63.6 (7)
Comparison	27.5 (11)	20.0 (3)	7.1 (1)	63.6 (7)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Dunning Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.4 (19)	5.3 (1)	39.4 (13)	33.3 (5)
Comparison	22.4 (15)	5.3 (1)	27.3 (9)	33.3 (5)
Successful Completers				
Treatment	15.0 (6)	0.0 (0)	21.4 (3)	27.3 (3)
Comparison	20.0 (8)	6.7 (1)	21.4 (3)	36.4 (4)

*Difference significant at p<.05

Alvis House Ohio Link

Ohio Link is a Halfway House located in Toledo, Ohio. This facility serves adult males and females placed on federal supervision as well parole/Post-Release Control and Transitional Control from the Ohio Department of Rehabilitation and Correction (ODRC). Ohio Link has been in operation since 2000 and has a capacity to serve 21 men and 9 women. This facility is mainly funded by ODRC, United Way, and the Federal Bureau of Prisons. Services include substance abuse, cognitive-behavioral treatment, health/wellness and employment readiness. Ohio Link was visited by a University of Cincinnati research team on September 14, 2006. At the time of the visit, there were 17 male and 7 female residents. Kelly Mobley was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via holding resident meetings and meeting with job-seekers in the program.
- Funding is stable, allowing the program to operate as designed.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program.
- Staff appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should receive clinical supervision by a licensed professional.

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Level of Service Inventory-Revised to asses risk and identify need factors for all residents.
- The program also uses the Equip questionnaire and a substance abuse self-assessment to further assess criminogenic needs, as well as a general mental health assessment.
- The program provides re-assessment of risk and need factors using the LSI-R.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- Offender risk levels should be formally tracked and the program should be primarily serving moderate and high risk offenders rather than lower risk individuals.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs and regular phone calls in and out.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10 and staff monitor and facilitate all groups.
- Offenders have the opportunity to provide input into the structure of the program via a monthly community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group processing.
- Appropriate discharge planning has been implemented.
- The large majority offenders participate in aftercare services, which are provided by external referral sources.

Recommendations for Improvement:

- While some of the treatment is based upon a cognitive-behavioral model, the program still relies on 12-step and educational treatment elements.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.

- Structured curricula or manuals should be used for all groups.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, desired by the offender, consistently applied, and individualized.
- The procedure by which offenders are punished could be enhanced by ensuring that punishers are delivered consistently, on an individual basis, and immediately. Also punishers should match the infraction, should not be spread out and alternative prosocial behaviors should be taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 90%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, supervision of assessments, and supervision of training protocol for treatment curriculum.
- The program provides moderate monitoring of contractual and external providers.
- Alvis House collects recidivism data on offenders.

Recommendations for Improvement:

- The frequency with which both internal and contractual staff are observed delivering treatment should be increased.

Descriptive Statistics for ALVIS HOUSE OHIOLINK by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (31)	50.0 (31)
Female	50.0 (16)	50.0 (16)
Race		
White	50.0 (19)	50.0 (19)
Non-white	50.0 (28)	50.0 (28)
Marital Status		
Married	53.8 (7)	46.2 (6)
Single/not married	50.0 (40)	50.0 (40)
Age Category		
16 to 23	33.3 (8)	66.7 (16)
24 to 30	41.2 (7)	58.8 (10)
31-39	57.1 (16)	42.9 (12)
40+	64.0 (16)	36.0 (9)
Mean Age*	37.8	32.8
SD	8.7	9.1

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE OHIOLINK by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	3.7	1.2
SD	6.1	1.6
Previous Conviction*	**% (N)**	**% (N)**
No	75.0 (30)	25.0 (10)
Yes	31.5 (17)	68.5 (37)
Offense Level		
Felony 1	60.0 (3)	40.0 (2)
Felony 2	47.8 (11)	52.2 (12)
Felony 3	54.8 (17)	45.2 (14)
Felony 4	37.5 (6)	62.5 (10)
Felony 5/M	52.6 (10)	47.4 (9)
Offense Category		
Violent/person	53.8 (21)	46.2 (18)
Sex	N/A	N/A
Drugs	56.3 (9)	43.8 (7)
Property	45.5 (15)	54.5 (18)
Traffic/DUI	N/A	N/A
Other	33.3 (2)	66.7 (4)
Substance Abuse Problem*		
No	15.4 (2)	94.6 (11)
Yes	55.6 (45)	44.4 (36)
Employment Problem*		
No	72.1 (31)	27.9 (12)
Yes	31.4 (16)	68.6 (35)
Emotional Problem*		
No	63.6 (35)	36.4 (20)
Yes	30.8 (12)	69.2 (27)
Risk Categories		
Low	50.0 (4)	50.0 (4)
Moderate	50.0 (28)	50.0 (28)
High	50.0 (15)	50.0 (15)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	25.1	26.4
Females	7.9	8.6
Overall	33.0	35.0

*Difference significant at p<.05

Descriptive Statistics for ALVIS HOUSE OHIOLINK by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	57.1 (16)	78.9 (15)
Female	42.9 (12)	21.1 (4)
Race		
White	50.0 (14)	26.3 (5)
Non-white	50.0 (14)	73.7 (14)
Marital Status		
Married	21.4 (6)	5.3 (1)
Single/not married	78.6 (22)	94.7 (18)
Age Category		
16 to 23	21.4 (6)	10.5 (2)
24 to 30	7.1 (2)	26.3 (5)
31-39	39.3 (11)	26.3 (5)
40+	32.1 (9)	36.8 (7)
Mean Age	38.1	37.3
SD	9.2	8.3

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE OHIOLINK by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	3.8	3.4
SD	7.5	3.3
Previous Conviction	**% (N)**	**% (N)**
No	75.0 (21)	47.4 (9)
Yes	25.0 (7)	52.6 (10)
Offense Level*		
Felony 1	7.1 (2)	5.3 (1)
Felony 2	7.1 (2)	47.4 (9)
Felony 3	35.7 (10)	36.8 (7)
Felony 4	17.9 (5)	5.3 (1)
Felony 5/M	32.1 (9)	5.3 (1)
Offense Category		
Violent/person	32.1 (9)	63.2 (12)
Sex	N/A	N/A
Drugs	25.0 (7)	10.5 (2)
Property	35.7 (10)	26.3 (5)
Traffic/DUI	N/A	N/A
Other	7.1 (2)	0.0 (0)
Substance Abuse Problem		
No	7.1 (2)	0.0 (0)
Yes	92.9 (26)	100.0 (19)
Employment Problem*		
No	78.6 (22)	47.4 (9)
Yes	21.4 (6)	52.6 (10)
Emotional Problem		
No	67.9 (19)	84.2 (16)
Yes	32.1 (9)	15.8 (3)
Risk Categories		
Low	10.7 (3)	5.3 (1)
Moderate	64.3 (18)	52.6 (10)
High	25.0 (7)	42.1 (8)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	21.0	31.2
Females	9.4	5.8
Overall*	30.4	37.0

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House OhioLink

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	12.8 (6)	0.0 (0)	10.7 (3)	20.0 (3)
Comparison	25.5 (12)	25.0 (1)	21.4 (6)	33.3 (5)
Successful Completers				
Treatment	10.7 (3)	0.0 (0)	5.6 (1)	28.6 (2)
Comparison	28.6 (8)	33.3 (1)	22.2 (4)	42.9 (3)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House OhioLink

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	21.3 (10) *	25.0 (1)	17.9 (5)	26.7 (4)
Comparison	40.4 (19)	25.0 (1)	39.3 (11)	46.7 (7)
Successful Completers				
Treatment	17.9 (5)	0.0 (0)	11.1 (2)	42.9 (3)
Comparison	39.3 (11)	33.3 (1)	38.9 (7)	42.9 (3)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House OhioLink

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.3 (18)	0.0 (0)	32.1 (9)	60.0 (9)
Comparison	34.0 (16)	0.0 (0)	35.7 (10)	40.0 (6)
Successful Completers				
Treatment	25.0 (7)	0.0 (0)	16.7 (3)	57.1 (4)
Comparison	42.9 (12)	0.0 (0)	44.4 (8)	57.1 (4)

*Difference significant at p<.05

Alvis House Price Hall

Alvis House Price Hall is a Halfway House located in Columbus, Ohio. This facility serves adult males placed on probation as well as parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Alvis House Price Hall has been in operation since 2004 and is contracted to serve 25 men. This facility is funded by ODRC and RSAT. Services include substance abuse, treatment for dual diagnosis offenders, mental health, cognitive restructuring, anger management, life skills, nutrition, employment and aftercare. Alvis House Price Hall was visited by a University of Cincinnati research team on October 12, 2006. At the time of the visit, there were 25 residents with additional offenders on a waiting list. Cindy Herb was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services via conducting resident meetings and initial interviews with offenders in the program.
- The program is supported by the criminal justice community and community at large.
- The program regularly consults the literature related to effective interventions with offenders by accessing peer-reviewed journals, books, conference material and reviewing curricula before its adoption.
- Funding is adequate and stable, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.

- More staff training, particularly initial training, should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Level of Service Inventory-Revised to asses risk and identify need factors for all residents.
- The program also uses several additional tools to further assess criminogenic need factors for all offenders in the program, including the SASSI, CAGE, DAST and ODADAS biopsychosocial to assess substance abuse, and the HIT to assess criminal thinking.
- The program uses the URICA to assess motivation as well as the Burns depression and anxiety scales as responsivity assessments.
- The program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- While the program provides re-assessment of risk and need factors using the LSI-R, all offenders should be reassessed prior to program completion by re-interviewing offenders and rescoring the tool.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger and substance abuse).
- The program's average length of stay is 7 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out and on-site checks.
- Staff are matched to groups based on desire and skill in a particular area.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment via additional one-on-one sessions with case managers.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Offenders have the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- Staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 69%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, homework assignments, group activities, and processing.
- Program completion is determined by the acquisition of prosocial skills which is objectively measured with pre-post testing.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some are non-criminogenic such as victimization, nutrition, and life skills. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While the program is based upon cognitive-behavioral and social learning theory, there are still 12-step and educational elements in the program.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should always be facilitated by staff and should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions rather than all offenders being required to attend all groups.
- The frequency of rewards used to reinforce offender behavior should be increased.
- The procedure by which offenders are punished could be improved by ensuring that punishers are individualized, undesirable by the offenders, not spread out and immediately applied following the inappropriate behavior.
- Although the program offers services to interested family members via family counseling, this intervention should be enhanced as only about 15% of families are involved in treatment.
- While aftercare services are provided by the program, only about 50% of offenders participate in such services. Furthermore, aftercare treatment could be enhanced if it was structured to incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client satisfaction surveys, observation of treatment groups, staff feedback, supervision of assessments, and monitoring of the aftercare program.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- Alvis House should provide separate reports of recidivism to all programs rather than aggregated agency recidivism.

Descriptive Statistics for ALVIS HOUSE PRICE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (87)	50.0 (87)
Female	N/A	N/A
Race		
White	50.0 (33)	50.0 (33)
Non-white	50.0 (54)	50.0 (54)
Marital Status		
Married	44.4 (8)	55.6 (10)
Single/not married	52.3 (79)	47.7 (72)
Age Category*		
16 to 23	30.3 (10)	69.7 (23)
24 to 30	43.9 (18)	56.1 (23)
31-39	58.3 (28)	41.7 (20)
40+	59.6 (31)	40.4 (21)
Mean Age*	38.0	32.9
SD	8.9	9.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE PRICE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.0	1.3
SD	2.3	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	59.6 (53)	40.4 (36)
Yes	40.0 (34)	60.0 (51)
Offense Level*		
Felony 1	40.9 (9)	59.1 (13)
Felony 2	69.4 (25)	30.6 (11)
Felony 3	46.9 (15)	53.1 (17)
Felony 4	31.0 (9)	69.0 (20)
Felony 5/M	52.7 (29)	47.3 (26)
Offense Category		
Violent/person	48.9 (23)	51.1 (24)
Sex	N/A	N/A
Drugs	32.4 (12)	67.6 (25)
Property	55.9 (38)	44.1 (30)
Traffic/DUI	100.0 (2)	0.0 (0)
Other	60.0 (12)	40.0 (8)
Substance Abuse Problem*		
No	15.4 (4)	84.6 (22)
Yes	56.1 (83)	43.9 (65)
Employment Problem		
No	45.3 (39)	54.7 (47)
Yes	54.5 (48)	45.5 (40)
Emotional Problem*		
No	42.6 (46)	57.4 (62)
Yes	62.1 (41)	37.9 (25)
Risk Categories		
Low	50.0 (8)	50.0 (8)
Moderate	50.0 (50)	50.0 (50)
High	50.0 (29)	50.0 (29)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	36.1	34.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

Descriptive Statistics for ALVIS HOUSE PRICE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (50)	100.0 (37)
Female	N/A	N/A
Race		
White	36.0 (18)	40.5 (15)
Non-white	64.0 (32)	59.5 (22)
Marital Status		
Married	4.0 (2)	16.2 (6)
Single/not married	96.0 (48)	83.8 (31)
Age Category		
16 to 23	10.0 (5)	13.5 (5)
24 to 30	20.0 (10)	21.6 (8)
31-39	28.0 (14)	37.8 (14)
40+	42.0 (21)	27.0 (10)
Mean Age	38.8	37.0
SD	9.0	8.6

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE PRICE by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	2.1	1.9
SD	2.1	2.5
Previous Conviction*	% (N)	% (N)
No	70.0 (35)	48.6 (18)
Yes	30.0 (15)	51.4 (19)
Offense Level		
Felony 1	8.0 (4)	13.5 (5)
Felony 2	24.0 (12)	35.1 (13)
Felony 3	16.0 (8)	18.9 (7)
Felony 4	16.0 (8)	2.7 (1)
Felony 5/M	36.0 (18)	29.7 (11)
Offense Category		
Violent/person	20.0 (10)	35.1 (13)
Sex	N/A	N/A
Drugs	18.0 (9)	8.1 (3)
Property	46.0 (23)	40.5 (15)
Traffic/DUI	2.0 (1)	2.7 (1)
Other	14.0 (7)	13.5 (5)
Substance Abuse Problem		
No	6.0 (3)	2.7 (1)
Yes	94.0 (47)	97.3 (36)
Employment Problem*		
No	56.0 (28)	29.7 (11)
Yes	44.0 (22)	70.3 (26)
Emotional Problem		
No	54.0 (27)	51.4 (19)
Yes	46.0 (23)	48.6 (18)
Risk Categories		
Low	12.0 (6)	5.4 (2)
Moderate	54.0 (27)	62.2 (23)
High	34.0 (17)	32.4 (12)
Average risk scores	Mean (N)	Mean (N)
Males	34.9	37.7
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Price Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	32.2 (28)	0.0 (0)	38.0 (19)	31.0 (9)
Comparison	40.2 (35)	12.5 (1)	38.0 (19)	51.7 (15)
Successful Completers				
Treatment	32.0 (16)	0.0 (0)	40.7 (11)	29.4 (5)
Comparison	42.0 (21)	16.7 (1)	37.0 (10)	58.8 (10)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Price Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	41.4 (36)	25.0 (2)	44.0 (22)	41.4 (12)
Comparison	47.1 (41)	25.0 (2)	44.0 (22)	58.6 (17)
Successful Completers				
Treatment	42.0 (21)	33.3 (2)	48.1 (13)	35.3 (6)
Comparison	52.0 (26)	33.3 (2)	48.1 (13)	64.7 (11)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Price Hall

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.8 (39)	12.5 (1)	48.0 (24)	48.3 (14)
Comparison	32.2 (28)	12.5 (1)	30.0 (15)	41.4 (12)
Successful Completers				
Treatment	32.0 (16)	0.0 (0)	37.0 (10)	35.3 (6)
Comparison	34.0 (17)	16.7 (1)	25.9 (7)	52.9 (9)

*Difference significant at p<.05

Alvis House Veteran's Program

Alvis House Veteran's Program is a Halfway House located in Chillicothe, Ohio. This facility serves adult males placed on probation as well as parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Alvis House Veteran's Program has been in operation since 1997 and is contracted to serve 24 men. This facility is funded by ODRC, United Way, and private donations. Services include substance abuse treatment, cognitive-behavioral group, mental health, anger management and employment readiness. Alvis House Veteran's Program was visited by a University of Cincinnati research team on October 26, 2006. At the time of the visit, there were 22 residents. Tom McPeek was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via biweekly resident meetings and the director's cookout group to offenders in the program.
- The program is well established and supported by the criminal justice community.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- Funding is stable and adequate, so that the program can be operated as designed.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- Staff should receive clinical supervision by a licensed professional and attend clinical staff meetings to review cases at least bimonthly.

- More staff training, especially initial training, should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program identifies and follows rational exclusionary criteria.
- The program utilizes the Level of Services Inventory-Revised (LSI-R) to assess both risk level and a range of criminogenic need factors for all residents admitted to the program.
- The program uses two additional tools to further assess criminogenic needs including the How I Think criminal attitude assessment and a substance abuse questionnaire.
- The program provides re-assessment of risk and need factors using the LSI-R.
- Staff were formally trained on the LSI-R.

Recommendations for Improvement:

- Approximately 20% of the offenders the program receives were viewed as inappropriate for the services being provided. The program should have more screening power to be sure they can meet the needs of the offenders they serve.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- When assessing substance abuse need, the program should consider using a validated tool such as the Substance Abuse Subtle Screening Inventory (SASSI) or the Addiction Severity Index (ASI).
- According to the files, just over 40% of the offenders in the program were low risk. At least 70% of the program participants should be moderate to high risk.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10 and all groups are monitored from beginning to end by staff.
- Structured curricula are used for group treatment.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via the use of drug testing, schedules/logs, regular phone calls in and out and site checks.
- There is a formal mechanism that gives offenders the opportunity to provide input into the structure of the program via a community meeting.
- The types of rewards and procedure for administering rewards appear appropriate. Likewise, the types of punishers used by the program are appropriate.
- The program completion rate is 68%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some are non-criminogenic such as mental health issues, physical health, trauma, economic/social needs and racial/ethnicity issues. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- Although most of the treatment is based upon a cognitive-behavioral model, the program should use this model to address substance abuse rather than an education model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program and to vary the intensity and duration of treatment by risk.
- Although offenders are assigned to groups based on need factors, risk and responsivity should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior should be increased.
- The procedure for administering punishers could be improved by ensuring that punishers are based upon demonstration of an antisocial behavior, and that they are individualized, undesirable to the offenders, varied, immediately applied and not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- Although the program offers family intervention, only about 5% of families participate in such services. Thus, effort should be made to increase family participation in treatment.
- While offenders are referred to external providers for aftercare services, participation is not required by the program and it is unclear how many offenders choose to participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, re-assessments, and staff feedback.
- The program obtains recidivism data on discharged offenders.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures in the outcome evaluation.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.

Descriptive Statistics for ALVIS HOUSE VETERANS by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (69)	50.0 (69)
Female	N/A	N/A
Race		
White	50.0 (63)	50.0 (63)
Non-white	50.0 (6)	50.0 (6)
Marital Status		
Married	56.3 (9)	43.8 (7)
Single/not married	50.0 (60)	50.0 (60)
Age Category		
16 to 23	42.9 (18)	57.1 (24)
24 to 30	45.5 (15)	54.5 (18)
31-39	57.7 (15)	42.3 (11)
40+	56.8 (21)	43.2 (16)
Mean Age*	35.8	32.0
SD	10.8	10.7

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE VETERANS by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.2	1.0
SD	1.3	1.4
Previous Conviction*	**% (N)**	**% (N)**
No	58.9 (43)	41.1 (30)
Yes	40.0 (26)	60.0 (39)
Offense Level		
Felony 1	83.3 (5)	16.7 (1)
Felony 2	61.3 (19)	38.7 (12)
Felony 3	44.1 (15)	55.9 (19)
Felony 4	53.6 (15)	46.4 (13)
Felony 5/M	38.5 (15)	61.5 (24)
Offense Category		
Violent/person	51.0 (26)	49.0 (25)
Sex	N/A	N/A
Drugs	44.7 (17)	55.3 (21)
Property	52.5 (21)	47.5 (19)
Traffic/DUI	100.0 (2)	0.0 (0)
Other	42.9 (3)	57.1 (4)
Substance Abuse Problem		
No	30.0 (3)	70.0 (7)
Yes	51.6 (66)	48.4 (62)
Employment Problem*		
No	39.5 (30)	60.5 (46)
Yes	62.9 (39)	37.1 (23)
Emotional Problem		
No	48.2 (41)	51.8 (44)
Yes	52.8 (28)	47.2 (25)
Risk Categories		
Low	50.0 (6)	50.0 (6)
Moderate	50.0 (49)	50.0 (49)
High	50.0 (14)	50.0 (14)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	32.7	32.4
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ALVIS HOUSE VETERANS by Termination Status

Variable	HWH Successful % (N)	HWH Unsuccessful % (N)
Gender		
Male	100.0 (45)	100.0 (24)
Female	N/A	N/A
Race		
White	88.9 (40)	95.8 (23)
Non-white	11.1 (5)	4.2 (1)
Marital Status		
Married	11.1 (5)	16.7 (4)
Single/not married	88.9 (40)	83.3 (20)
Age Category		
16 to 23	24.4 (11)	29.2 (7)
24 to 30	20.0 (9)	25.0 (6)
31-39	20.0 (9)	25.0 (6)
40+	35.6 (16)	20.8 (5)
Mean Age	36.5	34.3
SD	11.2	9.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ALVIS HOUSE VETERANS by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.0	1.4
SD	1.2	1.3
Previous Conviction*	% (N)	% (N)
No	71.1 (32)	45.8 (11)
Yes	28.9 (13)	54.2 (13)
Offense Level		
Felony 1	6.7 (3)	8.3 (2)
Felony 2	28.9 (13)	25.0 (6)
Felony 3	20.0 (9)	25.0 (6)
Felony 4	17.8 (8)	29.2 (7)
Felony 5/M	26.7 (12)	12.5 (3)
Offense Category		
Violent/person	37.8 (17)	37.5 (9)
Sex		
Drugs	26.7 (12)	20.8 (5)
Property	31.1 (14)	29.2 (7)
Traffic/DUI	0.0 (0)	8.3 (2)
Other	4.4 (2)	4.2 (1)
Substance Abuse Problem		
No	4.4 (2)	4.2 (1)
Yes	95.6 (43)	95.8 (23)
Employment Problem		
No	48.9 (22)	33.3 (8)
Yes	51.1 (23)	66.7 (16)
Emotional Problem		
No	60.0 (27)	58.3 (14)
Yes	40.0 (18)	41.7 (10)
Risk Categories*		
Low	13.3 (6)	0.0 (0)
Moderate	73.3 (33)	66.7 (16)
High	13.3 (6)	33.3 (8)
Average risk scores	Mean (N)	Mean (N)
Males*	30.3	37.2
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Alvis House Veterans Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	30.4 (21)	0.0 (0)	32.7 (16)	35.7 (5)
Comparison	29.0 (20)	16.7 (1)	30.6 (15)	28.6 (4)
Successful Completers				
Treatment	28.9 (13)	0.0 (0)	27.3 (9)	66.7 (4)
Comparison	28.9 (13)	16.7 (1)	30.3 (10)	33.3 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Alvis House Veterans Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.8 (24)	0.0 (0)	36.7 (18)	42.9 (6)
Comparison	31.9 (22)	16.7 (1)	34.7 (17)	28.6 (4)
Successful Completers				
Treatment	33.3 (15)	0.0 (0)	33.3 (11)	66.7 (4)
Comparison	31.1 (14)	16.7 (1)	33.3 (11)	33.3 (2)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Alvis House Veterans Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.6 (28)	0.0 (0)	38.8 (19)	64.3 (9)
Comparison	30.4 (21)	16.7 (1)	32.7 (16)	28.6 (4)
Successful Completers				
Treatment	31.3 (14)	0.0 (0)	30.3 (10)	66.7 (4)
Comparison	28.9 (13)	16.7 (1)	30.3 (10)	33.3 (2)

*Difference significant at p<.05

Accepting Responsibility, Changing Attitudes (ARCA)

Accepting Responsibility, Changing Attitudes (ARCA) is a Halfway House located in Cleveland, Ohio. This facility serves adult females placed on probation or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). ARCA has been in operation since 2005 when they assumed the responsibility of managing the halfway house previously operated by Goodwill Industries. The facility has a capacity to serve 28 women. This facility is funded by ODRC. The program refers out for substance abuse and employment services and offers case management (life coach and advocate) services internally. ARCA was visited by a University of Cincinnati research team on October 5, 2006. At the time of the visit, there were 27 female residents. Gladys Hall and Linda Ziebold were the identified program directors.

Program Leadership/Development

Strengths:

- The program directors are involved in selecting, training, and supervising staff.
- The program directors provide direct services to residents via regularly conducting groups.
- The program is valued by the criminal justice community and community at large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- The program should regularly consult the literature related to effective interventions with offenders and disseminate such literature to facility staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings and agency meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff are supportive of the goals of treatment and follow ethical guidelines.
- Staff turnover is not a problem for ARCA.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as reinforcement skills, effective use of authority and appropriate interaction with residents.
- Staff should receive clinical supervision by a licensed professional.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff have a limited amount of input into the structure of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program uses the Ohio Risk Assessment to assess offender risk levels.
- The program uses the ARCA Dynamic Needs Assessment to assess various criminogenic needs.

Recommendations for Improvement:

- The program should identify and follow rational exclusionary criteria.
- The program should use a needs assessment that is validated and normed on the population.
- Although the program uses a psychosocial assessment, there should also be a spectrum of standardized responsivity assessments to assess areas such as motivation, personality and learning styles. Examples include the Beck Depression and Anxiety Inventory, the Jesness or MMPI to assess personality, or the TABE to assess educational needs.
- Offender risk levels should be formally tracked and at least 70 percent of the women in the program should be of moderate or higher risk.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program, such as a suggestion box and community meeting.
- Women are appropriately monitored while in the community.
- The types of rewards and punishers used by the program appear appropriate as is the process by which residents are rewarded.
- Staff are trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 67%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature, such as addressing antisocial attitudes, vocational and educational needs, and family affection/problem solving, many are also non-criminogenic such as self-esteem, mental health, physical health, and grief and trauma. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While one therapeutic model used by the program is a cognitive-behavioral model, the program also uses an eclectic and systems approach to treating the women.
- The emphasis on structured skill building, including the use of modeling and role play needs to be increased. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for groups.

- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Offenders should also be matched to interventions based on need and responsivity factors.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- While there is a range of rewards for staff to choose from to reinforce offenders, the frequency of use of rewards should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished for rule violations could be improved by ensuring that punishers are immediate, consistently applied, individualized, undesirable to the offenders, match the level of the behavior and that they are used for the purpose of extinguishing unwanted behavior.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or other means of determining offender improvement.
- Although the program offers family intervention, only about 20% of ARCA families participate in these interventions. Thus the program should attempt to provide incentives to increase family participation and ensure that families are being trained in providing prosocial support for the offenders.
- Aftercare services should be provided to all residents who complete treatment. Currently only about 40% of offenders are referred to external providers for aftercare.

Quality Assurance

Strengths:

- The program is licensed by the American Correctional Association.
- Internal quality assurance measures include file reviews, client surveys, and staff feedback.

Recommendations for Improvement:

- Internal quality assurance could be enhanced if there were a clinical supervisor to provide staff feedback on group facilitation skills.
- In order to improve external quality assurance, the program should provide increased monitoring of external providers including regular receipt of progress notes and monitoring of service delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for ARCA by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (79)	50.0 (79)
Race		
White	50.0 (44)	50.0 (44)
Non-white	50.0 (35)	50.0 (35)
Marital Status		
Married	50.0 (14)	50.0 (14)
Single/not married	52.8 (65)	47.2 (58)
Age Category		
16 to 23	46.4 (13)	53.6 (15)
24 to 30	40.0 (14)	60.0 (21)
31-39	52.4 (33)	47.6 (30)
40+	59.4 (19)	40.6 (13)
Mean Age	36.5	34.3
SD	8.5	9.3

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ARCA by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.7	0.9
SD	1.4	1.6
Previous Conviction*	**% (N)**	**% (N)**
No	69.1 (56)	30.9 (25)
Yes	29.9 (23)	70.1 (54)
Offense Level		
Felony 1	75.0 (15)	25.0 (5)
Felony 2	40.0 (8)	60.0 (12)
Felony 3	40.7 (22)	59.3 (32)
Felony 4	50.0 (10)	50.0 (10)
Felony 5/M	54.5 (24)	45.5 (20)
Offense Category		
Violent/person	50.8 (30)	49.2 (29)
Sex	50.0 (5)	50.0 (5)
Drugs	58.1 (18)	41.9 (13)
Property	53.3 (24)	46.7 (21)
Traffic/DUI	N/A	N/A
Other	15.4 (2)	84.6 (11)
Substance Abuse Problem		
No	37.9 (11)	62.1 (18)
Yes	52.7 (68)	47.3 (61)
Employment Problem		
No	47.4 (18)	52.6 (20)
Yes	50.8 (61)	49.2 (59)
Emotional Problem*		
No	38.6 (22)	61.4 (35)
Yes	56.4 (57)	43.6 (44)
Risk Categories		
Low	50.0 (16)	50.0 (16)
Moderate	50.0 (49)	50.0 (49)
High	50.0 (14)	50.0 (14)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	25.3	25.0
Overall	N/A	N/A

*Difference significant at $p < .05$

Descriptive Statistics for ARCA by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (45)	100.0 (34)
Race*		
White	44.4 (20)	70.6 (24)
Non-white	55.6 (25)	29.4 (10)
Marital Status		
Married	17.8 (8)	17.6 (60
Single/not married	82.2 (37)	82.4 (28)
Age Category*		
16 to 23	13.3 (6)	20.6 (7)
24 to 30	8.9 (4)	29.4 (10)
31-39	46.7 (21)	35.3 (12)
40+	31.1 (14)	14.7 (5)
Mean Age*	38.7	33.7
SD	8.6	7.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ARCA by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.7	1.7
SD	1.2	1.6
Previous Conviction	**% (N)**	**% (N)**
No	75.6 (34)	64.7 (22)
Yes	24.4 (11)	35.3 (12)
Offense Level		
Felony 1	24.4 (11)	11.8 (4)
Felony 2	8.9 (4)	11.8 (4)
Felony 3	31.1 (14)	23.5 (8)
Felony 4	6.7 (3)	20.6 (7)
Felony 5/M	28.9 (13)	32.4 (11)
Offense Category		
Violent/person	46.7 (21)	26.5 (9)
Sex	4.4 (2)	8.8 (3)
Drugs	17.8 (8)	29.4 (10)
Property	28.9 (13)	32.4 (11)
Traffic/DUI	N/A	N/A
Other	2.2 (1)	2.9 (1)
Substance Abuse Problem		
No	20.0 (9)	5.9 (2)
Yes	80.0 (36)	94.1 (32)
Employment Problem*		
No	31.1 (14)	11.8 (4)
Yes	68.9 (31)	88.2 (30)
Emotional Problem		
No	33.3 (15)	20.6 (7)
Yes	66.7 (30)	79.4 (27)
Risk Categories		
Low	26.7 (12)	11.8 (4)
Moderate	57.8 (26)	67.6 (23)
High	15.6 (7)	20.6 (7)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	24.1	26.7
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for ARCA

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	24.1 (19) *	0.0 (0)	28.6 (14) *	35.7 (5)
Comparison	11.4 (9)	6.3 (1)	10.2 (5)	21.4 (3)
Successful Completers				
Treatment	17.8 (8)	0.0 (0)	23.1 (6)	28.6 (2)
Comparison	15.6 (7)	8.3 (1)	15.4 (4)	28.6 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for ARCA

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.8 (22)	0.0 (0)	34.7 (17) *	35.7 (5)
Comparison	17.7 (14)	6.3 (1)	16.3 (8)	35.7 (5)
Successful Completers				
Treatment	20.0 (9)	0.0 (0)	26.9 (7)	28.6 (2)
Comparison	20.0 (9)	8.3 (1)	19.2 (5)	42.9 (3)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for ARCA

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	24.1 (19)	0.0 (0)	22.4 (11)	57.1 (8)
Comparison	22.8 (18)	6.3 (1)	18.4 (9)	57.1 (8)
Successful Completers				
Treatment	17.8 (8)	0.0 (0)	19.2 (5)	42.9 (3)
Comparison	20.0 (9)	8.3 (1)	15.4 (4)	57.1 (4)

*Difference significant at p<.05

Community Assessment and Treatment Services (CATS)

Southeast Women's Center—Female Residential Treatment Program (RTP)

Community Assessment and Treatment Services is a Halfway House located in Cleveland, Ohio. CATS operates three programs: a male residential treatment program, a male therapeutic community and a female residential treatment program. This facility services probationers, county jail inmates and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Community Assessment and Treatment Center has been in operation since 1992. This facility is funded by ODRC, ODADAS, Cuyahoga County, and grants. The female RTP can serve up to 30 women. Services include substance abuse recovery, mental health, trauma treatment, employment readiness, anger management, parenting, life-skills and self-esteem. Community Assessment and Treatment Services was visited by a University of Cincinnati research team on August 22, 2006. At the time of the visit, there were 23 women in the female RTP. Darla Ginter was the identified program director.

Program Leadership/Development

Strengths:

- The program director has a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should provide direct services to offenders on a regular basis via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding for the program is somewhat unstable.
- Males and female should receive separate treatment.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Staff should receive additional initial and ongoing training and more of the staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment and the Ohio Needs to asses risk and identify criminogenic need factors for all residents.
- The program uses the CIAI and Level of Care assessment to assess substance abuse need.
- The program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- While the program uses a pre-admission screening to screen for medical and mental health issues, there should be a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles.
- The assessments used to assess substance abuse are not validated tools.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program.
- The types of rewards used by the program appear appropriate.
- The process by which offenders are reinforced appears appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- The program provides family sessions to residents. Approximately 75% of the family members participate in such sessions.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature (i.e., substance abuse, employment and anger management), most are non-criminogenic such as mental health, victimization, parenting, life-skills, horticulture and self-esteem. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While some of the treatment uses cognitive-behavioral principles, the program also relies heavily on a 12-step/self-help approach to treating offenders.

- While nearly all groups utilize structured skill building via modeling and role play, the amount of time groups spend using these techniques needs to be increased. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Staff should play an active role in facilitating all groups.
- The program's average length of stay is 2 months, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, phone calls out and breathalyzers), the monitoring mechanisms should be enhanced.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased. Reinforcers should outweigh punishers by a ratio of at least 4:1.
- Some of the types of punishers used by the program are not appropriate, such as silence and isolation. Likewise the process by which offenders are punished could be improved by improving staff consistency, ensuring that the punishers match the infractions, disallowing escape from punishers, immediately applying the punisher following the infraction and teaching prosocial alternatives.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 89%. This rate should fall between 65 and 85%.
- While aftercare services are provided by the program, only about 25% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- Contractual providers are regularly observed delivering treatment.
- The program has been formally evaluated in the past and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- While the program uses some internal quality review mechanisms including file review, client surveys, and staff feedback, a program manager does not observe the delivery of treatment.
- The program should provide increased monitoring of outside providers in order to improve external quality assurance.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CATS FEMALE RTP by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (61)	50.0 (61)
Race		
White	50.0 (36)	50.0 (36)
Non-white	50.0 (25)	50.0 (25)
Marital Status		
Married	63.6 (7)	36.4 (4)
Single/not married	54.0 (54)	46.0 (46)
Age Category		
16 to 23	57.1 (12)	42.9 (9)
24 to 30	60.0 (15)	40.0 (10)
31-39	41.0 (16)	59.0 (23)
40+	48.6 (18)	51.4 (19)
Mean Age	35.7	36.2
SD	9.4	9.7

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CATS FEMALE RTP by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.3	1.0
SD	1.9	1.4
Previous Conviction*	% (N)	% (N)
No	58.2 (46)	41.8 (33)
Yes	34.9 (15)	65.1 (28)
Offense Level		
Felony 1	66.7 (4)	33.3 (2)
Felony 2	60.0 (6)	40.0 (4)
Felony 3	45.2 (14)	54.8 (17)
Felony 4	45.5 (10)	54.5 (12)
Felony 5/M	50.9 (27)	49.1 (26)
Offense Category*		
Violent/person	54.8 (17)	45.2 (14)
Sex	50.0 (1)	50.0 (1)
Drugs	60.4 (29)	39.6 (19)
Property	29.0 (9)	71.0 (22)
Traffic/DUI	100.0 (3)	0.0 (0)
Other	28.6 (2)	71.4 (5)
Substance Abuse Problem*		
No	8.3 (1)	91.7 (11)
Yes	54.5 (60)	45.5 (50)
Employment Problem*		
No	10.3 (3)	89.7 (26)
Yes	62.4 (58)	37.6 (35)
Emotional Problem*		
No	36.4 (20)	63.6 (35)
Yes	61.2 (41)	38.8 (26)
Risk Categories		
Low	50.0 (12)	50.0 (12)
Moderate	50.0 (41)	50.0 (41)
High	50.0 (8)	50.0 (8)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	25.1	23.9
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CATS FEMALE RTP by Termination Status

	HWH	
Variable	**Successful**	**Unsuccessful**
	% (N)	**% (N)**
Gender		
Male	N/A	N/A
Female	100.0 (53)	100.0 (8)
Race		
White	54.7 (29)	87.5 (7)
Non-white	45.3 (24)	12.5 (1)
Marital Status		
Married	11.3 (6)	12.5 (1)
Single/not married	88.7 (47)	87.5 (7)
Age Category		
16 to 23	17.0 (9)	37.5 (3)
24 to 30	28.3 (15)	0.0 (0)
31-39	26.4 (14)	25.0 (2)
40+	28.3 (15)	37.5 (3)
Mean Age	35.7	35.5
SD	9.0	12.7

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for CATS FEMALE RTP by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.3	1.6
SD	1.9	2.0
Previous Conviction	% (N)	% (N)
No	75.5 (40)	75.0 (6)
Yes	24.5 (13)	25.0 (2)
Offense Level		
Felony 1	5.7 (3)	12.5 (1)
Felony 2	11.3 (6)	0.0 (0)
Felony 3	20.8 (11)	37.5 (3)
Felony 4	18.9 (10)	0.0 (0)
Felony 5/M	43.4 (23)	50.0 (4)
Offense Category		
Violent/person	30.2 (16)	12.5 (1)
Sex	0.0 (0)	12.5 (1)
Drugs	47.2 (25)	50.0 (4)
Property	13.2 (7)	25.0 (2)
Traffic/DUI	5.7 (3)	0.0 (0)
Other	3.8 (2)	0.0 (0)
Substance Abuse Problem		
No	0.0 (0)	12.5 (1)
Yes	100.0 (53)	87.5 (7)
Employment Problem		
No	5.7 (3)	0.0 (0)
Yes	94.3 (50)	100.0 (8)
Emotional Problem		
No	30.2 (16)	50.0 (4)
Yes	69.8 (37)	50.0 (4)
Risk Categories		
Low	20.8 (11)	12.5 (1)
Moderate	66.0 (35)	75.0 (6)
High	13.2 (7)	12.5 (1)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	24.9	26.4
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Female RTP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	9.8 (6)	0.0 (0)	9.8 (4)	25.0 (2)
Comparison	13.1 (8)	8.3 (1)	9.8 (4)	37.5 (3)
Successful Completers				
Treatment	9.4 (5)	0.0 (0)	11.4 (4)	14.3 (1)
Comparison	15.1 (8)	9.1 (1)	11.4 (4)	42.9 (3)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Female RTP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	11.5 (7)	0.0 (0)	12.2 (5)	25.0 (2)
Comparison	21.3 (13)	8.3 (1)	19.5 (8)	50.0 (4)
Successful Completers				
Treatment	11.3 (6)	0.0 (0)	14.3 (5)	14.3 (1)
Comparison	22.6 (12)	9.1 (1)	20.0 (7)	57.1 (4)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Female RTP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	19.7 (12)	8.3 (1)	17.1 (7)	50.0 (4)
Comparison	24.6 (15)	8.3 (1)	24.4 (10)	50.0 (4)
Successful Completers				
Treatment	17.0 (9)	9.1 (1)	14.3 (5)	42.9 (3)
Comparison	22.6 (12)	9.1 (1)	22.9 (8)	42.9 (3)

*Difference significant at p<.05

Community Assessment and Treatment Services

Male Residential Treatment Program (RTP) and Therapeutic Community (TC)

Community Assessment and Treatment Services is a Halfway House located in Cleveland, Ohio. CATS operates three programs: a male residential treatment program, a male therapeutic community and a female residential treatment program. This facility services probationers, county jail inmates and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Community Assessment and Treatment Center has been in operation since 1992. This facility is funded by ODRC, ODADAS, Cuyahoga County, and grants. The male RTP can serve up to 38 men while the TC houses 28 men. Services include substance abuse recovery, mental health, trauma treatment, and employment readiness. Community Assessment and Treatment Services was visited by a University of Cincinnati research team on August 22, 2006. At the time of the visit, there were 30 male offenders in the male RTP and 27 men in the TC. Darla Ginter was the identified program director.

Program Leadership/Development

Strengths:

- The program director has a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should provide direct services to offenders on a regular basis via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding for the program is somewhat unstable.
- Males and female should receive separate treatment.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Staff should receive additional initial and ongoing training and more of the staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment and the Ohio Needs to asses risk and identify criminogenic need factors for all residents.
- The program uses the CIAI and Level of Care assessment to assess substance abuse need.
- The program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- While the program uses a pre-admission screening to screen for medical and mental health issues, there should be a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles.
- The assessments used to assess substance abuse are not validated tools.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program.
- The types of rewards used by the program appear appropriate.
- The program completion rate is 82% for the RTP and 73% for the TC, which falls within the recommended range of 65 to 85%.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The majority of program interventions should focus on criminogenic needs (i.e. criminal attitude, substance abuse, self-management, family issues, problem solving, and employment). The program targets several non-criminogenic need areas such as trauma, low self-esteem, mental health, and economic needs.
- While some of the treatment uses cognitive-behavioral principles, the program also relies heavily on a 12-step, restorative justice and therapeutic community model.
- The program should increase efforts to monitor offenders while on community passes.
- The RTP program's average length of stay is 2 months, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment. The TC has an appropriate length of stay.

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be implemented across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups. Two of the four groups offered are unstructured.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- Staff should be matched to groups and clients based on experience, skill level, and motivation to provide a particular treatment or work with a particular type of offender.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Reinforcers should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized. Furthermore, residents should clearly know why they are being rewarded.
- The therapeutic community should discontinue the use of shaming techniques to punish inappropriate behavior. Additionally, staff should issue all punishers.
- Punishers should be immediate and appropriately match infractions. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- Staff should take an active role in facilitating all groups.
- While the program attempts to provide a family intervention component, only about 15% of the families participate and there is no structured curriculum designed to teach families skills.
- While aftercare services are provided by the program, only about 25% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program has been formally evaluated in the past and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- While the program uses some internal quality review mechanisms including file review, client surveys, and staff feedback, a program manager does not observe the delivery of treatment.
- The program should also provide regular monitoring of contractual and external treatment providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CATS MALE RTP by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	50.0 (124)	50.0 (124)
Female	N/A	N/A
Race		
White	50.0 (42)	50.0 (42)
Non-white	50.0 (82)	50.0 (82)
Marital Status		
Married	40.0 (10)	60.0 (15)
Single/not married	52.8 (114)	47.2 (102)
Age Category		
16 to 23	50.0 (35)	50.0 (35)
24 to 30	44.6 (25)	55.4 (31)
31-39	43.9 (25)	56.1 (32)
40+	60.0 (39)	40.0 (26)
Mean Age	35.6	33.3
SD	10.8	10.2

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CATS MALE RTP by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.6	1.6
SD	2.7	2.0
Previous Conviction*	**% (N)**	**% (N)**
No	67.6 (75)	32.4 (36)
Yes	35.8 (49)	64.2 (88)
Offense Level		
Felony 1	60.9 (14)	39.1 (9)
Felony 2	60.5 (26)	39.5 (17)
Felony 3	41.2 (28)	58.8 (40)
Felony 4	37.8 (17)	62.2 (28)
Felony 5/M	56.5 (39)	43.5 (30)
Offense Category*		
Violent/person	55.9 (52)	44.1 (41)
Sex	50.0 (1)	50.0 (1)
Drugs	58.9 (43)	41.1 (30)
Property	44.4 (20)	55.6 (25)
Traffic/DUI	100.0 (3)	0.0 (0)
Other	15.6 (5)	84.4 (27)
Substance Abuse Problem*		
No	14.3 (4)	85.7 (24)
Yes	54.5 (120)	45.5 (100)
Employment Problem*		
No	35.1 (39)	64.9 (72)
Yes	62.0 (85)	38.0 (52)
Emotional Problem		
No	47.3 (78)	52.7 (87)
Yes	55.4 (46)	44.6 (37)
Risk Categories		
Low	50.0 (5)	50.0 (5)
Moderate	50.0 (77)	50.0 (77)
High	50.0 (42)	50.0 (42)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	37.6	35.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CATS MALE RTP by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (72)	100.0 (52)
Female	N/A	N/A
Race		
White	33.3 (24)	34.6 (18)
Non-white	66.7 (48)	65.4 (34)
Marital Status		
Married	9.7 (7)	5.8 (3)
Single/not married	90.3 (65)	94.2 (49)
Age Category		
16 to 23	29.2 (21)	26.9 (14)
24 to 30	15.3 (11)	26.9 (14)
31-39	18.1 (13)	23.1 (12)
40+	37.5 (27)	23.1 (12)
Mean Age	36.8	34.1
SD	11.6	9.5

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CATS MALE RTP by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	2.3	3.1
SD	2.1	3.3
Previous Conviction	% (N)	% (N)
No	56.9 (41)	65.4 (34)
Yes	43.1 (31)	34.6 (18)
Offense Level		
Felony 1	12.5 (9)	9.6 (5)
Felony 2	20.8 (15)	21.2 (11)
Felony 3	20.8 (15)	25.0 (13)
Felony 4	11.1 (8)	17.3 (9)
Felony 5/M	34.7 (25)	26.9 (14)
Offense Category		
Violent/person	43.1 (31)	40.4 (21)
Sex	0.0 (0)	1.9 (1)
Drugs	40.3 (29)	26.9 (14)
Property	9.7 (7)	25.0 (13)
Traffic/DUI	4.2 (3)	0.0 (0)
Other	2.8 (2)	5.8 (3)
Substance Abuse Problem		
No	2.8 (2)	3.8 (2)
Yes	97.2 (70)	96.2 (50)
Employment Problem*		
No	41.7 (30)	17.3 (9)
Yes	58.3 (42)	82.7 (43)
Emotional Problem		
No	65.3 (47)	59.6 (31)
Yes	34.7 (25)	40.4 (21)
Risk Categories*		
Low	6.9 (5)	0.0 (0)
Moderate	69.4 (50)	51.9 (27)
High	23.6 (17)	48.1 (25)
Average risk scores	Mean (N)	Mean (N)
Males*	35.1	41.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male RTP

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.3 (45)	40.0 (2)	29.9 (23)	47.6 (20)
Comparison	37.9 (47)	20.0 (1)	32.5 (25)	50.0 (21)
Successful Completers				
Treatment	27.8 (20)	40.0 (2)	24.0 (12)	35.3 (6)
Comparison	33.3 (24)	20.0 (1)	34.0 (17)	35.3 (6)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male RTP

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.7 (48)	40.0 (2)	32.5 (25)	50.0 (21)
Comparison	44.4 (55)	20.0 (1)	36.4 (28)	61.9 (26)
Successful Completers				
Treatment	29.2 (21)	40.0 (2)	26.0 (13)	35.5 (6)
Comparison	37.5 (27)	20.0 (1)	38.0 (19)	41.2 (7)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male RTP

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.6 (59) *	20.0 (1)	41.6 (32)	61.9 (26) *
Comparison	31.5 (39)	0.0 (0)	31.2 (24)	35.7 (15)
Successful Completers				
Treatment	33.3 (24)	20.0 (1)	32.0 (16)	41.2 (7)
Comparison	31.9 (23)	0.0 (0)	36.0 (18)	29.4 (5)

*Difference significant at p<.05

CATS MALE THERAPEUTIC COMMUNITY (TC)

Descriptive Statistics for CATS MALE TC by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (72)	50.0 (72)
Female	N/A	N/A
Race		
White	50.0 (23)	50.0 (23)
Non-white	50.0 (49)	50.0 (49)
Marital Status		
Married	33.3 (5)	66.7 (10)
Single/not married	52.3 (67)	47.7 (61)
Age Category		
16 to 23	45.9 (17)	54.1 (20)
24 to 30	55.6 (15)	44.4 (12)
31-39	50.0 (19)	50.0 (19)
40+	50.0 (21)	50.0 (21)
Mean Age	35.6	34.2
SD	9.4	11.1

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CATS MALE TC by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2.2	1.5
SD	2.0	1.8
Previous Conviction*	% (N)	% (N)
No	64.9 (50)	35.1 (27)
Yes	32.8 (22)	67.2 (45)
Offense Level*		
Felony 1	94.7 (18)	5.3 (1)
Felony 2	58.8 (10)	41.2 (7)
Felony 3	48.7 (19)	51.3 (20)
Felony 4	34.5 (10)	65.5 (19)
Felony 5/M	37.5 (15)	62.5 (25)
Offense Category		
Violent/person	57.5 (23)	42.5 (17)
Sex	N/A	N/A
Drugs	55.4 (36)	44.6 (29)
Property	37.5 (9)	62.5 (15)
Traffic/DUI	0.0 (0)	100.0 (1)
Other	28.6 (4)	71.4 (10)
Substance Abuse Problem*		
No	18.8 (3)	81.3 (13)
Yes	53.9 (69)	46.1 (59)
Employment Problem*		
No	38.5 (25)	61.5 (40)
Yes	59.5 (47)	40.5 (32)
Emotional Problem		
No	49.0 (50)	51.0 (52)
Yes	52.4 (22)	47.6 (20)
Risk Categories		
Low	50.0 (2)	50.0 (2)
Moderate	50.0 (51)	50.0 (51)
High	50.0 (19)	50.0 (19)
Average risk scores	Mean (N)	Mean (N)
Males	34.7	35.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CATS MALE TC by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (60)	100.0 (12)
Female	N/A	N/A
Race		
White	30.0 (18)	41.7 (5)
Non-white	70.0 (42)	58.3 (7)
Marital Status		
Married	5.0 (3)	16.7 (2)
Single/not married	95.0 (57)	83.3 (10)
Age Category		
16 to 23	26.7 (160	8.3 (1)
24 to 30	23.3 (14)	8.3 (1)
31-39	21.7 (13)	50.0 (6)
40+	28.3 (17)	33.3 (4)
Mean Age	34.9	39.3
SD	9.6	7.7

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for CATS MALE TC by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.9	3.7
SD	1.8	2.5
Previous Conviction*	% (N)	% (N)
No	78.3 (47)	25.0 (3)
Yes	21.7 (13)	75.0 (9)
Offense Level		
Felony 1	20.0 (12)	50.0 (6)
Felony 2	11.7 (7)	25.0 (3)
Felony 3	30.0 (18)	8.3 (1)
Felony 4	16.7 (10)	0.0 (0)
Felony 5/M	21.7 (13)	16.7 (2)
Offense Category*		
Violent/person	23.3 (14)	75.0 (9)
Sex	N/A	N/A
Drugs	56.7 (34)	16.7 (2)
Property	13.3 (8)	8.3 (1)
Traffic/DUI	N/A	N/A
Other	6.7 (4)	0.0 (0)
Substance Abuse Problem		
No	3.3 (2)	8.3 (1)
Yes	96.7 (58)	91.7 (11)
Employment Problem*		
No	40.0 (24)	8.3 (1)
Yes	60.0 (36)	91.7 (11)
Emotional Problem		
No	70.0 (42)	66.7 (8)
Yes	30.0 (18)	33.3 (4)
Risk Categories		
Low	3.3 (2)	0.0 (0)
Moderate	75.0 (45)	50.0 (6)
High	21.7 (13)	50.0 (6)
Average risk scores	Mean (N)	Mean (N)
Males	9.8	11.4
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male TC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	23.6 (17)	0.0 (0)	23.5 (12)	26.3 (5)
Comparison	37.5 (27)	50.0 (1)	35.3 (18)	42.1 (8)
Successful Completers				
Treatment	23.3 (14)	0.0 (0)	22.2 (10)	30.8 (4)
Comparison	35.0 (21)	50.0 (1)	31.1 (14)	46.2 (6)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male TC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.2 (21)	0.0 (0)	27.5 (14)	36.8 (7)
Comparison	45.8 (33)	50.0 (1)	43.1 (22)	52.6 (10)
Successful Completers				
Treatment	28.3 (17) *	0.0 (0)	26.7 (12)	38.5 (5)
Comparison	45.0 (27)	50.0 (1)	40.0 (18)	61.5 (8)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Comm Assessm and Tx Srvces (CATS) Male TC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.7 (25)	0.0 (0)	33.3 (17)	42.1 (8)
Comparison	31.9 (23)	50.0 (1)	29.4 (15)	36.8 (7)
Successful Completers				
Treatment	33.3 (20)	0.0 (0)	33.3 (15)	38.5 (5)
Comparison	28.3 (17)	50.0 (1)	26.7 (12)	30.8 (4)

*Difference significant at p<.05

Community Corrections Association—Residential Treatment Center I

Community Corrections Association –Residential Treatment Center I is a Halfway House located in Youngstown, Ohio. This facility serves adult males and females placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC) as well as Federal Transitional Control offenders. Community Corrections Association – RTC I has been in operation since 1975 and is contracted to serve 29 men and 20 women. This facility is funded by ODRC and the Federal Government. Services include anger management, cognitive restructuring, skill building, substance abuse treatment, parenting and employment readiness. Female offenders are also provided a gender-specific cognitive-behavioral treatment program. Community Corrections Association –RTC I was visited by a University of Cincinnati research team on August 10, 2006. At the time of the visit, there were 28 men and 19 women. Matt Wallace was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in hiring and supervising program staff.
- The program director provides direct services, via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community and community-at-large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- Treatment groups for men and women are held separately and they do not share living space.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend treatment team meetings regularly as well as agency meetings.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover does not appear to be a problem.

Recommendations for Improvement:

- While some staff receive clinical supervision regularly by a licensed professional, not all staff engaging in service delivery are clinically supervised.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the CCA risk assessment to classify offenders.
- The program uses several criminogenic need instruments including the Ohio Needs Assessment, the SASSI, and the DAT substance abuse assessment.
- The program uses the MMPI as a responsivity assessment on all women and some men. Likewise the program assesses educational needs with the TABE and general needs with the Problem ID.
- Approximately 70% of the offenders in the program are moderate or high risk to recidivate.

Recommendations for Improvement:

- The responsivity assessments being used by the program, namely the MMPI and TABE should be regularly used on the men as well as the women.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, problem solving, substance abuse, education and employment).
- While there are elements of the 12-step model, much of the treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community, which include on-site visits to homes or employers.
- Groups were below the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment appears adequate.
- The types of rewards and punishers used by the program appear appropriate.
- Staff are matched to groups based upon personality and desire to provide treatment in a particular area.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some are non-criminogenic such as mental health issues, trauma, and childhood abuse. At least 75% of the treatment focus should be

on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased, particularly in the substance abuse, relapse prevention, employment and parenting groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used consistently for all groups and staff should undergo training on appropriate use of curricula.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The program should institute a structured mechanism for client input into the program, such as a suggestion box, community meeting or resident spokesperson
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved by issuing punishers immediately following the infraction and teaching offenders prosocial alternatives to negative behaviors.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 90%. This rate should fall between 65 and 85%.
- The program should offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 60% of offenders participate in such services. Likewise, aftercare consists of a process group rather than a group designed to practice skills offenders have learned while in the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, and peer reviews.
- The program has been formally evaluated in the past via outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of both contractual and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CCA RTC I by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (25)	50.0 (25)
Female	50.0 (48)	50.0 (48)
Race		
White	50.0 (37)	50.0 (37)
Non-white	50.0 (36)	50.0 (36)
Marital Status*		
Married	23.1 (3)	76.9 (10)
Single/not married	52.6 (70)	47.4 (63)
Age Category		
16 to 23	54.3 (19)	45.7 (16)
24 to 30	47.4 (18)	52.6 (20)
31-39	45.9 (17)	54.1 (20)
40+	52.8 (19)	47.2 (17)
Mean Age	34.3	33.4
SD	10.4	9.9

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for CCA RTC I by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.9	1.0
SD	1.2	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	57.5 (46)	42.5 (34)
Yes	40.9 (27)	59.1 (39)
Offense Level		
Felony 1	40.0 (8)	60.0 (12)
Felony 2	68.8 (11)	31.2 (5)
Felony 3	56.0 (14)	44.0 (11)
Felony 4	54.5 (18)	45.5 (15)
Felony 5/M	42.3 (22)	57.7 (30)
Offense Category		
Violent/person	46.4 (13)	53.6 (15)
Sex	50.0 (7)	50.0 (7)
Drugs	58.8 (30)	41.2 (21)
Property	47.6 (20)	52.4 (22)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	22.2 (2)	77.8 (7)
Substance Abuse Problem		
No	41.2 (7)	58.8 (10)
Yes	51.2 (66)	48.8 (63)
Employment Problem		
No	50.6 (43)	49.4 (42)
Yes	49.2 (30)	50.8 (31)
Emotional Problem		
No	55.1 (38)	44.9 (31)
Yes	45.5 (35)	54.5 (42)
Risk Categories		
Low	50.0 (11)	50.0 (11)
Moderate	50.0 (50)	50.0 (50)
High	50.0 (12)	50.0 (12)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	10.3	11.2
Females	15.2	15.7
Overall	25.5	26.9

*Difference significant at p<.05

Descriptive Statistics for CCA RTC I by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	31.5 (17)	42.1 (8)
Female	68.5 (37)	57.9 (11)
Race		
White	46.3 (25)	63.2 (12)
Non-white	53.7 (29)	36.8 (7)
Marital Status		
Married	5.6 (3)	0.0 (0)
Single/not married	94.4 (51)	100.0 (19)
Age Category*		
16 to 23	16.7 (9)	52.6 (10)
24 to 30	22.2 (12)	31.6 (6)
31-39	25.9 (14)	15.8 (3)
40+	35.2 (19)	0.0 (0)
Mean Age*	36.6	27.5
SD	10.6	6.2

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CCA RTC I by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.9	1.1
SD	1.1	1.4
Previous Conviction	**% (N)**	**% (N)**
No	66.7 (36)	52.6 (10)
Yes	33.3 (18)	47.4 (9)
Offense Level		
Felony 1	11.1 (6)	10.5 (2)
Felony 2	16.7 (9)	10.5 (2)
Felony 3	20.4 (11)	15.8 (3)
Felony 4	24.1 (13)	26.3 (5)
Felony 5/M	27.8 (15)	36.8 (7)
Offense Category		
Violent/person	18.5 (10)	15.8 (3)
Sex	13.0 (7)	0.0 (0)
Drugs	35.2 (19)	57.9 (11)
Property	27.8 (15)	26.3 (5)
Traffic/DUI	1.9 (1)	0.0 (0)
Other	3.7 (2)	0.0 (0)
Substance Abuse Problem		
No	11.1 (6)	5.3 (1)
Yes	88.9 (48)	94.7 (18)
Employment Problem*		
No	72.2 (39)	21.1 (4)
Yes	27.8 (15)	78.9 (15)
Emotional Problem		
No	51.9 (28)	52.6 (10)
Yes	48.1 (26)	47.4 (9)
Risk Categories		
Low	20.4 (11)	.0 (0)
Moderate	66.7 (36)	73.7 (14)
High	13.0 (7)	26.3 (5)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	15	20.4
Females	11.2	15.1
Overall*	10.2	9.5

*Difference significant at $p < .05$

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Comm Corrections Assoc Inc--RTC I

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	11.0 (8)	0.0 (0)	16.0 (8)	0.0 (0)
Comparison	12.3 (9)	0.0 (0)	10.0 (5)	33.3 (4)
Successful Completers				
Treatment	5.6 (3)	0.0 (0)	8.3 (3)	0.0 (0) *
Comparison	14.8 (8)	0.0 (0)	11.1 (4)	57.1 (4)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Comm Corrections Assoc Inc RTC I

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	16.4 (12)	0.0 (0)	20.0 (10)	16.7 (2)
Comparison	24.7 (18)	9.1 (1)	22.0 (11)	50.0 (6)
Successful Completers				
Treatment	7.4 (4) *	0.0 (0)	11.1 (4)	0.0 (0) *
Comparison	24.1 (13)	9.1 (1)	19.4 (7)	71.4 (5)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Comm Corrections Assoc Inc RTC I

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	42.5 (31) *	9.1 (1)	48.0 (24) *	50.0 (6)
Comparison	26.0 (19)	9.1 (1)	24.0 (12)	50.0 (6)
Successful Completers				
Treatment	27.8 (15)	9.1 (1)	33.3 (12)	28.6 (2)
Comparison	29.6 (16)	9.1 (1)	27.8 (10)	71.4 (5)

*Difference significant at p<.05

Community Corrections Association—Residential Treatment Center II

Community Corrections Association –Residential Treatment Center II is a Halfway House located in Youngstown, Ohio. This facility serves adult males placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Community Corrections Association –RTC II has been in operation since 1975 and is contracted to serve 44 men. This facility is funded primarily by ODRC. Services include substance abuse treatment, skill building, life-skills, cognitive restructuring, anger management, parenting, education and employment readiness. Community Corrections Association –RTC II was visited by a University of Cincinnati research team on August 7, 2006. At the time of the visit, there were 38 men. Bill Frease was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in designing the program as it currently operates.
- The program director provides formalized training for staff and he plays an active role in supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises tend to be handled with a problem-solving approach.

Recommendations for Improvement:

- The program director should be involved more in hiring new staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients on a regular basis.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Staff and management should work to resolve any tension or unresolved conflict to increase program harmony.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend treatment team and agency meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines for the program.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff should have more input into the structure of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the CCA risk assessment to classify offenders
- The program uses several criminogenic need instruments including the Ohio Needs Assessment, the SASSI, and a vocational assessment.
- According to a file review, approximately 80% of the offenders in the program are moderate or high risk to recidivate.

Recommendations for Improvement:

- While the program uses responsivity assessments such as the MMPI to test personality and the TABE to assess educational needs, these tools are used on less than a third of the residents. The program does however use the Problem ID and Suicide risk assessment on all offenders.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, relapse prevention, education and employment).
- While there are elements of the 12-step model, much of the treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The types of rewards and punishers used by the program appear appropriate.
- Staff are matched to groups based upon personality and desire to provide treatment in a particular area.
- Group size fell within the maximum recommended facilitator to offender ratio of 1/10.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Structured curricula or manuals should be developed and/or adhered to for all groups. Likewise, staff should be trained on the proper use of curricula (e.g. Thinking for a Change).
- Structured skill building (e.g. modeling and role playing) should be utilized across all groups.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.

- The program should institute a structured mechanism for client input into the program, such as a suggestion box, community meeting or resident spokesperson
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized. As well offenders should clearly know why they are being reinforced.
- The procedure by which offenders are punished could be improved by limiting punishment to engagement in antisocial behavior, varying the types of punishers, ensuring that punishments are not spread out and that escape from punishment cannot occur, and immediately applying the punisher after the antisocial behavior is witnessed.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 90%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- The program should teach offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Aftercare services, beyond referral to AA or NA, should be provided by the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, and supervision of assessments.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- Program managers should formally monitor contractual and external treatment providers on a regular basis.
- The program should collect recidivism data on offenders discharged from the program or contract with an external provider to do so.

Descriptive Statistics for CCA RTC II by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (145)	50.0 (145)
Female	N/A	N/A
Race		
White	50.0 (67)	50.0 (67)
Non-white	50.0 (78)	50.0 (78)
Marital Status		
Married	39.5 (15)	60.5 (23)
Single/not married	52.6 (130)	47.4 (117)
Age Category		
16 to 23	55.4 (41)	44.6 (33)
24 to 30	54.8 (40)	45.2 (33)
31-39	45.7 (37)	54.3 (44)
40+	43.5 (27)	56.5 (35)
Mean Age	33.5	35.7
SD	9.3	10.5

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CCA RTC II by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.4	1.2
SD	1.3	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	71.0 (76)	29.0 (31)
Yes	37.7 (69)	62.3 (114)
Offense Level		
Felony 1	49.0 (24)	51.0 (25)
Felony 2	54.2 (39)	45.8 (33)
Felony 3	57.1 (44)	42.9 (33)
Felony 4	52.3 (23)	47.7 (21)
Felony 5/M	31.2 (15)	68.8 (33)
Offense Category		
Violent/person	47.9 (58)	52.1 (63)
Sex	50.0 (6)	50.0 (6)
Drugs	58.0 (40)	42.0 (29)
Property	48.3 (29)	51.7 (31)
Traffic/DUI	100.0 (1)	0.0 (0)
Other	40.7 (11)	59.3 (16)
Substance Abuse Problem*		
No	26.9 (21)	73.1 (57)
Yes	58.5 (124)	41.5 (88)
Employment Problem*		
No	54.8 (103)	45.2 (85)
Yes	41.2 (42)	58.8 (60)
Emotional Problem*		
No	57.4 (112)	42.6 (83)
Yes	34.7 (33)	65.3 (62)
Risk Categories		
Low	50.0 (22)	50.0 (22)
Moderate	50.0 (99)	50.0 (99)
High	50.0 (24)	50.0 (24)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	30.7	31.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CCA RTC II by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (113)	100.0 (32)
Female	N/A	N/A
Race		
White	45.1 (51)	50.0 (16)
Non-white	54.9 (62)	50.0 (16)
Marital Status*		
Married	13.3 (15)	0.0 (0)
Single/not married	86.7 (98)	100.0 (32)
Age Category*		
16 to 23	23.9 (27)	43.8 (14)
24 to 30	25.7 (29)	34.4 (11)
31-39	27.4 (31)	18.8 (6)
40+	23.0 (26)	3.1 (1)
Mean Age*	34.9	28.7
SD	9.4	6.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CCA RTC II by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.5	1.1
SD	0.7	1.4
Previous Conviction	% (N)	% (N)
No	49.6 (56)	62.5 (20)
Yes	50.4 (57)	37.5 (12)
Offense Level		
Felony 1	18.6 (21)	9.4 (3)
Felony 2	27.4 (31)	25.0 (8)
Felony 3	30.1 (34)	31.3 (10)
Felony 4	15.0 (17)	18.8 (6)
Felony 5/M	8.8 (10)	15.6 (5)
Offense Category		
Violent/person	36.3 (41)	53.1 (17)
Sex	3.5 (4)	6.3 (2)
Drugs	28.3 (32)	25.0 (8)
Property	21.2 (24)	15.6 (5)
Traffic/DUI	0.9 (1)	0.0 (0)
Other	9.7 (11)	0.0 (0)
Substance Abuse Problem		
No	14.2 (16)	15.6 (5)
Yes	85.8 (97)	84.4 (27)
Employment Problem*		
No	82.3 (93)	31.3 (10)
Yes	17.7 (20)	68.8 (22)
Emotional Problem		
No	79.6 (90)	68.8 (22)
Yes	20.4 (23)	31.3 (10)
Risk Categories*		
Low	19.5 (22)	0.0 (0)
Moderate	62.8 (71)	87.5 (28)
High	17.7 (20)	12.5 (4)
Average risk scores	Mean (N)	Mean (N)
Males*	29.6	34.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Comm Corrections Assoc Inc RTC II

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	15.9 (23) *	4.5 (1)	12.1 (12) *	41.7 (10)
Comparison	31.0 (45)	4.5 (1)	32.3 (32)	50.0 (12)
Successful Completers				
Treatment	15.0 (17) *	4.5 (1)	11.3 (8) *	40.0 (8)
Comparison	31.9 (36)	4.5 (1)	35.2 (25)	50.0 (10)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Comm Corrections Assoc Inc RTC II

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	26.9 (39) *	18.2 (4)	23.2 (23) *	50.0 (12)
Comparison	40.0 (58)	9.1 (2)	44.4 (44)	50.0 (12)
Successful Completers				
Treatment	23.9 (27) *	18.2 (4)	19.7 (14) *	45.0 (9)
Comparison	38.9 (44)	9.1 (2)	45.1 (32)	50.0 (10)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Comm Corrections Assoc Inc RTC II

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	37.9 (55)	36.4 (8) *	35.4 (35)	50 (12)
Comparison	29.0 (42)	0.0 (0)	33.3 (33)	37.5 (9)
Successful Completers				
Treatment	24.8 (28)	36.4 (8) *	15.5 (11) *	45.0 (9)
Comparison	24.8 (28)	0.0 (0)	29.6 (21)	35.0 (7)

*Difference significant at p<.05

Community Treatment and Corrections Center (CTCC)

Community Treatment and Corrections Center is a Halfway House located in Canton, Ohio. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Community Treatment and Corrections Center has been in operation since 1973 and is contracted to serve 50 men. This facility is funded primarily by ODRC. Services include substance abuse treatment, skill building, parenting skills, cognitive restructuring, and employment readiness. Community Treatment and Corrections Center was visited by a University of Cincinnati research team on October 03, 2006. At the time of the visit, there were 46 offenders. Chandra Bryant was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should provide direct services to offenders on a regular basis via group treatment, conducting assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature and literature via conference exposure, the program should regularly consult a wider range of peer-reviewed literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a signification amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- Staff should receive regular clinical supervision by a licensed professional.
- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, problem solving skills and appropriate interaction with residents.

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Ohio Risk and Ohio Needs Assessment to asses risk and identify criminogenic need factors for all residents.
- The program also uses a biopsychosocial assessment and the MAST to further assess substance abuse need.
- The program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- Groups were within the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out, and site visits.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Staff are matched to groups based on experience and skill level.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program including a community meeting, communication form and offender survey.
- The types of rewards and punishers used by the program as well as the procedure for reinforcement appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved by ensuring that punishers are immediate, individualized, seen as valuable for extinguishing behavior, based on the demonstration of antisocial behavior, escape is impossible and punishers are not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 53%. This rate should fall between 65 and 85%.
- The program should offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While approximately 20% of offenders continue to see external providers after program completion, all offenders should be receiving aftercare services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, and staff feedback.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CTCC CANTON by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (192)	50.0 (192)
Female	N/A	N/A
Race		
White	50.0 (91)	50.0 (91)
Non-white	50.0 (101)	50.0 (101)
Marital Status*		
Married	32.6 (14)	67.4 (29)
Single/not married	52.3 (171)	47.7 (156)
Age Category		
16 to 23	46.4 (51)	53.6 (59)
24 to 30	46.0 (40)	54.0 (47)
31-39	60.2 (59)	39.8 (39)
40+	47.2 (42)	52.8 (47)
Mean Age	34.3	33.9
SD	9.4	10.0

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CTCC CANTON by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2.0	1.2
SD	1.6	1.5
Previous Conviction*	% (N)	% (N)
No	59.3 (86)	40.7 (59)
Yes	44.4 (133)	55.6 (133)
Offense Level*		
Felony 1	63.6 (42)	36.4 (24)
Felony 2	51.0 (49)	49.0 (47)
Felony 3	52.1 (63)	47.9 (58)
Felony 4	27.3 (9)	72.7 (24)
Felony 5/M	42.6 (29)	57.4 (39)
Offense Category*		
Violent/person	56.0 (122)	44.0 (96)
Sex	N/A	N/A
Drugs	59.0 (46)	41.0 (32)
Property	25.5 (12)	74.5 (35)
Traffic/DUI	33.3 (1)	66.7 (2)
Other	28.9 (11)	71.1 (27)
Substance Abuse Problem*		
No	20.0 (14)	80.0 (56)
Yes	56.7 (178)	43.3 (136)
Employment Problem		
No	51.9 (95)	48.1 (88)
Yes	48.3 (97)	51.7 (104)
Emotional Problem*		
No	58.3 (148)	41.7 (106)
Yes	33.8 (44)	66.2 (86)
Risk Categories		
Low	50.0 (25)	50.0 (25)
Moderate	50.0 (119)	50.0 (119)
High	50.0 (48)	50.0 (48)
Average risk scores	Mean (N)	Mean (N)
Males	33.2	33.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CTCC CANTON by Termination Status

Variable	HWH	
	Successful	Unsuccessful
	% (N)	% (N)
Gender		
Male	100.0 (98)	100.0 (94)
Female	N/A	N/A
Race		
White	49.0 (48)	45.7 (43)
Non-white	51.0 (50)	54.3 (51)
Marital Status		
Married	8.8 (8)	6.4 (6)
Single/not married	91.2 (83)	93.6 (88)
Age Category		
16 to 23	28.6 (28)	24.5 (23)
24 to 30	20.4 (20)	21.3 (20)
31-39	26.5 (26)	35.1 (33)
40+	24.5 (24)	19.1 (18)
Mean Age	34.5	34.0
SD	10.1	8.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CTCC CANTON by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.7	2.4
SD	1.3	1.8
Previous Conviction*	% (N)	% (N)
No	55.1 (54)	34.0 (32)
Yes	44.9 (44)	66.0 (62)
Offense Level		
Felony 1	18.4 (18)	25.5 (240
Felony 2	23.5 (23)	27.7 (26)
Felony 3	33.7 (33)	31.9 (30)
Felony 4	8.2 (8)	1.1 (1)
Felony 5/M	16.3 (16)	13.8 (13)
Offense Category*		
Violent/person	54.1 (53)	73.4 (69)
Sex	N/A	N/A
Drugs	32.7 (32)	14.9 (14)
Property	7.1 (7)	5.3 (5)
Traffic/DUI	1.0 (1)	0.0 (0)
Other	5.1 (5)	6.4 (6)
Substance Abuse Problem		
No	6.1 (6)	8.5 (8)
Yes	93.9 (92)	91.5 (86)
Employment Problem*		
No	69.4 (68)	28.7 (27)
Yes	30.6 (30)	71.3 (67)
Emotional Problem		
No	77.6 (76)	76.6 (72)
Yes	22.4 (22)	23.4 (22)
Risk Categories*		
Low	20.4 (20)	5.3 (5)
Moderate	61.2 (60)	62.8 (59)
High	18.4 (18)	31.9 (30)
Average risk scores*	Mean (N)	Mean (N)
Males	29.6	37.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Community Tx and Correctional Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.9 (69)	16.0 (4)	36.1 (43)	45.8 (22)
Comparison	31.8 (61)	4.0 (1)	31.9 (38)	45.8 (22)
Successful Completers				
Treatment	29. 6 (29)	15.0 (3)	26.7 (16)	55.6 (10)
Comparison	21.4 (21)	5.0 (1)	20.0 (12)	44.4 (8)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Community Tx and Correctional Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	49.0 (94)	24.0 (6)	48.7 (58)	62.5 (30)
Comparison	42.2 (81)	12.0 (3)	42.9 (51)	56.3 (27)
Successful Completers				
Treatment	39.8 (39)	20.0 (4)	36.7 (22)	72.2 (13)
Comparison	32.7 (32)	15.0 (3)	31.7 (19)	55.6 (10)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Community Tx and Correctional Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	50.0 (96) *	24.0 (6)	52.1 (62) *	58.3 (28)
Comparison	32.3 (62)	12.0 (3)	32.8 (39)	41.7 (20)
Successful Completers				
Treatment	24.5 (24)	10.0 (2)	25.0 (15)	38.9 (7)
Comparison	25.5 (25)	15.0 (3)	25.0 (15)	38.9 (7)

*Difference significant at p<.05

Cincinnati VOA Corrections/Drug Alcohol Program

Cincinnati VOA is a Halfway House operated by Volunteers of America and located in Cincinnati, Ohio. This facility houses three programs: a corrections program, a sex offender program and a dual diagnosis program. Cincinnati VOA serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Cincinnati VOA corrections program has been in operation since 1972 and is contracted to serve 45 men. This program is funded primarily by ODRC. Services include cognitive restructuring, skill building, employment readiness, substance abuse treatment, anger management, and life skills. Cincinnati VOA corrections program was visited by a University of Cincinnati research team on November 21, 2006. At the time of the visit, there were 26 offenders in the program. Steve Sherrick was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses a risk/need assessment to ascertain level of risk for recidivism.
- The program also uses an adult diagnostic, level of care, drug/alcohol, mental status exam, diagnostic assessment form and a lethality assessment.

Recommendations for Improvement:

- The program should utilize a needs assessment that assesses a range of criminogenic need factors.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should target moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- Structured curricula or manuals are used for all groups and all groups are facilitated from beginning to end by staff.
- The program's average length of stay is 3.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program as well as the procedure for reinforcing behavior appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.
- The program completion rate is 65%, which falls within the recommended range of 65 to 85%.

Recommendations for Improvement:

- While there is some monitoring of offenders while on pass, the monitoring mechanisms should be enhanced.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be used consistently across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While the program has cognitive-behavioral elements, the substance abuse treatment still uses a 12-step model.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- While the procedure for reinforcing is for the most part appropriate, both the range and frequency of reinforcement needs to be increased.
- The procedure by which offenders are punished could be improved by ensuring that punishers are based upon the demonstration of antisocial behaviors, punishers are individualized, escape is impossible, and punishers are not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, not all offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of assessments, and supervision or program and staff certification updates.
- The program has been formally evaluated in the past via an outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CINTI VOA Drug/Alcohol by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (173)	50.0 (173)
Female	N/A	N/A
Race		
White	50.0 (75)	50.0 (75)
Non-white	50.0 (98)	50.0 (98)
Marital Status		
Married	41.4 (12)	58.6 (17)
Single/not married	51.8 (161)	48.2 (150)
Age Category*		
16 to 23	25.4 (18)	74.6 (53)
24 to 30	46.5 (33)	53.5 (38)
31-39	60.6 (66)	39.4 (43)
40+	58.9 (56)	41.1 (39)
Mean Age*	38.9	33.7
SD	9.8	10.3

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CINTI VOA Drug Alcohol by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.4	1.3
SD	2.1	1.7
Previous Conviction*	**% (N)**	**% (N)**
No	70.9 (105)	29.1 (43)
Yes	34.3 (68)	65.7 (130)
Offense Level*		
Felony 1	67.1 (49)	32.9 (24)
Felony 2	62.2 (51)	37.8 (31)
Felony 3	41.8 (38)	58.2 (53)
Felony 4	29.7 (11)	70.3 (26)
Felony 5/M	38.1 (24)	61.9 (39)
Offense Category*		
Violent/person	49.6 (60)	50.4 (61)
Sex	50.0 (20)	50.0 (20)
Drugs	38.2 (21)	61.8 (34)
Property	62.0 (67)	38.0 (41)
Traffic/DUI	100.0 (1)	.0 (0)
Other	19.0 (4)	81.0 (17)
Substance Abuse Problem		
No	47.1 (41)	52.9 (46)
Yes	51.0 (132)	49.0 (127)
Employment Problem*		
No	43.3 (52)	56.7 (68)
Yes	53.5 (121)	46.5 (105)
Emotional Problem*		
No	55.5 (122)	44.5 (98)
Yes	40.5 (51)	59.5 (75)
Risk Categories		
Low	50.0 (6)	50.0 (6)
Moderate	50.0 (115)	50.0 (115)
High	50.0 (52)	50.0 (52)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	36.5	36.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CINTI VOA DRUG/ALCOHOL by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (39)	100.0 (134)
Female	N/A	N/A
Race		
White	46.2 (18)	42.5 (57)
Non-white	53.8 (21)	57.5 (77)
Marital Status		
Married	7.7 (3)	6.7 (9)
Single/not married	92.3 (36)	93.3 (125)
Age Category		
16 to 23	10.3 (4)	10.4 (14)
24 to 30	10.3 (4)	21.6 (29)
31-39	33.3 (13)	39.6 (53)
40+	46.2 (18)	28.4 (38)
Mean Age*	41.9	38.0
SD	11.8	8.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CINTI VOA DRUG/ALCOHOL by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.7 (39)	2.6 (134)
SD	1.3	2.3
Previous Conviction	% (N)	% (N)
No	64.1 (25)	59.7 (80)
Yes	35.9 (14)	40.3 (54)
Offense Level		
Felony 1	28.2 (11)	28.4 (38)
Felony 2	38.5 (15)	26.9 (36)
Felony 3	20.5 (8)	22.4 (30)
Felony 4	0.0 (0)	8.2 (11)
Felony 5/M	12.8 (5)	14.2 (19)
Offense Category		
Violent/person	23.1 (9)	38.1 (51)
Sex	23.1 (9)	8.2 (11)
Drugs	15.4 (6)	11.2 (15)
Property	38.5 (15)	38.8 (52)
Traffic/DUI	0.0 (0)	0.7 (1)
Other	0.0 (0)	3.0 (4)
Substance Abuse Problem*		
No	35.9 (14)	20.1 (27)
Yes	64.1 (25)	79.9 (107)
Employment Problem		
No	41.0 (16)	26.9 (36)
Yes	59.0 (23)	73.1 (98)
Emotional Problem		
No	71.8 (28)	70.1 (94)
Yes	28.2 (11)	29.9 (40)
Risk Categories*		
Low	12.8 (5)	0.7 (1)
Moderate	74.4 (29)	64.2 (86)
High	12.8 (5)	35.1 (47)
Average risk scores	Mean (N)	Mean (N)
Males	30.9 (39)	38.2 (134)
Females	N/A	N/A
Overall	30.9 (39)	38.2 (134)

*Difference significant at p<.05

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Cincinnati VOA Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.8 (74)	16.7 (1)	33.9 (39)	65.4 (34)
Comparison	37.0 (64)	16.7 (1)	28.7 (33)	57.7 (30)
Successful Completers				
Treatment	20.5 (8)	20.0 (1)	17.2 (5)	40.0 (2)
Comparison	25.6 (10)	20.0 (1)	20.7 (6)	60.0 (3)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Cincinnati VOA Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	54.9 (95)	50.0 (3)	47.7 (55)	71.2 (37)
Comparison	46.2 (80)	16.7 (1)	38.3 (44)	67.3 (35)
Successful Completers				
Treatment	35.9 (14)	60.0 (3)	24.1 (7)	80.0 (4)
Comparison	41.0 (16)	20.0 (1)	41.4 (12)	60.0 (3)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Cincinnati VOA Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	43.9 (76)	16.7 (1)	38.3 (44)	59.6 (31)
Comparison	37.0 (64)	16.7 (1)	30.4 (35)	53.8 (28)
Successful Completers				
Treatment	20.5 (8)	0.0 (0)	20.7 (6)	40.0 (2)
Comparison	28.2 (11)	20.0 (1)	27.6 (8)	40.0 (2)

*Difference significant at p<.05

Cincinnati VOA SAMI Program

Cincinnati VOA is a Halfway House operated by Volunteers of America and located in Cincinnati, Ohio. This facility houses three programs: a corrections program, a sex offender program (New Life) and a dual diagnosis program (Renew). Cincinnati VOA serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Cincinnati VOA dual diagnosis program has been in operation since 1996 and is contracted to serve 12 men. This program is funded primarily by ODRC. Services include cognitive restructuring, skill building, dual diagnosis treatment, substance abuse, employment readiness, anger management, and life skills. Cincinnati VOA Renew program was visited by a University of Cincinnati research team on November 21, 2006. At the time of the visit, there were 12 offenders in the program. Steve Sherrick was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.

- Staff should receive at least 40 hours of initial formal training.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses a risk/need assessment to ascertain level of risk for recidivism.
- The program also uses an adult diagnostic, level of care, drug/alcohol, mental status exam, diagnostic assessment form and a lethality assessment.

Recommendations for Improvement:

- The program should utilize a needs assessment that assesses a range of criminogenic need factors.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles. Particularly, the program should be using a validated tool to assess mental health.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should target moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, and employment).
- Much of the treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- The program completion rate is 65%, which falls within the recommended range of 65 to 85%.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be used consistently across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and based upon the demonstration of prosocial behavior.
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, seen as valuable for extinguishing behavior, varied individualized, and escape is impossible.   Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While offenders are referred to external providers for aftercare, the percentage of offenders who participate in such services is unclear.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS and ODMH.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, and monitoring staff certification updates.
- The program has been formally evaluated in the past via an outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CINTI VOA SAMI by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (38)	50.0 (38)
Female	N/A	N/A
Race		
White	50.0 (12)	50.0 (12)
Non-white	50.0 (26)	50.0 (26)
Marital Status		
Married	50.0 (4)	50.0 (4)
Single/not married	50.7 (34)	49.3 (33)
Age Category		
16 to 23	36.8 (7)	63.2 (12)
24 to 30	50.0 (7)	50.0 (7)
31-39	50.0 (7)	50.0 (7)
40+	58.6 (17)	41.4 (12)
Mean Age	38.7	36.5
SD	11.6	14.1

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CINTI VOA SAMI by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	2.1	1.7
SD	2.1	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	67.9 (19)	32.1 (9)
Yes	39.6 (19)	60.4 (29)
Offense Level*		
Felony 1	76.9 (10)	23.1 (3)
Felony 2	75.0 (9)	25.0 (3)
Felony 3	40.0 (6)	60.0 (9)
Felony 4	35.7 (5)	64.3 (9)
Felony 5/M	36.4 (8)	63.6 (14)
Offense Category*		
Violent/person	77.3 (17)	22.7 (5)
Sex	50.0 (9)	50.0 (9)
Drugs	20.0 (3)	80.0 (12)
Property	53.8 (7)	46.2 (6)
Traffic/DUI	0.0 (0)	100.0 (1)
Other	28.6 (2)	71.4 (5)
Substance Abuse Problem		
No	30.0 (3)	70.0 (7)
Yes	53.0 (35)	47.0 (31)
Employment Problem*		
No	10.5 (2)	89.5 (17)
Yes	63.2 (36)	36.8 (21)
Emotional Problem*		
No	8.0 (2)	92.0 (23)
Yes	70.6 (36)	29.4 (15)
Risk Categories		
Low	50.0 (1)	50.0 (1)
Moderate	50.0 (24)	50.0 (24)
High	50.0 (13)	50.0 (13)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	36.7	36.9
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CINTI VOA SAMI by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (6)	100.0 (32)
Female	N/A	N/A
Race*		
White	66.7 (4)	25.0 (8)
Non-white	33.3 (2)	75.0 (24)
Marital Status		
Married	16.7 (1)	9.4 (3)
Single/not married	83.3 (5)	90.6 (29)
Age Category		
16 to 23	16.7 (1)	18.8 (6)
24 to 30	33.3 (2)	15.6 (5)
31-39	33.3 (2)	15.6 (5)
40+	16.7 (1)	50.0 (16)
Mean Age	35.8 (6)	39.3 (32)
SD	10.1	11.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CINTI VOA SAMI by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.2 (6)	2.3 (32)
SD	1.0	2.2
Previous Conviction	% (N)	% (N)
No	50.0 (3)	50.0 (16)
Yes	50.0 (3)	50.0 (16)
Offense Level		
Felony 1	16.7 (1)	28.1 (9)
Felony 2	0.0 (0)	28.1 (9)
Felony 3	16.7 (1)	15.6 (5)
Felony 4	16.7 (1)	12.5 (4)
Felony 5/M	50.0 (3)	15.6 (5)
Offense Category		
Violent/person	33.3 (2)	46.9 (15)
Sex	50.0 (3)	18.8 (6)
Drugs	0.0 (0)	9.4 (3)
Property	16.7 (1)	18.8 (6)
Traffic/DUI	0.0 (0)	0.0 (0)
Other	0.0 (0)	6.3 (2)
Substance Abuse Problem		
No	16.7 (1)	6.3 (2)
Yes	83.3 (5)	93.8 (30)
Employment Problem		
No	0.0 (0)	6.3 (2)
Yes	100.0 (6)	93.8 (30)
Emotional Problem		
No	0.0 (0)	6.3 (2)
Yes	100.0 (6)	93.8 (30)
Risk Categories		
Low	16.7 (1)	0.0 (0)
Moderate	50.0 (3)	65.6 (21)
High	33.3 (2)	34.4 (11)
Average risk scores	Mean (N)	Mean (N)
Males	38 (6)	36.4 (32)
Females	N/A	N/A
Overall	38 (6)	36.4 (32)

*Difference significant at $p < .05$

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Cincinnati VOA SAMI Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.6 (12)	0.0 (0)	25.0 (6)	46.2 (6)
Comparison	31.6 (12)	0.0 (0)	29.2 (7)	38.5 (5)
Successful Completers				
Treatment	16.7 (1)	0.0 (0)	0.0 (0)	50.0 (1)
Comparison	33.3 (2)	0.0 (0)	0.0 (0)	100.0 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Cincinnati VOA SAMI Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	52.6 (20)	0.0 (0)	37.5 (9)	84.6 (11) *
Comparison	42.1 (16)	0.0 (0)	41.7 (10)	46.2 (6)
Successful Completers				
Treatment	33.3 (2)	0.0 (0)	0.0 (0)	100.0 (2)
Comparison	33.3 (2)	0.0 (0)	0.0 (0)	100.0 (2)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Cincinnati VOA SAMI Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.9 (11)	0.0 (0)	29.2 (7)	30.8 (4)
Comparison	34.2 (13)	0.0 (0)	33.3 (8)	38.5 (5)
Successful Completers				
Treatment	16.7 (1)	0.0 (0)	33.3 (1)	0.0 (0)
Comparison	33.3 (2)	0.0 (0)	0.0 (0)	100.0 (2)

*Difference significant at p<.05

Cincinnati VOA Sex Offender Program

Cincinnati VOA is a Halfway House operated by Volunteers of America and located in Cincinnati, Ohio. This facility houses three programs: a corrections program, a sex offender program (New Life) and a dual diagnosis program (Renew). Cincinnati VOA serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Cincinnati VOA sex offender program has been in operation since 1997 and is contracted to serve 44 men. This program is funded primarily by ODRC. Services include sex offender treatment, victim empathy, cognitive restructuring, skill building, substance abuse education, relapse prevention, anger management, and life skills. Cincinnati VOA New Life program was visited by a University of Cincinnati research team on November 21, 2006. At the time of the visit, there were 44 offenders in the program. Steve Sherrick was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training, and supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult a range of literature related to effective interventions with sex offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has limited support by the community in which it is housed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training in clinical/treatment-related areas.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Staff should receive more formalized initial training on the theory and practice of interventions used by the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses a general risk/need assessment to ascertain level of risk for recidivism and the Static 99 as a sex offender specific risk assessment.
- The program also uses an adult diagnostic, level of care, drug/alcohol, mental status exam, diagnostic assessment form and a lethality assessment.

Recommendations for Improvement:

- The program should utilize a needs assessment that assesses a range of criminogenic need factors.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk sex offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- Structured curricula or manuals are used for all groups and groups are facilitated from beginning to end by staff.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls out and the probation officer/law enforcement.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program as well as the procedure for reinforcing behavior appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The primary treatment model is eclectic rather than a cognitive-behavioral model. Models used also include restorative justice, psychoanalytic, and strength based model.

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be used consistently across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 8 months; it should be at least 12 months for moderate to high risk sex offender programming.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, individualized, escape is impossible, and punishers are not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While offenders are referred to external providers for aftercare, the percentage of offenders who participate in such services is unclear.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, and monitor program and staff certification updates.
- The program has been formally evaluated in the past via an outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CINTI SEX OFFENDER TX by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (76)	50.0 (76)
Female	N/A	N/A
Race		
White	50.0 (43)	50.0 (43)
Non-white	50.0 (33)	50.0 (33)
Marital Status		
Married	41.7 (5)	58.3 (7)
Single/not married	54.6 (71)	45.4 (59)
Age Category		
16 to 23	46.2 (12)	53.8 (14)
24 to 30	42.9 (15)	57.1 (20)
31-39	47.1 (16)	52.9 (18)
40+	57.9 (33)	42.1 (24)
Mean Age	39.6	36.8
SD	11.5	11.2

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for CINTI VOA SEX OFFENDER TX by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.6	0.5
SD	1.6	1.0
Previous Conviction	**% (N)**	**% (N)**
No	54.2 (58)	45.8 (49)
Yes	40.0 (18)	60.0 (27)
Offense Level*		
Felony 1	68.0 (34)	32.0 (16)
Felony 2	50.0 (8)	50.0 (8)
Felony 3	45.3 (24)	54.7 (29)
Felony 4	28.0 (7)	72.0 (18)
Felony 5/M	37.5 (3)	62.5 (5)
Offense Category		
Violent/person	57.1 (4)	42.9 (3)
Sex	50.0 (72)	50.0 (72)
Drugs	0.0 (0)	100.0 (1)
Property	N/A	N/A
Traffic/DUI	N/A	N/A
Other	N/A	N/A
Substance Abuse Problem		
No	54.2 (26)	45.8 (22)
Yes	48.1 (50)	51.9 (54)
Employment Problem		
No	43.2 (32)	56.8 (42)
Yes	56.4 (44)	43.6 (34)
Emotional Problem*		
No	31.9 (22)	68.1 (47)
Yes	65.1 (54)	34.9 (29)
Risk Categories		
Low	50.0 (18)	50.0 (18)
Moderate	50.0 (54)	50.0 (54)
High	50.0 (4)	50.0 (4)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	25.3	25.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CINTI VOA SEX OFFENDER TX by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (29)	100.0 (47)
Female	N/A	N/A
Race*		
White	72.4 (21)	46.8 (22)
Non-white	27.6 (8)	53.2 (25)
Marital Status		
Married	6.9 (2)	6.4 (3)
Single/not married	93.1 (27)	93.6 (44)
Age Category		
16 to 23	17.2 (5)	14.9 (7)
24 to 30	13.8 (4)	23.4 (11)
31-39	17.2 (5)	23.4 (11)
40+	51.7 (15)	38.3 (18)
Mean Age	40.9 (29)	38.8 (47)
SD	11.4	11.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CINTI VOA SEX OFFENDER TX by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.2 (29)	1.9 (47)
SD	0.8	1.9
Previous Conviction	**% (N)**	**% (N)**
No	82.8 (24)	72.3 (34)
Yes	17.2 (5)	27.7 (13)
Offense Level		
Felony 1	48.3 (14)	42.6 (20)
Felony 2	3.4 (1)	14.9 (7)
Felony 3	37.9 (11)	27.7 (13)
Felony 4	6.9 (2)	10.6 (5)
Felony 5/M	3.4 (1)	4.3 (2)
Offense Category		
Violent/person	0.0 (0)	8.5 (4)
Sex	100.0 (29)	91.5 (43)
Drugs	0.0 (0)	0.0 (0)
Property	0.0 (0)	0.0 (0)
Traffic/DUI	0.0 (0)	0.0 (0)
Other	0.0 (0)	0.0 (0)
Substance Abuse Problem*		
No	48.3 (14)	25.5 (12)
Yes	51.7 (15)	74.5 (35)
Employment Problem*		
No	69.0 (29)	25.5 (12)
Yes	31.0 (9)	74.5 (35)
Emotional Problem		
No	31.0 (9)	27.7 (13)
Yes	69.0 (20)	72.3 (34)
Risk Categories		
Low	41.4 (12)	12.8 (6)
Moderate	58.6 (17)	78.7 (37)
High	0.0 (0)	8.5 (4)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	19.3 (29)	29.1 (47)
Females	N/A	N/A
Overall	19.3 (29)	29.1 (47)

*Difference significant at $p < .05$

RECIDIVISM OUTCOME

New Felony Conviction by Group Membership and Risk Level for Cincinnati VOA Sex Offender Program

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	32.9 (25)	27.8 (5)	35.2 (19)	25.0 (1)
Comparison	25.0 (19)	11.1 (2)	27.8 (15)	50.0 (2)
Successful Completers				
Treatment	24.1 (7)	33.3 (4)	17.6 (3)	N/A
Comparison	20.7 (6)	16.7 (2)	23.5 (4)	N/A

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Cincinnati VOA Sex Offender Program

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	36.8 (28)	33.3 (6)	38.9 (21)	25.0 (1)
Comparison	26.3 (20)	11.1 (2)	29.6 (16)	50.0 (2)
Successful Completers				
Treatment	31.0 (9)	41.7 (5)	23.5 (4)	N/A
Comparison	24.1 (7)	16.7 (2)	29.4 (5)	N/A

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Cincinnati VOA Sex Offender Program

| | Risk Levels | | | |
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	38.2 (29)	27.8 (5)	38.9 (21)	75.0 (3)
Comparison	27.6 (21)	5.6 (1)	35.2 (19)	25.0 (1)
Successful Completers				
Treatment	24.1 (7)	25.0 (3)	23.5 (4)	N/A
Comparison	31.0 (9)	8.3 (1)	47.1 (8)	N/A

*Difference significant at p<.05

Community Transition Center

Community Transition Center is a Halfway House located in Lancaster, Ohio. This facility serves adult males placed on probation, Transitional Control, or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Community Transition Center has been in operation since 1997 and has a capacity to serve 80 men. This facility is funded by ODRC. Services include substance abuse, anger management, mental health, and employment readiness. Community Transition Center was visited by a University of Cincinnati research team on September 26, 2006. At the time of the visit, there were 63 residents. Tina Sheline was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services, via individual and group treatment to offenders in the program.
- The program is well established based upon 9 years in operation.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- Although the program receives non-peer reviewed journals and obtains literature via local or national conferences, the program should regularly consult peer reviewed journals and books related to effective interventions with offenders and use such information to design all aspects of the program.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding is somewhat unstable and funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Although staff receive an adequate number of ongoing training hours, initial formal training hours should be increased.
- More staff training should relate to the theory and practice of interventions used by the program for security staff, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program identifies offender needs via several assessments including a biopsychosocial tool, an intake assessment and a Level of Care, Alcohol Profile and SMAST to assess substance abuse issues.
- The program provides re-assessment using the Level of Care assessment at discharge.

Recommendations for Improvement:

- The program fails to use a standardized risk/need tool to classify offenders and assess criminogenic need factors apart from substance abuse.
- The program should also have a spectrum of standardized responsivity assessments to assess such areas as motivation, personality, education, and learning styles.
- Because the program fails to classify offenders, there is no way to determine whether the program is primarily targeting individuals who are moderate to high risk to reoffend, as it should.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger and substance abuse).
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral and motivational enhancement model.
- Structured curricula or manuals are used for all groups and all groups are facilitated from beginning to end by program staff.
- Structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play is used regularly in groups.
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are effectively monitored while in the community via electronic monitoring, drug testing, schedules/logs, and regular phone calls in and out of the facility.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program, such as use of a suggestion box and a resident spokesperson.
- The types of rewards used by the program and process for rewarding appropriate behavior appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- The program uses objective criteria to determine program completion.
- Appropriate discharge planning has been implemented.

- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.

Recommendations for Improvement:

- Graduated rehearsal or advanced practice should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program once a classification tool is implemented.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The program should refrain from the use of shaming techniques to punish offenders such as use of the "wall of shame".
- The procedure for effectively punishing behavior could be enhanced by ensuring that punishers are based upon the demonstration of an antisocial behavior and that punishers are administered immediately following the target behavior. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Although the program offers training to family members who might assist in providing prosocial support for the offenders, only 5% of families are involved in such services.
- While aftercare services are provided by the program, only about 20% of offenders participate in such services and aftercare is considered optional. Out of county residents should be required to participate in some type of aftercare. Furthermore, in-county aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of assessments, and supervision of program and staff certification updates.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for COMM TRANSITION CTR by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (161)	50.0 (161)
Female	N/A	N/A
Race		
White	50.0 (140)	50.0 (140)
Non-white	50.0 (21)	50.0 (21)
Marital Status		
Married	51.9 (28)	48.1 (26)
Single/not married	52.0 (133)	48.0 (123)
Age Category		
16 to 23	41.1 (44)	58.9 (63)
24 to 30	47.2 (34)	52.8 (38)
31-39	62.5 (45)	37.5 (27)
40+	53.5 (38)	46.5 (33)
Mean Age*	34.9	31.7
SD	9.7	10.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for COMM TRANSITION CTR by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.7	1.1
SD	1.5	1.8
Previous Conviction*	**% (N)**	**% (N)**
No	43.6 (75)	56.4 (97)
Yes	57.3 (86)	42.7 (64)
Offense Level		
Felony 1	51.5 (17)	48.5 (16)
Felony 2	51.8 (29)	48.2 (27)
Felony 3	40.5 (30)	59.5 (44)
Felony 4	63.3 (38)	36.7 (22)
Felony 5/M	47.5 (47)	52.5 (52)
Offense Category*		
Violent/person	57.9 (70)	42.1 (51)
Sex	N/A	N/A
Drugs	54.2 (32)	45.8 (27)
Property	34.0 (32)	66.0 (62)
Traffic/DUI	81.8 (9)	18.2 (2)
Other	48.6 (18)	51.4 (19)
Substance Abuse Problem*		
No	34.4 (11)	65.6 (21)
Yes	51.7 (150)	48.3 (140)
Employment Problem		
No	50.8 (95)	49.2 (92)
Yes	48.9 (66)	51.1 (69)
Emotional Problem		
No	51.8 (99)	48.2 (92)
Yes	47.3 (62)	52.7 (69)
Risk Categories		
Low	50.0 (13)	50.0 (13)
Moderate	50.0 (106)	50.0 (106)
High	50.0 (42)	50.0 (42)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	34.1	33.8
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for COMM TRANSITION CTR by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (113)	100.0 (48)
Female	N/A	N/A
Race		
White	89.4 (101)	81.3 (39)
Non-white	10.6 (12)	18.8 (9)
Marital Status*		
Married	22.1 (25)	6.3 (3)
Single/not married	77.9 (88)	93.8 (45)
Age Category		
16 to 23	23.9 (27)	35.4 (17)
24 to 30	22.1 (25)	18.8 (9)
31-39	26.5 (30)	31.3 (15)
40+	37.4 (31)	14.6 (7)
Mean Age*	36.0	32.4
SD	9.9	8.8

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for COMM TRANSITION CTR by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.7	1.9
SD	1.5	1.4
Previous Conviction	% (N)	% (N)
No	46.9 (53)	45.8 (22)
Yes	53.1 (60)	54.2 (26)
Offense Level		
Felony 1	10.6 (12)	10.4 (5)
Felony 2	15.0 (17)	25.0 (12)
Felony 3	21.2 (24)	12.5 (6)
Felony 4	24.8 (28)	20.8 (10)
Felony 5/M	28.3 (32)	31.3 (15)
Offense Category		
Violent/person	40.7 (46)	50.0 (24)
Sex	N/A	N/A
Drugs	18.6 (21)	22.9 (11)
Property	21.2 (24)	16.7 (8)
Traffic/DUI	7.1 (8)	2.1 (1)
Other	12.4 (14)	8.3 (4)
Substance Abuse Problem		
No	5.3 (6)	10.4 (5)
Yes	94.7 (107)	89.6 (43)
Employment Problem*		
No	69.9 (79)	33.3 (16)
Yes	30.1 (34)	66.7 (32)
Emotional Problem		
No	61.9 (70)	60.4 (29)
Yes	38.1 (43)	39.6 (19)
Risk Categories		
Low	9.7 (11)	4.2 (2)
Moderate	67.3 (76)	62.5 (30)
High	23.0 (26)	33.3 (16)
Average risk scores	Mean (N)	Mean (N)
Males*	32.7	37.2
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Community Transition Center

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.6 (46)	15.4 (2)	26.4 (28) *	38.1 (16)
Comparison	24.2 (39)	15.4 (2)	16.0 (17)	47.6 (20)
Successful Completers				
Treatment	27.4 (31)	9.1 (1)	25.0 (19)	42.3 (11)
Comparison	24.8 (28)	9.1 (1)	19.7 (15)	46.2 (12)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Community Transition Center

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.8 (64)	30.8 (4)	38.7 (41) *	45.2 (19)
Comparison	30.4 (49)	15.4 (2)	21.7 (23)	57.1 (24)
Successful Completers				
Treatment	38.1 (43)	27.3 (3)	35.5 (27)	50.0 (13)
Comparison	31.0 (35)	9.1 (1)	25.0 (19)	57.7 (15)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Community Transition Center

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.4 (57)	15.4 (2)	34.0 (36) *	45.2 (19)
Comparison	31.1 (50)	15.4 (2)	22.6 (24)	57.1 (24)
Successful Completers				
Treatment	27.4 (31)	9.1 (1)	25.0 (19)	42.3 (11)
Comparison	29.2 (33)	9.1 (1)	23.7 (18)	53.8 (14)

*Difference significant at p<.05

CompDrug Community Residential Treatment Services

CompDrug is a Halfway House located in Columbus, Ohio. This facility serves adult males placed on probation as well as Transitional Control and Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). CompDrug has been in operation since 1970 and is contracted by ODRC to serve 67 men. This facility is funded primarily by ODRC. CompDrug was visited by a University of Cincinnati research team on October 25, 2006. At the time of the visit, there were 57 offenders in the program and the primary service being provided was employment readiness. Scott Olmstead was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising staff.
- The program is well established.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- Staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult the literature related to effective interventions with offenders.
- There are moderate problems with how problems and crises are handled resulting in disruption in programming/services.
- The program lacks support by the criminal justice community.
- The program also lacks support by the community in which it is housed, largely due to a high AWOL rate.
- Significant funding issues including recent major funding cuts have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as effective use of reinforcement and authority, problem solving skills and appropriate interaction with residents.

- Any staff providing treatment should receive clinical supervision by a licensed professional and client cases should be reviewed for progress on a regular basis.
- Staff should be formally trained on the program's treatment model as well as trained on effective correctional interventions with offenders
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program for the most part receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses a psychosocial assessment to obtain the social history of offenders.

Recommendations for Improvement:

- The program should use a validated risk/need assessment to ascertain risk level of offenders as well as identify criminogenic need factors.
- The program should also have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be assessed and formally tracked, and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out and site checks.
- The program completion rate is 65%, which falls within the recommended range of 65 to 85%.
- The types of rewards and punishers used by the program appear appropriate.

Recommendations for Improvement:

- While the program targets employment, which is a criminogenic need area, the program should be targeting a range of criminogenic needs (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, structured leisure, family, and substance abuse). Recent funding cuts have led to the discontinuation of several programs.
- The program should be operating under a cognitive-behavioral treatment model. Currently with little to no programming, there is no structured treatment model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be utilized with the residents. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.

- Offenders should have a formalized mechanism for input into the structure of the program, such as a community meeting, suggestion box or resident spokesperson.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, individualized and based upon the demonstration of prosocial behavior
- The procedure by which offenders are punished could be improved by ensuring that punishers are seen as valuable in extinguishing behavior, punishers are undesirable by the offenders, they are varied, they appropriately match the infraction, escape is impossible, and punishers are not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program should teach offenders how to monitor and anticipate high risk situations via relapse prevention planning.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement, rather than time in the program.
- Appropriate discharge planning should be implemented.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is monitored by ODRC and BCS.
- Quality assurance mechanisms used by the program include file review, client exit surveys, and staff feedback.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- The program should enhance the quality assurance by providing direct observation of the delivery of services with feedback to staff, conducting re-assessments of offenders and providing increased monitoring of external providers whom offenders are referred to for services.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for COMPDRUG by Group Membership

| | HWH | |
Variable	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (266)	50.0 (266)
Female	N/A	N/A
Race		
White	50.0 (113)	50.0 (113)
Non-white	50.0 (153)	50.0 (153)
Marital Status*		
Married	37.3 (22)	62.7 (37)
Single/not married	54.2 (243)	45.8 (205)
Age Category		
16 to 23	48.3 (57)	51.7 (61)
24 to 30	47.9 (67)	52.1 (73)
31-39	55.9 (81)	44.1 (64)
40+	47.3 (61)	52.7 (68)
Mean Age	35.0	35.6
SD	9.2	10.8

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for COMPDRUG by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.3	1.6
SD	2.0	2.2
Previous Conviction*	**% (N)**	**% (N)**
No	62.1 (108)	37.9 (66)
Yes	44.1 (158)	55.9 (200)
Offense Level		
Felony 1	52.9 (36)	47.1 (32)
Felony 2	48.8 (60)	51.2 (63)
Felony 3	51.2 (63)	48.8 (60)
Felony 4	47.4 (45)	52.6 (50)
Felony 5/M	50.4 (62)	49.6 (61)
Offense Category*		
Violent/person	58.9 (152)	41.1 (106)
Sex	50.0 (1)	50.0 (1)
Drugs	33.7 (29)	66.3 (57)
Property	45.2 (56)	54.8 (68)
Traffic/DUI	66.7 (2)	33.3 (1)
Other	44.1 (26)	55.9 (33)
Substance Abuse Problem*		
No	26.7 (27)	73.3 (74)
Yes	55.5 (239)	44.5 (192)
Employment Problem*		
No	58.8 (174)	41.2 (122)
Yes	39.0 (92)	61.0 (144)
Emotional Problem		
No	51.8 (173)	48.2 (161)
Yes	47.0 (93)	53.0 (105)
Risk Categories		
Low	50.0 (21)	50.0 (21)
Moderate	50.0 (163)	50.0 (163)
High	50.0 (82)	50.0 (82)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	34.9	35.4
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for COMPDRUG by Termination Status

	HWH	
Variable	**Successful**	**Unsuccessful**
	% (N)	**% (N)**
Gender		
Male	100.0 (116)	100.0 (150)
Female	N/A	N/A
Race		
White	44.8 (52)	40.7 (61)
Non-white	55.2 (64)	59.3 (89)
Marital Status		
Married	11.2 (13)	6.0 (9)
Single/not married	88.8 (103)	94.0 (140)
Age Category		
16 to 23	18.1 (21)	24.0 (36)
24 to 30	31.0 (36)	20.7 (31)
31-39	28.4 (33)	32.0 (48)
40+	22.4 (26)	23.3 (35)
Mean Age	35.3	34.8
SD	9.4	9.1

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for COMPDRUG by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2	2.6
SD	9.4	9.1
Previous Conviction*	% (N)	% (N)
No	47.4 (55)	35.3 (53)
Yes	52.6 (61)	64.7 (97)
Offense Level		
Felony 1	12.9 (15)	14.0 (21)
Felony 2	20.7 (24)	24.0 (36)
Felony 3	23.3 (27)	24.0 (36)
Felony 4	19.8 (23)	14.7 (22)
Felony 5/M	23.3 (27)	23.3 (35)
Offense Category		
Violent/person	50.0 (58)	62.7 (94)
Sex	.0 (0)	.7 (1)
Drugs	14.7 (17)	8.0 (12)
Property	21.6 (25)	20.7 (31)
Traffic/DUI	1.7 (2)	.0 (0)
Other	12.1 (14)	8.0 (12)
Substance Abuse Problem		
No	9.5 (11)	10.7 (16)
Yes	90.5 (105)	89.3 (134)
Employment Problem*		
No	85.3 (99)	50.0 (75)
Yes	14.7 (17)	50.0 (75)
Emotional Problem*		
No	73.3 (85)	58.7 (88)
Yes	26.7 (31)	41.3 (62)
Risk Categories*		
Low	12.1 (14)	4.7 (7)
Moderate	67.2 (78)	56.7 (85)
High	20.7 (24)	38.7 (58)
Average risk scores	Mean (N)	Mean (N)
Males*	31.8	37.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for COMPDRUG/VITA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	24.4 (65)	28.3 (5)	20.9 (34)	31.7 (26)
Comparison	27.8 (74)	4.8 (1)	25.2 (41)	39.0 (32)
Successful Completers				
Treatment	24.1 (28)	28.6 (4) *	19.2 (15)	37.5 (9)
Comparison	26.7 (31)	0.0 (0)	25.6 (20)	45.8 (11)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for COMPDRUG/VITA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.1 (96)	28.6 (6) *	31.3 (51)	47.6 (39)
Comparison	36.8 (98)	4.8 (1)	35.6 (58)	47.6 (39)
Successful Completers				
Treatment	31.9 (37)	35.7 (5) *	26.9 (21) *	45.8 (11)
Comparison	37.9 (44)	0 (0)	41.0 (32)	50.0 (12)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for COMPDRUG/VITA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.5 (105) *	19.0 (4)	35.0 (57)	53.7 (44)
Comparison	30.5 (81)	14.3 (3)	26.4 (43)	42.7 (35)
Successful Completers				
Treatment	20.7 (24) *	14.3 (2)	19.2 (15)	29.2 (7)
Comparison	31.9 (37)	14.3 (2)	28.2 (22)	54.2 (13)

*Difference significant at p<.05

Courage House

Courage House is a Halfway House located in Newark, Ohio. This facility serves adult females placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). The program also serves self-referral clients. Courage House has been in operation since 2006 and has a companion facility, Spencer House, which serves male offenders. Courage House is contracted to serve 15 women. This facility is funded by ODRC, Community Mental Health Recreation Board, United Way, and through fundraising efforts. Services include substance abuse treatment, cognitive restructuring, education, stress management, women's recovery, communication skills, trauma, co-dependency, nutrition and aftercare. Courage House was visited by a University of Cincinnati research team on November 2, 2006. At the time of the visit, there were 15 offenders. Sharon Stockton was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the creator of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services to offenders in the program as a psychiatric nurse.
- The program is supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.
- Funding is highly stable, allowing the program to operate as designed.

Recommendations for Improvement:

- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should receive clinical supervision by a licensed professional.
- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.

- More staff training, particularly initial training, should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment and Ohio Offender Needs Assessment to assess risk and identify criminogenic need factors for all residents.
- The program uses the MAST and DAST to further assess substance abuse issues as well as a biopsychosocial assessment, a mental status exam and a gambling screener.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should consistently provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should target moderate to high risk offenders.

Treatment

Strengths:

- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program, such as a community meeting, an advisory committee and feedback on the handbook.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, group activities, and processing.
- Aftercare services are provided by the program to 100% of offenders.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature, many are non-criminogenic such as self-esteem, nutrition, stress/time management, victimization and co-dependency issues. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While the program uses cognitive-behavioral model for some treatment elements, this model does not permeate the treatment program.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, more graduated rehearsal should be used to teach resident skills in increasingly difficult situations.

- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, drug testing, and site checks), the monitoring mechanisms should be enhanced.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, varied, consistently applied, individualized and based upon demonstration of a prosocial behavior
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, immediate, individualized, undesirable by the offender, escape is impossible, they are not spread out, and they are based on demonstration of an antisocial behavior. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 90%. This rate should fall between 65 and 85%.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program needs to offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association, is licensed by ODADAS, and is monitored by United Way.
- The program uses several internal quality review mechanisms, including file review (staff and peer review), client surveys, supervision of assessments, CCIS audits and an exit interview with the probation/parole officer.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- While there are several internal quality assurance processes, staff are not monitored and given feedback regarding treatment delivery. This should be taking place at least monthly.
- In order to improve external quality assurance, the program should provide increased monitoring of external providers.
- The program should follow offenders for a longer period than three months following discharge when collecting recidivism data.

Descriptive Statistics for COURAGE HOUSE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (20)	50.0 (20)
Race		
White	50.0 (19)	50.0 (19)
Non-white	50.0 (1)	50.0 (1)
Marital Status		
Married	50.0 (5)	50.0 (5)
Single/not married	50.0 (15)	50.0 (15)
Age Category		
16 to 23	83.3 (5)	16.7 (1)
24 to 30	30.8 (4)	69.2 (9)
31-39	53.3 (8)	46.7 (7)
40+	50.0 (3)	50.0 (3)
Mean Age	34.6	32.0
SD	9.2	7.2

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for COURAGE HOUSE by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	0.1	0.1
SD	0.3	0.3
Previous Conviction	% (N)	% (N)
No	54.3 (19)	45.7 (16)
Yes	20.0 (1)	80.0 (4)
Offense Level		
Felony 1	N/A	N/A
Felony 2	N/A	N/A
Felony 3	66.7 (2)	33.3 (1)
Felony 4	50.0 (5)	50.0 (5)
Felony 5/M	48.1 (13)	51.9 (14)
Offense Category		
Violent/person	60.0 (3)	40.0 (2)
Sex	N/A	N/A
Drugs	47.6 (10)	52.4 (11)
Property	50.0 (6)	50.0 (6)
Traffic/DUI	N/A	N/A
Other	50.0 (1)	50.0 (1)
Substance Abuse Problem		
No	25.0 (1)	75.0 (3)
Yes	52.8 (19)	47.2 (17)
Employment Problem		
No	45.0 (9)	55.0 (11)
Yes	55.0 (11)	45.0 (9)
Emotional Problem*		
No	26.3 (5)	73.7 (14)
Yes	71.4 (15)	28.6 (6)
Risk Categories		
Low	50.0 (4)	50.0 (4)
Moderate	50.0 (16)	50.0 (16)
High	0.0 (0)	0.0 (0)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	21.7	21.3
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for COURAGE HOUSE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (12)	100. (8)
Race		
White	91.7 (11)	100.0 (8)
Non-white	8.3 (1)	0.0 (0)
Marital Status		
Married	41.7 (5)	0.0 (0)
Single/not married	58.3 (7)	100.0 (8)
Age Category		
16 to 23	8.3 (1)	50.0 (4)
24 to 30	16.7 (2)	25.0 (2)
31-39	58.3 (7)	12.5 (1)
40+	16.2 (2)	12.5 (1)
Mean Age	37.3	30.5
SD	7.7	10.2

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for COURAGE HOUSE by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.1	0.1
SD	0.3	0.4
Previous Conviction	**% (N)**	**% (N)**
No	91.7 (11)	100.0 (8)
Yes	8.3 (1)	.0 (0)
Offense Level		
Felony 1	N/A	N/A
Felony 2	N/A	N/A
Felony 3	8.3 (1)	12.5 (1)
Felony 4	41.7 (5)	0.0 (0)
Felony 5/M	50.0 (6)	87.5 (7)
Offense Category		
Violent/person	16.7 (2)	12.5 (1)
Sex	N/A	N/A
Drugs	58.3 (7)	37.5 (3)
Property	25.0 (3)	37.5 (3)
Traffic/DUI	N/A	N/A
Other	0.0 (0)	12.5 (1)
Substance Abuse Problem		
No	8.3 (1)	0.0 (0)
Yes	91.7 (11)	100.0 (8)
Employment Problem		
No	58.3 (7)	25.0 (2)
Yes	41.7 (5)	75.0 (6)
Emotional Problem		
No	33.3 (4)	12.5 (1)
Yes	66.7 (8)	87.5 (7)
Risk Categories		
Low	25.0 (3)	12.5 (1)
Moderate	75.0 (9)	87.5 (7)
High	N/A	N/A
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	20.8	23.2
Overall	N/A	N/A

*Difference significant at $p<.05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Courage House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	5.0 (1)	0.0 (0)	6.3 (1)	0.0 (0)
Comparison	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Successful Completers				
Treatment	8.3 (1)	0.0 (0)	11.1 (1)	0.0 (0)
Comparison	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Courage House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	5.0 (1)	0.0 (0)	6.3 (1)	0.0 (0)
Comparison	10.0 (2)	25.0 (1)	6.3 (1)	0.0 (0)
Successful Completers				
Treatment	8.3 (1)	0.0 (0)	11.1 (1)	0.0 (0)
Comparison	8.3 (1)	0.0 (0)	11.1 (1)	0.0 (0)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Courage House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	65.0 (13)	50.0 (2)	68.8 (11)	0.0 (0)
Comparison	35.0 (7)	0.0 (0)	43.8 (7)	0.0 (0)
Successful Completers				
Treatment	50.0 (6)	66.7 (2)	44.4 (4)	0.0 (0)
Comparison	33.3 (4)	0.0 (0)	44.4 (4)	0.0 (0)

*Difference significant at p<.05

Crossroads Center for Change

Crossroads Center for Change is a Halfway House located in Mansfield, Ohio. This facility serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Crossroads Center for Change has been in operation since 1965 and is contracted to serve 62 men (8 of which are on Electronic Detention). This facility is funded by ODRC, United Way, Richland County and grants. Services include substance abuse treatment, mental health and dual diagnosis treatment, anger management/domestic violence, cognitive restructuring, parenting, grief issues, health, employment readiness, family and aftercare. Crossroads was visited by a University of Cincinnati research team on October 4, 2006. At the time of the visit, there were 45 residential clients and 8 clients on electronic detention. Rich Steele was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services via group treatment, administration of assessments and carrying a caseload of clients.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach.

Recommendations for Improvement:

- While the program consults the literature related to effective interventions with offenders via local and national conferences, non-peer reviewed journals, and staff review of curricula, the program should access peer-reviewed articles and books and ensure that evidence-based practices permeates all aspects of treatment.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some tension and unresolved conflict between staff and management have made it difficult for staff and management to work harmoniously.
- While funding has been relatively stable the past 2 years, some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More initial staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses several assessments, including the Pre-post Inventory, a psychosocial self-report and general assessment, and the SASSI to measure substance abuse need.
- The Pre-post Inventory measures several important responsivity factors, including motivation, mental health, anxiety and self-esteem.

Recommendations for Improvement:

- The program is currently using the Pre-post inventory as a risk/need tool. However, this tool is not predictive of recidivism. While the program can continue to utilize this tool as a responsivity assessment, they should also adopt a risk/need tool that classifies offenders by risk for recidivism and identifies criminogenic need factors (such as the LSI-R, the Wisconsin Risk/Need assessment or COMPAS).
- The program should consider using the SASSI for all offenders in the program rather than half the population.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, problem solving, family, relapse prevention, and employment).
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders spend an adequate amount of time in structured therapeutic activity, including treatment, education or employment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out and site checks.
- Staff are matched to groups based on experience and skill level and clients and matched to caseloads based upon specialty area and race.
- Offenders are given the opportunity to provide input into the structure of the program via community meetings and meetings with caseworkers.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 77%, which falls within the recommended range of 65 to 85%.

- The program teaches offenders to monitor and anticipate high risk situations via processing, homework assignments, group activities, and relapse prevention planning.
- Approximately 85% of the families participate in family intervention provided by the program.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program; approximately 80% of offenders participate in such services.

Recommendations for Improvement:

- While the program has cognitive-behavioral elements, substance abuse treatment still uses 12-step concepts and the overall model is eclectic.
- While several of the groups use some role-playing, the emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Although offenders are matched to interventions based on need, risk and responsivity factors should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- Although the procedure by which offenders are reinforced is varied and seen as valuable for shaping behavior, it should be improved so that rewards are immediate, consistently applied, individualized and offenders should clearly know why they are being reinforced.
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, seen as valuable in extinguishing behavior, individualized, immediately applied, varied and not spread out.   Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, supervision of training protocol for treatment curriculum, staff feedback, supervision of assessments, and monitoring of aftercare program.
- The program has been formally evaluated in the past via both a process and outcome evaluation.

Recommendations for Improvement:

- The program should provide regular observation of staff delivering treatment with feedback regarding delivery skills. Likewise, the program should provide increased monitoring of both contractual providers and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for CROSSROADS by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (135)	50.0 (135)
Female	N/A	N/A
Race		
White	50.0 (112)	50.0 (112)
Non-white	50.0 (23)	50.0 (23)
Marital Status		
Married	35.9 (14)	64.1 (25)
Single/not married	52.0 (119)	48.0 (110)
Age Category		
16 to 23	53.8 (43)	46.3 (37)
24 to 30	53.4 (39)	46.6 (34)
31-39	51.5 (34)	48.5 (32)
40+	37.3 (19)	62.7 (32)
Mean Age	32.4	31.9
SD	9.1	10.3

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for CROSSROADS by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.3	0.7
SD	1.8	1.1
Previous Conviction	**% (N)**	**% (N)**
No	50.6 (85)	49.4 (83)
Yes	49.0 (50)	51.0 (52)
Offense Level*		
Felony 1	93.3 (14)	6.7 (1)
Felony 2	73.9 (17)	26.1 (6)
Felony 3	51.8 (29)	48.2 (27)
Felony 4	45.5 (35)	54.5 (420
Felony 5/M	40.4 (40)	59.6 (59)
Offense Category		
Violent/person	58.5 (38)	41.5 (27)
Sex	N/A	N/A
Drugs	48.1 (37)	51.9 (40)
Property	39.1 (34)	60.9 (53)
Traffic/DUI	66.7 (10)	33.3 (5)
Other	61.5 (16)	38.5 (10)
Substance Abuse Problem*		
No	15.8 (3)	84.2 (16)
Yes	52.6 (132)	47.4 (119)
Employment Problem		
No	48.9 (85)	51.1 (89)
Yes	52.1 (50)	47.9 (46)
Emotional Problem		
No	51.0 (102)	49.0 (98)
Yes	47.1 (33)	52.9 (37)
Risk Categories		
Low	50.0 (8)	50.0 (8)
Moderate	50.0 (101)	50.0 (101)
High	50.0 (26)	50.0 (26)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	33.5	32.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for CROSSROADS by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (81)	100.0 (54)
Female	N/A	N/A
Race		
White	80.2 (65)	87.0 (47)
Non-white	19.8 (16)	13.0 (7)
Marital Status		
Married	11.3 (9)	9.4 (5)
Single/not married	88.8 (71)	90.6 (48)
Age Category		
16 to 23	33.3 (27)	29.6 (16)
24 to 30	25.9 (21)	33.3 (18)
31-39	25.9 (21)	24.1 (13)
40+	14.8 (12)	13.0 (7)
Mean Age	32.8	31.8
SD	9.8	7.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for CROSSROADS by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.2	1.5
SD	1.8	1.7
Previous Conviction	% (N)	% (N)
No	69.1 (56)	53.7 (29)
Yes	30.9 (25)	46.3 (25)
Offense Level		
Felony 1	13.6 (11)	5.6 (3)
Felony 2	12.3 (10)	13.0 (7)
Felony 3	21.0 (17)	22.2 (12)
Felony 4	23.5 (19)	29.6 (16)
Felony 5/M	29.6 (24)	29.6 (16)
Offense Category		
Violent/person	28.4 (23)	27.8 (15)
Sex	N/A	N/A
Drugs	32.1 (26)	20.4 (11)
Property	22.2 (18)	29.6 (16)
Traffic/DUI	6.2 (5)	9.3 (5)
Other	11.1 (9)	13.0 (7)
Substance Abuse Problem		
No	2.5 (2)	1.9 (1)
Yes	97.5 (79)	98.1 (53)
Employment Problem*		
No	77.8 (63)	40.7 (22)
Yes	22.2 (18)	59.3 (32)
Emotional Problem		
No	79.0 (64)	70.4 (38)
Yes	21.0 (17)	29.6 (16)
Risk Categories*		
Low	9.9 (8)	0.0 (0)
Moderate	77.8 (63)	70.4 (38)
High	12.3 (10)	29.6 (16)
Average risk scores	Mean (N)	Mean (N)
Males*	30.4	38.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Crossroads Center for Change

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	37.8 (51) *	12.5 (1)	33.7 (34) *	61.5 (16)
Comparison	24.4 (33)	12.5 (1)	20.8 (21)	42.3 (11)
Successful Completers				
Treatment	30.9 (25)	12.5 (1)	31.7 (20)	40.0 (4)
Comparison	21.0 (17)	12.5 (1)	19.0 (12)	40.0 (4)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Crossroads Center for Change

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.2 (57) *	37.5 (3)	36.6 (37) *	65.4 (17)
Comparison	28.9 (39)	37.5 (3)	22.8 (23) *	50.0 (13)
Successful Completers				
Treatment	35.8 (29)	37.5 (3)	34.9 (22)	40.0 (4)
Comparison	28.4 (23)	37.5 (3)	22.2 (14)	60.0 (6)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Crossroads Center for Change

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.7 (63) *	12.5 (1)	45.5 (46) *	61.5 (16)
Comparison	28.1 (38)	12.5 (1)	25.7 (26)	42.3 (11)
Successful Completers				
Treatment	37.0 (30)	12.5 (1)	38.1 (24)	50.0 (5)
Comparison	25.9 (21)	12.5 (1)	23.8 (15)	50.0 (5)

*Difference significant at p<.05

Dayton VOA, McMahon Hall

Dayton VOA, McMahon Hall is a Halfway House operated by Volunteers of America and located in Dayton, Ohio. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Dayton VOA has been in operation since 2001 and is contracted to serve 85 men. This facility is funded by ODRC and Montgomery County Probation. Services include sex offender treatment, victim empathy, substance abuse treatment, anger management, life-skills, and employment readiness. Dayton VOA was visited by a University of Cincinnati research team on November 28, 2006. At the time of the visit, there were 68 offenders. Sarah Boettner was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, formally training, and supervising staff.
- The program director provides direct services, via group treatment to offenders in the program.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues including funding cuts have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- Staff should receive additional formalized initial training and more staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

- Staff have a limited amount of input into the structure of the program.

Assessment

Strengths:

- The program identifies and follows rational exclusionary criteria for residents.
- The program uses a general risk/need assessment to ascertain level of risk for recidivism and the Static 99 as a sex offender specific risk assessment.
- The program also uses an adult diagnostic, level of care, drug/alcohol, mental status exam, and a lethality assessment.
- The program provides re-assessment of risk and need factors.

Recommendations for Improvement:

- While the program follows rational exclusionary criteria, nearly one third of the offenders admitted were described as inappropriate for the services rendered.
- The program should utilize a needs assessment that assesses a range of criminogenic need factors.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- The program's average length of stay for the non-sex offenders is 3-4 months, which falls within the 3-9 month window for an appropriate length of stay.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out and house checks.
- Staff are matched to groups based on experience and skill level.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program, such as a suggestion box, community meeting, resident spokesperson and monthly survey.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The primary treatment model is eclectic rather than a cognitive-behavioral model. Models used also include 12-step, and reality therapy.
- The program's average length of stay for sex offenders is 8 months; it should be at least 12 months for moderate to high risk sex offender programming.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that they outweigh punishers by a ratio of at least 4 to 1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are immediate, consistently applied, individualized, undesirable by the offender, escape is impossible, punishers are not spread out, and alternative prosocial behavior is taught.   Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 33%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While offenders are referred to external providers for aftercare, the percentage of offenders who participate in such services is unclear.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, conducting offender re-assessments, staff feedback, and monitor program and staff certification updates.
- The program has been formally evaluated in the past via an outcome evaluation.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of both contractual and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for DAYTON VOA by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (218)	50.0 (218)
Female	N/A	N/A
Race		
White	50.0 (122)	50.0 (122)
Non-white	50.0 (96)	50.0 (96)
Marital Status		
Married	42.9 (18)	57.1 (24)
Single/not married	52.8 (200)	47.2 (179)
Age Category		
16 to 23	53.6 (60)	46.4 (52)
24 to 30	42.1 (40)	57.9 (55)
31-39	48.1 (50)	51.9 (54)
40+	54.4 (68)	45.6 (57)
Mean Age	36.0	34.9
SD	11.4	11.7

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for DAYTON VOA by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.7	1.1
SD	1.7	1.8
Previous Conviction*	**% (N)**	**% (N)**
No	61.6 (143)	38.4 (89)
Yes	36.8 (75)	63.2 (129)
Offense Level*		
Felony 1	58.2 (53)	41.8 (38)
Felony 2	52.7 (39)	47.3 (35)
Felony 3	36.3 (37)	63.7 (65)
Felony 4	50.0 (36)	50.0 (36)
Felony 5/M	54.6 (53)	45.4 (44)
Offense Category*		
Violent/person	54.5 (73)	45.5 (61)
Sex	50.0 (57)	50.0 (57)
Drugs	56.0 (47)	44.0 (37)
Property	38.7 (29)	61.3 (46)
Traffic/DUI	100.0 (1)	0.0 (0)
Other	39.3 (11)	60.7 (17)
Substance Abuse Problem		
No	47.8 (44)	52.2 (480
Yes	50.6 (174)	49.4 (170)
Employment Problem*		
No	37.6 (67)	62.4 (111)
Yes	58.5 (151)	41.5 (107)
Emotional Problem		
No	52.5 (148)	47.5 (134)
Yes	45.5 (70)	54.5 (84)
Risk Categories		
Low	50.0 (19)	50.0 (19)
Moderate	50.0 (150)	50.0 (150)
High	50.0 (49)	50.0 (49)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	32.9	32.2
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for DAYTON VOA by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (60)	100.0 (158)
Female	N/A	N/A
Race		
White	61.7 (37)	53.8 (85)
Non-white	38.3 (23)	46.2 (73)
Marital Status		
Married	13.3 (8)	6.3 (10)
Single/not married	86.7 (52)	93.7 (148)
Age Category*		
16 to 23	11.7 (7)	33.5 (53)
24 to 30	15.0 (9)	19.6 (31)
31-39	26.7 (16)	21.5 (34)
40+	46.7 (28)	25.3 (40)
Mean Age	41.3	34.0
SD	11.2	10.9

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for DAYTON VOA by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.5 (60)	1.8 (158)
SD	1.3	1.9
Previous Conviction	% (N)	% (N)
No	56.7 (34)	69.0 (109)
Yes	43.3 (26)	31.0 (49)
Offense Level		
Felony 1	35.0 (21)	20.3 (32)
Felony 2	13.3 (8)	19.6 (31)
Felony 3	21.7 (13)	15.2 (24)
Felony 4	11.7 (7)	18.4 (29)
Felony 5/M	18.3 (11)	26.6 (42)
Offense Category*		
Violent/person	35.0 (21)	32.9 (52)
Sex	36.7 (22)	22.2 (35)
Drugs	15.0 (9)	24.1 (38)
Property	5.0 (3)	16.5 (26)
Traffic/DUI	0.0 (0)	0.6 (1)
Other	8.3 (5)	3.8 (6)
Substance Abuse Problem*		
No	33.3 (20)	15.2 (24)
Yes	66.7 (40)	84.8 (134)
Employment Problem*		
No	55.0 (33)	21.5 (34)
Yes	45.0 (27)	78.5 (124)
Emotional Problem		
No	61.7 (37)	70.3 (111)
Yes	38.3 (23)	29.7 (47)
Risk Categories		
Low	18.3 (11)	5.1 (8)
Moderate	71.7 (43)	67.7 (107)
High	10.0 (6)	27.2 (43)
Average risk scores	Mean (N)	Mean (N)
Males	26.6 (60)	35.3 (158)
Females	N/A	N/A
Overall	26.6 (60)	35.3 (158)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Dayton VOA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	32.1 (70)	21.1 (4)	28.0 (42)	49.0 (24)
Comparison	27.1 (59)	15.8 (3)	24.0 (36)	40.8 (20)
Successful Completers				
Treatment	13.3 (8)	0.0 (0)	16.3 (7)	16.7 (1)
Comparison	21.7 (13)	18.2 (2)	20.9 (9)	33.3 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Dayton VOA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.8 (89)	26.3 (5)	37.3 (56)	57.1 (28)
Comparison	34.4 (75)	15.8 (3)	30.7 (46)	53.1 (26)
Successful Completers				
Treatment	20.0 (12)	9.1 (1)	23.3 (10)	16.7 (1) *
Comparison	33.3 (20)	18.2 (2)	30.2 (13)	83.3 (5)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Dayton VOA

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.4 (86)	10.5 (2)	37.3 (56)	57.1 (28)
Comparison	33.5 (73)	10.5 (2)	32.7 (49)	44.9 (22)
Successful Completers				
Treatment	15.0 (9) *	0.0 (0)	16.3 (7)	33.3 (2)
Comparison	31.7 (19)	9.1 (1)	32.6 (14)	66.7 (4)

*Difference significant at p<.05

Diversified Community Services

Diversified Community Services is a Halfway House located in Columbus, Ohio. This facility serves adult males placed on probation as well as parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Diversified Community Services has been in operation since 1992 and is contracted to serve 47 men. This facility is funded by ODRC. Services include parenting, substance abuse and employment. Diversified Community Services was visited by a University of Cincinnati research team on October 11, 2006. At the time of the visit, there were 45 offenders. Van Chambers was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in the formal training and supervising of staff.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should have greater involvement in hiring new staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Although funding is stable, lack of adequate funding has made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff do have access to clinical supervision as needed, they should receive such supervision on a regular basis.

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Ohio Risk Assessment, Diversified Needs Assessment, and a substance abuse psychosocial assessment to assess several criminogenic need domains.

Recommendations for Improvement:

- While the program uses the Ohio Risk Assessment to measure risk, this assessment was not found consistently in the files.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles.
- The program should use validated tools to assess offender needs.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- Some program interventions focus on criminogenic need areas (i.e. criminal attitude, anger, substance abuse and employment).
- The program's average length of stay is 5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Staff are matched to groups based on desire to provide treatment in a particular area.
- The types of rewards used by the program appear to be appropriate and there is a wide range of reinforcements used.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- Although some of the program's targets are criminogenic in nature, some are also non-criminogenic such as parenting and inner child.
- Structured curricula or manuals should be used for all groups. The unstructured nature of the large majority of groups make it difficult to determine if criminogenic needs are the primary treatment targets.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10 and all groups should be facilitated from beginning to end by staff.
- While there is some evidence of use of cognitive behavioral strategies, treatment is primarily structured using a Therapeutic Community model.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, phone calls and drug testing), the monitoring mechanisms should be enhanced.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- Although a "hats off" meeting is conducted as needed to provide offenders with input into the structure of the program, there should be a regular mechanism for offender input.
- The frequency of use of rewards should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, desired by the offender, individualized and seen as valuable for shaping behavior,
- Appropriate punishers should be used by the program. Punishers such as singing, polishing doorknobs for hours, ghost status, sweeping sunlight from the floor and jumping jacks should be discontinued. Punishers should primarily involve loss of privileges.
- The procedure for effectively punishing behavior could be enhanced by ensuring that punishers are used only to extinguish behaviors and that punishers are individualized (avoid group punishers), they appropriately match the infraction, escape is impossible and that alternative prosocial behaviors are taught to offenders. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- While there are specific criteria for program completion (secure job and residence, bank account and sponsor), program completion should also be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 55%. This rate should fall between 65 and 85%.
- While the program provides a family support group, only about 25% of the families participate and there is no structured curriculum designed to teach families skills.
- Aftercare services, beyond probation or parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, and observation of treatment groups.

Recommendations for Improvement:

- In order to improve quality assurance, when services are monitored by a supervisor, staff should be given structured feedback about their performance.
- The program should more closely monitor both contractual and external providers via the regular observation of groups and services.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for DIVERSIFIED by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	50.0 (140)	50.0 (140)
Female	N/A	N/A
Race		
White	50.0 (59)	50.0 (59)
Non-white	50.0 (81)	50.0 (81)
Marital Status		
Married	53.6 (15)	46.4 (13)
Single/not married	51.7 (125)	48.3 (117)
Age Category*		
16 to 23	37.0 (20)	63.0 (34)
24 to 30	35.4 (28)	64.6 (51)
31-39	64.5 (49)	35.5 (27)
40+	60.6 (43)	39.4 (28)
Mean Age*	38.1	33.4
SD	9.8	10.0

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for DIVERSIFIED by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.0	1.5
SD	1.7	1.5
Previous Conviction	**% (N)**	**% (N)**
No	44.0 (22)	56.0 (28)
Yes	51.3 (118)	48.7 (112)
Offense Level*		
Felony 1	74.5 (41)	25.5 (14)
Felony 2	50.0 (37)	50.0 (37)
Felony 3	44.1 (26)	55.9 (33)
Felony 4	41.5 (17)	58.5 (24)
Felony 5/M	37.3 (19)	62.7 (32)
Offense Category		
Violent/person	54.5 (54)	45.5 (45)
Sex	50.0 (8)	50.0 (8)
Drugs	40.9 (18)	59.1 (26)
Property	55.3 (52)	44.7 (42)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	28.0 (7)	72.0 (18)
Substance Abuse Problem*		
No	4.3 (2)	95.7 (44)
Yes	59.0 (138)	41.0 (96)
Employment Problem*		
No	42.6 (40)	57.4 (54)
Yes	53.8 (100)	46.2 (86)
Emotional Problem*		
No	56.9 (99)	43.1 (75)
Yes	38.7 (41)	61.3 (65)
Risk Categories		
Low	50.0 (3)	50.0 (3)
Moderate	50.0 (75)	50.0 (75)
High	50.0 (62)	50.0 (62)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	39.7	38.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for DIVERSIFIED by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (68)	100.0 (72)
Female	N/A	N/A
Race		
White	47.1 (32)	37.5 (27)
Non-white	52.9 (36)	62.5 (45)
Marital Status		
Married	14.7 (10)	6.9 (5)
Single/not married	85.3 (58)	93.1 (67)
Age Category		
16 to 23	13.2 (9)	15.3 (11)
24 to 30	16.2 (11)	23.6 (17)
31-39	41.2 (28)	29.2 (21)
40+	29.4 (20)	31.9 (23)
Mean Age	39.0	37.2
SD	9.8	9.7

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for DIVERSIFIED by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2.4	1.7
SD	2.2	1.0
Previous Conviction	% (N)	% (N)
No	16.2 (11)	15.3 (11)
Yes	83.8 (57)	84.7 (61)
Offense Level		
Felony 1	29.4 (20)	29.2 (21)
Felony 2	26.5 (18)	26.4 (19)
Felony 3	14.7 (10)	22.2 (16)
Felony 4	16.2 (11)	8.3 (6)
Felony 5/M	13.2 (9)	13.9 (10)
Offense Category		
Violent/person	33.8 (23)	43.1 (31)
Sex	7.4 (5)	4.2 (3)
Drugs	14.7 (10)	11.1 (8)
Property	39.7 (27)	34.7 (25)
Traffic/DUI	0.0 (0)	1.4 (1)
Other	4.4 (3)	5.6 (4)
Substance Abuse Problem		
No	1.5 (1)	1.4 (1)
Yes	98.5 (67)	98.6 (71)
Employment Problem*		
No	47.1 (32)	11.1 (8)
Yes	52.9 (36)	88.9 (64)
Emotional Problem		
No	69.1 (47)	72.2 (52)
Yes	30.9 (21)	27.8 (20)
Risk Categories		
Low	2.9 (2)	1.4 (1)
Moderate	55.9 (38)	51.4 (34)
High	41.2 (28)	47.2 (34)
Average risk scores	Mean (N)	Mean (N)
Males	38.7	40.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Diversified Community Services

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.3 (48)	33.3 (1)	28.0 (21)	41.9 (26)
Comparison	38.6 (54)	33.3 (1)	36.0 (27)	41.9 (26)
Successful Completers				
Treatment	29.4 (20)	0.0 (0)	21.1 (8)	42.9 (12)
Comparison	35.3 (24)	0.0 (0)	34.2 (13)	39.3 (11)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Diversified Community Services

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.9 (60)	33.3 (1)	34.7 (26)	53.2 (33)
Comparison	45.7 (64)	33.3 (1)	41.3 (31)	51.6 (32)
Successful Completers				
Treatment	36.8 (25)	0.0 (0)	28.9 (11)	50.0 (14)
Comparison	41.2 (28)	0.0 (0)	36.8 (14)	50.0 (14)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Diversified Community Services

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.1 (59) *	33.3 (1)	33.3 (25)	53.2 (33)
Comparison	30.7 (43)	33.3 (1)	21.3 (16)	41.9 (26)
Successful Completers				
Treatment	38.2 (26)	0.0 (0)	26.3 (10)	57.1 (16)
Comparison	33.8 (23)	0.0 (0)	23.7 (9)	50.0 (14)

*Difference significant at p<.05

Fresh Start 1

Fresh Start 1 is one of three Fresh Start halfway house facilities located in Cleveland, Ohio. This facility serves adult females placed on probation or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Fresh Start has been in operation since 1968 and Fresh Start 1 has a capacity to serve 18 women. This facility is funded by ODRC as well as ADAS/BCC. Services include substance abuse, education, employment, domestic violence, and life skills. Fresh Start 1 was visited by a University of Cincinnati research team on August 31, 2006 and October 5, 2006. At the time of both visits, there were 16 residents. Ann Seaman was Fresh Start 1's identified program director.

Program Leadership/Development

Strengths:

- The program director has a significant role in selecting and training staff.
- The program director provides direct services via conducting groups and carrying a caseload of clients.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- The program director should provide closer supervision to staff.
- While the curriculum was reviewed before its adoption, the program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff have a moderate amount of input into the structure of the program and there are ethical guideline in place for staff to follow.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff are evaluated annually, but the assessment includes limited ratings on the service delivery skills of staff.
- Staff should receive additional initial training and more training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- While treatment/clinical staff support rehabilitative goals, there is limited support by the security staff.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.

Recommendations for Improvement:

- While the program uses a psychosocial assessment and a criminal attitudes tool, it does not utilize a validated risk or risk/need tool.
- While the program uses a validated tool to assess criminal attitude, it does not assess any other criminogenic need domains with validated tools, such as the SASSI or ASI for substance abuse.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- The program should provide re-assessment of risk and need factors.
- The program should be targeting moderate to high risk offenders. Since risk is not assessed by the program, there is no way to identify such offenders.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs and phone calls in and out.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature, many are non-criminogenic such as self-esteem, mental health, physical health, and race/ethnicity issues. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The primary treatment model is 12-step and self-help rather than a cognitive-behavioral model.

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions and staff should be matched to groups based on experience and skill level.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, related to prosocial behavior , desired by the offenders and individualized.
- The procedure by which offenders are punished should be improved so that punishers are immediate, individualized, varied and escape from punishment is impossible. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Not all groups are facilitated from beginning to end by staff.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- While the program attempts to provide a family intervention component, only about 10% of the families participate.
- While aftercare services are provided by the program, only about 50% of offenders participate in such services. Likewise, aftercare consists of a process group rather than a group designed to practice skills offenders have learned while in the program.

Quality Assurance

Strengths:

- The program is licensed by ODADAS.
- The program uses some internal quality review mechanisms including file review, client surveys, observation of treatment groups, and staff feedback.

Recommendations for Improvement:

- The program is not ACA certified.
- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.
- The program (Fresh Start) has been formally evaluated in the past via both a process and outcome evaluation but performed worse than the comparison group on various recidivism measures.

Fresh Start 2

Fresh Start 2 is one of three Fresh Start halfway house facilities located in Cleveland, Ohio. This facility serves adult males placed on probation or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Fresh Start has been in operation since 1968 and Fresh Start 2 has a capacity to serve 18 men. This facility is funded by ODRC. Services are primarily related to substance abuse treatment. Fresh Start 2 was visited by a University of Cincinnati research team on September 1, 2006. At the time of the visit there were 16 residents. Michael Daugherty was Fresh Start 2's identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in designing the program as it currently operates.
- The program director has a moderate role in selecting staff.
- The program director plays a significant role in supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- The program director has a limited role in formalized training of staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff appear to support the treatment goals and there are ethical guideline in place for staff to follow.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff are evaluated annually, but the assessment includes limited ratings on the service delivery skills of staff.

- Staff should receive additional initial training and more training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff have very limited input into the structure of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.

Recommendations for Improvement:

- While the program uses a psychosocial assessment, it does not utilize a validated risk or risk/need tool.
- The program should assess a range of criminogenic need domains using validated tools.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- The program should provide re-assessment of risk and need factors.
- The program should be targeting moderate to high risk offenders. Since risk is not assessed by the program, there is no way to identify such offenders.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. substance abuse, antisocial attitudes, education and employment).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs and phone calls in and out.
- There are mechanisms that provide offenders with the opportunity for input into the structure of the program including a community meeting.
- The types of punishers used by the program appear appropriate.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The primary treatment model is 12-step and education rather than a cognitive-behavioral model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for both groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions and staff should be matched to groups based on experience and skill level.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. A structured reinforcement system should be developed.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, related to prosocial behavior , desired by the offenders and individualized.
- The procedure by which offenders are punished should be improved so that punishers are immediate, individualized, varied, escape from punishment is impossible and alternative prosocial behaviors are taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program needs to offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 50% of offenders participate in such services. Likewise, aftercare consists of a process group rather than a group designed to practice skills offenders have learned while in the program.

Quality Assurance

Strengths:

- The program is licensed by ODADAS.
- The program uses some internal quality review mechanisms including file review, client surveys, observation of treatment groups, and staff feedback.

Recommendations for Improvement:

- The program is not ACA certified.
- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.
- The program (Fresh Start) has been formally evaluated in the past via both a process and outcome evaluation but performed worse than the comparison group on various recidivism measures.

Fresh Start 6 is one of three Fresh Start halfway house facilities located in Cleveland, Ohio. This facility serves adult males placed on probation or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Fresh Start has been in operation since 1968 and Fresh Start 6 has a capacity to serve 50 men. This facility is funded by ODRC. Services are primarily related to substance abuse treatment. Fresh Start 6 was visited by a University of Cincinnati research team on August 31, 2006. At the time of the visit there were 40 residents. Joyce Jordan and Ruby Black were the identified program directors of Fresh Start 6.

Program Leadership/Development

Strengths:

- The program director had a moderate role in designing the program as it currently operates.
- The program director has a moderate role in selecting staff and provides formalized training of staff.
- The program director plays a significant role in supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management work harmoniously.

Recommendations for Improvement:

- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff appear to support the treatment goals and there are ethical guideline in place for staff to follow.
- Staff have a moderate amount of input into the structure of the program.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff are evaluated annually, but the assessment includes limited ratings on the service delivery skills of staff.

- More training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.

Recommendations for Improvement:

- While the program uses a psychosocial assessment and a criminal attitudes tool, it does not utilize a validated risk or risk/need tool.
- While the program uses a validated tool to assess criminal attitude, it does not assess any other criminogenic need domains with validated tools, such as the SASSI or ASI for substance abuse.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- The program should provide re-assessment of risk and need factors.
- The program should be targeting moderate to high risk offenders. Since risk is not assessed by the program, there is no way to identify such offenders.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. substance abuse, anger, education and employment).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are mechanisms that provide offenders with the opportunity for input into the structure of the program including a community meeting.
- The types of punishers used by the program appear appropriate.
- The program completion rate is 74%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The primary treatment model is eclectic rather than a cognitive-behavioral model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be developed and consistently followed for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While there are some mechanisms in place to monitor offenders while in the community (drug tests. schedules and phone calls out) monitoring should be increased.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions and staff should be matched to groups based on experience and skill level.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. A structured reinforcement system should be developed.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, related to prosocial behavior , desired by the offenders and individualized.
- The procedure by which offenders are punished should be improved so that punishers are immediate, varied, escape from punishment is impossible and alternative prosocial behaviors are taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- While the program attempts to provide a family intervention component, only about 25% of the families participate and there is no structured curriculum designed to teach families skills.
- While aftercare services are provided by the program, only about 50% of offenders participate in such services. Likewise, aftercare consists of a process group rather than a group designed to practice skills offenders have learned while in the program.

Quality Assurance

Strengths:

- The program is licensed by ODADAS and is certified by ACA.
- The program uses some internal quality review mechanisms including file review, client surveys, observation of treatment groups, and staff feedback.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.
- The program (Fresh Start) has been formally evaluated in the past via both a process and outcome evaluation but performed worse than the comparison group on various recidivism measures.

DESCRIPTIVE AND OUTCOME DATA FOR FRESH START 1, 2 AND 6 COMBINED

Descriptive Statistics for FRESH START by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	50.0 (166)	50.0 (166)
Female	50.0 (15)	50.0 (15)
Race		
White	50.0 (71)	50.0 (71)
Non-white	50.0 (110)	50.0 (110)
Marital Status		
Married	41.7 (15)	58.3 (21)
Single/not married	51.7 (166)	48.3 (155)
Age Category*		
16 to 23	40.0 (30)	60.0 (45)
24 to 30	38.4 (33)	61.6 (53)
31-39	53.6 (52)	46.4 (45)
40+	63.5 (66)	36.5 (38)
Mean Age*	37.6	32.1
SD	9.7	9.8

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for FRESH START by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.6	1.2
SD	2.0	2.2
Previous Conviction*	**% (N)**	**% (N)**
No	63.4 (128)	36.6 (74)
Yes	33.1 (53)	66.9 (107)
Offense Level*		
Felony 1	77.8 (14)	22.2 (4)
Felony 2	52.5 (21)	47.5 (19)
Felony 3	45.3 (29)	54.7 (35)
Felony 4	34.4(22)	65.6 (42)
Felony 5/M	54.0 (95)	46.0 (81)
Offense Category*		
Violent/person	57.4 (62)	42.6 (46)
Sex	N/A	N/A
Drugs	56.4 (84)	43.6 (65)
Property	35.6 (21)	64.4 (38)
Traffic/DUI	60.0 (3)	40.0 (2)
Other	26.8 (11)	73.2 (30)
Substance Abuse Problem*		
No	8.8 (3)	91.2 (31)
Yes	54.3 (178)	45.7 (150)
Employment Problem*		
No	14.9 (20)	85.1 (114)
Yes	70.6 (161)	29.4 (67)
Emotional Problem*		
No	44.3 (108)	55.7 (136)
Yes	61.9 (73)	38.1 (45)
Risk Categories		
Low	50.0 (7)	50.0 (7)
Moderate	50.0 (129)	50.0 (129)
High	50.0 (45)	50.0 (45)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	33.4	30.8
Females	2.1	2.0
Overall*	35.5	32.8

*Difference significant at p<.05

Descriptive Statistics for FRESH START by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	94.7 (108)	86.6 (58)
Female	5.3 (6)	13.4 (9)
Race		
White	37.7 (43)	41.8 (28)
Non-white	62.3 (71)	58.2 (39)
Marital Status		
Married	9.6 (11)	6.0 (4)
Single/not married	90.4 (103)	94.0 (63)
Age Category		
16 to 23	13.2 (15)	22.4 (15)
24 to 30	19.3 (22)	16.4 (11)
31-39	28.1 (32)	29.9 (20)
40+	39.5 (45)	31.3 (21)
Mean Age	38.2	36.5
SD	9.5	10.0

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for FRESH START by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.7	1.3
SD	2.1	1.9
Previous Conviction	% (N)	% (N)
No	70.2 (80)	71.6 (48)
Yes	29.8 (34)	28.4 (19)
Offense Level		
Felony 1	7.9 (9)	7.5 (5)
Felony 2	8.8 (10)	16.4 (11)
Felony 3	14.9 (17)	17.9 (12)
Felony 4	12.3 (14)	11.9 (8)
Felony 5/M	56.1 (64)	46.3 (31)
Offense Category		
Violent/person	30.7 (35)	40.3 (27)
Sex	N/A	N/A
Drugs	50.0 (57)	40.3 (27)
Property	10.5 (12)	13.4 (9)
Traffic/DUI	1.8 (2)	1.5 (1)
Other	7.0 (8)	4.5 (3)
Substance Abuse Problem		
No	2.6 (3)	0.0 (0)
Yes	97.4 (111)	100.0 (67)
Employment Problem*		
No	16.7 (19)	1.5 (1)
Yes	83.3 (95)	98.5 (66)
Emotional Problem*		
No	64.9 (74)	50.7 (34)
Yes	35.1 (40)	49.3 (33)
Risk Categories		
Low	5.3 (6)	1.5 (1)
Moderate	71.9 (82)	70.1 (47)
High	22.8 (26)	28.4 (19)
Average risk scores	Mean (N)	Mean (N)
Males	33.7	32.9
Females	1.3	3.4
Overall	35.0	36.3

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Fresh Start Inc

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	21.5 (39) *	0.0 (0)	17.1 (22) *	37.8 (17)
Comparison	38.7 (70)	0.0 (0)	37.2 (48)	48.9 (22)
Successful Completers				
Treatment	19.3 (22) *	0.0 (0)	15.9 (13) *	34.6 (9)
Comparison	36.8 (42)	0.0 (0)	35.4 (29)	50.0 (13)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Fresh Start Inc

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	26.0 (47) *	0.0 (0)	22.5 (29) *	40.0 (18) *
Comparison	44.2 (80)	0.0 (0)	41.1 (53)	60.0 (27)
Successful Completers				
Treatment	21.9 (25) *	0.0 (0)	19.5 (16) *	34.6 (9)
Comparison	40.4 (46)	0.0 (0)	37.8 (31)	57.7 (15)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Fresh Start Inc

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	37.0 (67)	14.3 (1)	34.1 (44)	48.9 (22)
Comparison	37.0 (67)	0.0 (0)	34.1 (44)	51.1 (23)
Successful Completers				
Treatment	29.8 (34)	16.7 (1)	29.3 (24)	34.6 (9)
Comparison	31.6 (36)	0.0 (0)	29.3 (24)	46.2 (12)

*Difference significant at p<.05

Harbor Light—Salvation Army

Corrections Program

Harbor Light Salvation Army is a Halfway House located in Cleveland, Ohio. This facility operates two programs: a corrections program and a drug/alcohol program. The corrections program serves adult males and females on Transitional Control or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Harbor Light Salvation Army Corrections Program has been in operation since 1949 and is contracted to serve 175 men and 24 women. This facility is funded by ODRC. Services in the corrections program include substance abuse education, music therapy, women's issues, cognitive restructuring, life-skills, parenting, and employment readiness. Harbor Light Salvation Army was visited by a University of Cincinnati research team on August 30, 2006. At the time of the visit, there were 103 male and 10 female residents in the corrections program. Sharon Patterson was the identified corrections program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, formally training and actively supervising staff.
- The program is well established and is supported by the criminal justice community.

Recommendations for Improvement:

- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature and staff can attend local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is stable, some funding issues have made it difficult to operate the program as designed.
- Males and females should be kept separate in treatments groups.
- Problems or crises should be handled with a problem-solving approach and staff and management should attempt to resolve any conflict in order to work more harmoniously.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff regularly attend clinical staff meetings and agency meetings.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines, particularly administration and treatment staff.

Recommendations for Improvement:

- While staff receive some clinical supervision by a certified substance abuse counselor, staff should receive additional clinical supervision by a licensed professional such as a psychologist, counselor or social worker for non-substance related treatment.
- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff should have more input into the structure of the program
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment to classify offender risk levels.
- The program uses the Ohio Needs Assessment to assess criminogenic need areas and the SMAST to assess substance abuse issues.
- Offender risk levels are formally tracked and the program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- While the program uses a biopsychosocial tool to assess an offender's history, the program should have a spectrum of standardized and validated responsivity assessments to evaluate such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The program is effective at monitoring offenders while on passes to the community via electronic monitoring, drug testing, schedules/logs and phone calls in and out.
- All of the groups utilize a curriculum to structure the treatment and all groups are actively facilitated by staff.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Offenders have a mechanism (i.e. a community meeting) to provide input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via homework assignments and group activities.
- Program completion is determined via objective measures of offender improvement.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the program's targets are criminogenic in nature (i.e., substance abuse, victim awareness and thinking for a change), many are non-criminogenic such as parenting, life-skills, music therapy and Sista 2 Sista which targets areas such as victimization, self-esteem and women's issues. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- While there are elements of cognitive-behavioral treatment in the program such as the Thinking for a Change group, much of the treatment is based upon a 12-step, educational and eclectic model.
- There should be increased emphasis on structured skill building via the use of modeling and role playing prosocial skills. Currently these techniques are used almost exclusively in the Thinking for a Change group. They should be used across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions. Offenders should only attend groups that are identified as a need area for that individual.
- The frequency of rewards used to reinforce offender behavior needs to be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- Although the program attempts to provide offenders with a range of reinforcers, the procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The process by which offenders are punished could also be improved by improving staff consistency, individualizing the punisher, disallowing escape from punishers, immediately applying the punisher following the infraction and teaching prosocial alternatives.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- The program completion rate is 60%. This rate should fall between 65 and 85%.
- While the program provides families with a program overview and family activities, the program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services that are based upon a cognitive-behavioral model should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, recidivism tracking and observation of treatment services.
- The program just began collecting recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation.
- The program should provide increased monitoring of contractual and external providers consisting also of direct observation of treatment delivery.

Descriptive Statistics for HARBOR LIGHT/SALV ARMY CORRECTIONS by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (370)	50.0 (370)
Female	50.0 (28)	50.0 (28)
Race		
White	50.0 (123)	50.0 (123)
Non-white	50.0 (275)	50.0 (275)
Marital Status*		
Married	37.2 (42)	62.8 (71)
Single/not married	53.1 (355)	46.9 (313)
Age Category*		
16 to 23	58.1 (140)	41.9 (101)
24 to 30	51.4 (95)	48.6 (90)
31-39	45.2 (84)	54.8 (102)
40+	42.9 (79)	57.1 (105)
Mean Age*	32.7	35.2
SD	9.9	10.3

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for HARBOR LIGHT CORRECTIONS by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2.0	1.4
SD	1.4	1.7
Previous Conviction*	% (N)	% (N)
No	69.5 (191)	30.5 (84)
Yes	39.7 (207)	60.3 (314)
Offense Level*		
Felony 1	36.7 (33)	63.3 (57)
Felony 2	40.7 (85)	59.3 (124)
Felony 3	54.0 (122)	46.0 (104)
Felony 4	63.5 (80)	36.5 (46)
Felony 5/M	53.8 (78)	46.2 (67)
Offense Category*		
Violent/person	51.1 (189)	48.9 (181)
Sex	N/A	N/A
Drugs	57.9 (136)	42.1 (99)
Property	41.2 (54)	58.8 (77)
Traffic/DUI	83.3 (5)	16.7 (1)
Other	25.9 (14)	74.1 (40)
Substance Abuse Problem*		
No	36.5 (88)	63.5 (153)
Yes	55.9 (310)	44.1 (245)
Employment Problem*		
No	61.2 (255)	38.8 (162)
Yes	37.7 (143)	62.3 (236)
Emotional Problem*		
No	56.8 (334)	43.2 (254)
Yes	30.8 (64)	69.2 (144)
Risk Categories		
Low	50.0 (40)	50.0 (40)
Moderate	50.0 (272)	50.0 (272)
High	50.0 (86)	50.0 (86)
Average risk scores	Mean (N)	Mean (N)
Males	31.5	31.2
Females	1.4	1.4
Overall	32.6	32.8

*Difference significant at p<.05

Descriptive Statistics for HARBOR LIGHT/SALV ARMY CORRECTIONS by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender*		
Male	90.5 (171)	95.2 (199)
Female	9.5 (18)	4.8 (10)
Race		
White	32.8 (62)	29.2 (61)
Non-white	67.2 (127)	70.8 (148)
Marital Status*		
Married	16.9 (32)	4.8 (10)
Single/not married	83.1 (157)	95.2 (198)
Age Category*		
16 to 23	20.1 (38)	48.8 (102)
24 to 30	24.3 (46)	23.4 (49)
31-39	28.6 (54)	14.4 (30)
40+	27.0 (51)	13.4 (28)
Mean Age*	36.3	29.5
SD	10.1	8.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for HARBOR LIGHT CORRECTIONS by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.9	2.0
SD	1.4	1.4
Previous Conviction	**% (N)**	**% (N)**
No	50.8 (96)	45.5 (95)
Yes	49.2 (93)	54.5 (114)
Offense Level		
Felony 1	7.4 (14)	9.1 (19)
Felony 2	23.8 (45)	19.1 (40)
Felony 3	32.3 (61)	29.2 (61)
Felony 4	16.9 (32)	23.0 (48)
Felony 5/M	19.6 (37)	19.6 (37)
Offense Category		
Violent/person	49.7 (94)	45.5 (95)
Sex	N/A	N/A
Drugs	32.3 (61)	35.9 (75)
Property	13.2 (25)	13.9 (29)
Traffic/DUI	1.6 (3)	1.0 (2)
Other	3.2 (6)	3.8 (8)
Substance Abuse Problem		
No	22.2 (42)	22.0 (46)
Yes	77.8 (147)	78.0 (163)
Employment Problem*		
No	85.7 (162)	44.5 (93)
Yes	14.3 (27)	55.5 (116)
Emotional Problem		
No	83.1 (157)	84.7 (177)
Yes	16.9 (32)	15.3 (32)
Risk Categories*		
Low	14.8 (28)	5.7 (12)
Moderate	72.5 (137)	64.6 (135)
High	12.7 (24)	29.7 (62)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	27.3	34.8
Females	1.9	1.0
Overall*	29.1	35.8

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Harbor Light--Salv Army Corrections Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.7 (126)	25.0 (10)	30.1 (82)	39.5 (34)
Comparison	33.9 (135)	10.0 (4)	32.0 (87)	51.2 (44)
Successful Completers				
Treatment	19.0 (36) *	21.4 (6)	16.1 (22) *	33.3 (8)
Comparison	33.3 (63)	7.1 (2)	35.8 (49)	50.0 (12)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Harbor Light--Salv Army Corrections Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	33.9 (135) *	25.0 (10)	32.4 (88)	43.0 (37) *
Comparison	39.9 (159)	12.5 (5)	37.9 (103)	59.3 (51)
Successful Completers				
Treatment	20.6 (39) *	21.4 (6)	17.5 (24) *	37.5 (9)
Comparison	39.2 (74)	10.7 (3)	42.3 (58)	54.2 (13)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Harbor Light--Salv Army Corrections Program

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	48.0 (191) *	22.5 (9)	44.9 (122) *	69.8 (60) *
Comparison	26.9 (107)	10.0 (4)	26.5 (72)	36.0 (31)
Successful Completers				
Treatment	20.1 (38) *	3.6 (1)	19.0 (26) *	45.8 (11)
Comparison	29.1 (55)	10.7 (3)	31.4 (43)	37.5 (9)

*Difference significant at p<.05

Harbor Light—Salvation Army Drug/Alcohol Program

Harbor Light Salvation Army is a Halfway House located in Cleveland, Ohio. This facility operates two programs: a corrections program and a drug/alcohol program. The drug/alcohol program serves adult males, most of whom are on probation, but with some offenders on Transitional Control or parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Harbor Light Salvation Army Drug/Alcohol Program has been in operation since 1996 and is contracted to serve 20 men. This facility is funded by ODRC. Services in the drug/alcohol program consist of substance abuse treatment, anger management and cognitive restructuring. Harbor Light Salvation Army was visited by a University of Cincinnati research team on August 30, 2006. At the time of the visit, there were 18 men in the drug/alcohol program. Patricia Strauss was the identified drug-alcohol program director.

Program Leadership/Development

Strengths:

- The program director has a significant role in the creation of the current program and is involved in selecting, training, and actively supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- While the program receives some non-peer reviewed literature and staff can attend local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff regularly attend clinical staff meetings and agency meetings.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff receive some clinical supervision by a certified substance abuse counselor, staff should receive additional clinical supervision by a licensed professional such as a psychologist, counselor or social worker for non-substance related treatment such as Thinking for a Change and anger management.

- While staff are evaluated biannually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate interaction with residents.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a significant issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment to classify offender risk levels.
- The program uses the Ohio Needs Assessment to assess criminogenic need areas and the CIAI to assess substance abuse issues.
- The program primarily targets moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, and substance abuse).
- Offenders have a mechanism (i.e. a community meeting) to provide input into the structure of the program and offender input has resulted in programmatic changes.
- The types rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, discussion, homework assignments, and through group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While there are elements of cognitive-behavioral treatment in the program such as the Thinking for a Change group, treatment is also based upon a 12-step and educational model.
- Structured skill building via the use of modeling and role playing prosocial skills needs to be utilized across all groups. Currently these techniques are used almost exclusively in the Thinking for a Change group. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 1.5 months, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions. Offenders should only attend groups that are identified as a need area for that individual (i.e. anger management).
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards so that reinforcers outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized.
- The process by which offenders are punished could also be improved by improving staff consistency, individualizing the punisher, disallowing escape from punishers, immediately applying the punisher following the infraction, varying the types of punishers and teaching prosocial alternatives.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 95%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 30% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community versus talk-therapy and education.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.

Recommendations for Improvement:

- While the program uses a few internal quality review mechanisms such as file reviews and client surveys, internal quality assurance could be improved by providing more frequent observation of direct service with feedback to staff.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for HARBOR LIGHT DRUG/ALCOHOL by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	50.0 (74)	50.0 (74)
Female	N/A	N/A
Race		
White	50.0 (49)	50.0 (49)
Non-white	50.0 (25)	50.0 (25)
Marital Status		
Married	56.3 (9)	43.8 (7)
Single/not married	49.6 (65)	50.4 (66)
Age Category*		
16 to 23	64.3 (27)	35.7 (15)
24 to 30	44.1 (15)	55.9 (19)
31-39	33.3 (12)	66.7 (24)
40+	55.6 (20)	44.4 (16)
Mean Age	33.3	32.7
SD	10.9	9.9

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for HARBOR LIGHT DRUG/ALCOHOL by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	0.5	1.0
SD	0.9	1.6
Previous Conviction	% (N)	% (N)
No	46.8 (37)	53.2 (42)
Yes	53.6 (37)	46.4 (32)
Offense Level		
Felony 1	25.0 (1)	75.0 (3)
Felony 2	33.3 (3)	66.7 (6)
Felony 3	42.9 (9)	57.1 (12)
Felony 4	47.6 (20)	52.4 (22)
Felony 5/M	56.9 (41)	43.1 (31)
Offense Category*		
Violent/person	29.4 (10)	70.6 (24)
Sex	N/A	N/A
Drugs	70.0 (42)	30.0 (18)
Property	29.0 (9)	71.0 (22)
Traffic/DUI	85.7 (6)	14.3 (1)
Other	43.8 (7)	56.3 (9)
Substance Abuse Problem*		
No	9.1 (1)	90.9 (10)
Yes	53.3 (73)	46.7 (64)
Employment Problem*		
No	15.4 (10)	84.6 (55)
Yes	77.1 (64)	22.9 (19)
Emotional Problem		
No	51.3 (59)	48.7 (56)
Yes	45.5 (15)	54.5 (18)
Risk Categories		
Low	50.0 (2)	50.0 (2)
Moderate	50.0 (61)	50.0 (61)
High	50.0 (11)	50.0 (11)
Average risk scores*	Mean (N)	Mean (N)
Males	36.5	31.5
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for HARBOR LIGHT DRUG/ALCOHOL by Termination Status

Variable	HWH Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (64)	100.0 (10)
Female	N/A	N/A
Race		
White	65.6 (42)	70.0 (7)
Non-white	34.4 (22)	30.0 (3)
Marital Status		
Married	9.4 (6)	30.0 (3)
Single/not married	90.6 (58)	70.0 (7)
Age Category		
16 to 23	34.4 (22)	50.0 (5)
24 to 30	20.3 (13)	20.0 (2)
31-39	17.2 (11)	10.0 (1)
40+	28.1 (18)	20.0 (2)
Mean Age	33.7	30.7
SD	10.8	12.2

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for HARBOR LIGHT DRUG/ALCOHOL by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.4	0.8
SD	0.9	1.1
Previous Conviction	**% (N)**	**% (N)**
No	50.0 (32)	50.0 (5)
Yes	50.0 (32)	50.0 (5)
Offense Level		
Felony 1	1.6 (1)	0.0 (0)
Felony 2	3.1 (2)	10.0 (1)
Felony 3	12.5 (8)	10.0 (1)
Felony 4	29.7 (19)	10.0 (1)
Felony 5/M	53.1 (34)	70.0 (7)
Offense Category		
Violent/person	15.6 (10)	0.0 (0)
Sex	N/A	N/A
Drugs	51.6 (33)	90.0 (9)
Property	12.5 (8)	10.0 (1)
Traffic/DUI	9.4 (6)	0.0 (0)
Other	10.9 (7)	0.0 (0)
Substance Abuse Problem		
No	1.6 (1)	.0 (0)
Yes	98.4 (63)	100.0 (10)
Employment Problem		
No	12.5 (8)	20.0 (2)
Yes	87.5 (56)	80.0 (8)
Emotional Problem		
No	82.3 (53)	60.0 (6)
Yes	17.2 (11)	40.0 (4)
Risk Categories		
Low	3.1 (2)	0.0 (0)
Moderate	84.4 (54)	70.0 (7)
High	12.5 (8)	30.0 (3)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	36.2	38.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p<.05$

RECIDVISIM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Harbor Light-Salv Army Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	21.6 (16) *	50.0 (1)	19.7 (12)	27.3 (3)
Comparison	35.1 (26)	0.0 (0)	34.4 (21)	45.5 (5)
Successful Completers				
Treatment	20.3 (13)	50.0 (1)	18.5 (10)	25.0 (2)
Comparison	32.8 (21)	0.0 (0)	33.3 (18)	37.5 (3)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Harbor Light-Salv Army Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	31.1 (23)	50.0 (1)	31.1 (19)	27.3 (3)
Comparison	44.6 (33)	0.0 (0)	45.9 (28)	45.5 (5)
Successful Completers				
Treatment	31.3 (20)	50.0 (1)	31.5 (17)	25.0 (2)
Comparison	42.2 (27)	0.0 (0)	44.4 (24)	37.5 (3)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Harbor Light-Salv Army Drug/Alcohol Program

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.4 (21)	50.0 (1)	23.0 (14)	54.5 (6)
Comparison	37.8 (28)	0.0 (0)	36.1 (22)	54.5 (6)
Successful Completers				
Treatment	25.0 (16)	50.0 (1)	22.2 (12)	37.5 (3)
Comparison	37.5 (24)	0.0 (0)	35.2 (19)	62.5 (5)

*Difference significant at p<.05

Mansfield VOA

Mansfield VOA is a Halfway House operated by Volunteers of America and located in Mansfield, Ohio. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Mansfield VOA has been in operation since 1990 and is contracted to serve 77 men, 67 of which are sex offenders and 10 of which are offenders on Transitional Control. This facility is funded primarily by ODRC. Services include sex offender treatment, substance abuse treatment and employment readiness. Mansfield VOA was visited by a University of Cincinnati research team on November 27, 2006. At the time of the visit, there were 65 sex offenders and 3 transitional control offenders. Dr. Connie Brody was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Some funding issues have made it difficult to operate the program as designed.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes several risk/need assessments including the SONAR and MnSOST to measure sexual risk to recidivate and the Ohio Risk/Need scales to measure general likelihood of recidivism. All residents are assessed for level of risk.
- The program uses the MMPI-II as a responsivity assessment.

Recommendations for Improvement:

- While the program uses the ODADAS adult assessment to measure substance use for some offenders, this or other specific criminogenic need assessments should be used on all offenders.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, and learning styles.
- The program should provide re-assessment of risk and need factors.
- The program should be targeting moderate to high risk offenders rather than low to moderate risk individuals. If a sex offender is low risk to engage in general criminal behavior, he should be moderate to high risk for sexual recidivism to qualify for the program.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- Much of the treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 15 months, which is appropriate for the sex offenders. Length of stay for Transitional Control offenders should not exceed 9 months, excluding aftercare.
- Offenders are adequately monitored while on passes to the community.
- Staff are matched to groups based on experience and skill level.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some are non-criminogenic such as mental health issues, victimization, and economic/social needs. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.

- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, and individualized.
- Punishers should appropriately match infractions. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 57%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 20% of offenders participate in such services. Out of county residents should be required to participate in some type of aftercare as well. Furthermore, in-county aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of assessments, and meetings with the APA.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for MANSFIELD VOA by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (102)	50.0 (102)
Female	N/A	N/A
Race		
White	50.0 (80)	50.0 (80)
Non-white	50.0 (22)	50.0 (22)
Marital Status		
Married	56.7 (17)	43.3 (13)
Single/not married	51.8 (85)	48.2 (79)
Age Category*		
16 to 23	48.6 (34)	51.4 (36)
24 to 30	39.5 (15)	60.5 (23)
31-39	40.5 (17)	59.5 (25)
40+	66.7 (36)	33.3 (18)
Mean Age*	36.7	32.6
SD	12.7	11.0

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for MANSFIELD VOA by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.3	1.0
SD	0.8	2.0
Previous Conviction	**% (N)**	**% (N)**
No	52.3 (67)	47.7 (61)
Yes	46.1 (35)	53.9 (41)
Offense Level		
Felony 1	61.5 (24)	38.5 (15)
Felony 2	51.3 (20)	48.7 (19)
Felony 3	51.9 (28)	48.1 (26)
Felony 4	32.7 (16)	67.3 (33)
Felony 5/M	60.9 (14)	39.1 (9)
Offense Category		
Violent/person	38.1 (8)	61.9 (13)
Sex	50.0 (66)	50.0 (66)
Drugs	65.2 (15)	34.8 (8)
Property	41.7 (10)	58.3 (14)
Traffic/DUI	N/A	N/A
Other	75.0 (3)	25.0 (1)
Substance Abuse Problem		
No	55.8 (24)	44.2 (19)
Yes	48.4 (78)	51.6 (83)
Employment Problem*		
No	38.8 (38)	61.2 (60)
Yes	60.4 (64)	39.6 (42)
Emotional Problem*		
No	55.6 (74)	44.4 (59)
Yes	39.4 (28)	60.6 (43)
Risk Categories		
Low	50.0 (16)	50.0 (16)
Moderate	50.0 (72)	50.0 (72)
High	50.0 (14)	50.0 (14)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	29.2	29.7
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for MANSFIELD VOA by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (35)	100.0 (67)
Female	N/A	N/A
Race		
White	88.6 (31)	73.1 (49)
Non-white	11.4 (4)	26.9 (18)
Marital Status		
Married	20.0 (7)	14.9 (10)
Single/not married	80.0 (28)	85.1 (57)
Age Category		
16 to 23	34.3 (12)	32.8 (22)
24 to 30	5.7 (2)	19.4 (13)
31-39	22.9 (8)	13.4 (9)
40+	37.1 (13)	34.3 (23)
Mean Age	37.1	36.5
SD	11.3	13.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for MANSFIELD VOA by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.3	1.2
SD	1.0	0.8
Previous Conviction	**% (N)**	**% (N)**
No	77.1 (27)	59.7 (40)
Yes	22.9 (8)	40.3 (27)
Offense Level		
Felony 1	22.9 (8)	23.9 (16)
Felony 2	25.7 (9)	16.4 (11)
Felony 3	20.0 (7)	31.3 (21)
Felony 4	17.1 (6)	14.9 (10)
Felony 5/M	14.3 (5)	13.4 (9)
Offense Category		
Violent/person	8.6 (3)	7.5 (5)
Sex	60.0 (21)	67.2 (45)
Drugs	14.3 (5)	14.9 (10)
Property	14.3 (5)	7.5 (5)
Traffic/DUI	N/A	N/A
Other	2.9 (1)	3.0 (2)
Substance Abuse Problem		
No	28.6 (10)	20.9 (14)
Yes	71.4 (53)	79.1 (53)
Employment Problem*		
No	68.6 (24)	20.9 (14)
Yes	31.4 (11)	79.1 (53)
Emotional Problem		
No	71.4 (25)	73.1 (49)
Yes	28.6 (10)	26.9 (18)
Risk Categories*		
Low	31.4 (11)	7.5 (5)
Moderate	62.9 (22)	74.6 (50)
High	5.7 (2)	17.9 (12)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	24.6	31.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Mansfield VOA

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	17.6 (18)	6.3 (1)	19.4 (14)	21.4 (3)
Comparison	25.5 (26)	18.8 (3)	22.2 (16)	50.0 (7)
Successful Completers				
Treatment	14.3 (5)	0.0 (0)	18.2 (4)	50.0 (1)
Comparison	22.9 (8)	9.1 (1)	22.7 (5)	100.0 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Mansfield VOA

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	17.6 (18) *	6.3 (1)	19.4 (14)	21.4 (3)
Comparison	32.4 (33)	18.8 (3)	30.6 (22)	57.1 (8)
Successful Completers				
Treatment	14.3 (5)	0.0 (0)	18.2 (4)	50.0 (1)
Comparison	31.4 (11)	9.1 (1)	36.4 (8)	100.0 (2)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Mansfield VOA

	Risk Levels			
	All %(N)	Low %(N)	Moderate %(N)	High %(N)
All Participants				
Treatment	41.2 (42) *	25.0 (4)	38.9 (28) *	71.4 (10) *
Comparison	19.6 (20)	12.5 (2)	19.4 (14)	28.6 (4)
Successful Completers				
Treatment	14.3 (5)	0.0 (0)	18.2 (4)	50.0 (1)
Comparison	17.1 (6)	9.1 (1)	18.2 (4)	50.0 (1)

*Difference significant at p<.05

Nova House

Nova House is a Halfway House located in Dayton, Ohio. This facility serves adult males and females placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Nova House has been in operation since 1982. This facility is funded primarily by ODRC. Services include family issues, cognitive restructuring, gender issues, relapse prevention and life skills. Nova House was visited by a University of Cincinnati research team on November 6, 2006. At the time of the visit, there were 3 male and 7 female ODRC offenders. Bea Shafeek was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via group treatment and conducting assessments to offenders in the program.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature and literature exposure via local and national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Males and females should be provided with separate treatment groups and living space.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training and ongoing training related to clinical/treatment issues.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program recently began using the Ohio risk and Ohio need assessment to ascertain level of risk for recidivism and criminogenic need factors.
- The program also uses a biopsychosocial as well as the SASSI and AUP to measure substance abuse need and the SOCRATES to measure motivation to change drug/alcohol use.

Recommendations for Improvement:

- While the program uses the SOCRATES to measure motivation, they should have a spectrum of standardized responsivity assessments to assess such additional areas such as mental health, education, or learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, family issues, and employment).
- Structured curricula or manuals are used for all groups.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program, including a suggestions box and resident meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- The program provides about 65% of families with weekly intervention via the family concern curriculum.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some groups cover non-criminogenic topics as well such as topic group, gender group and life skills. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, drug testing, and confirmation notices), the monitoring mechanisms should be enhanced.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, based upon the demonstration of prosocial behavior, varied, individualized, and the offender is told why s/he is being rewarded.
- The procedure by which offenders are punished could be improved by ensuring that punishers are based on the demonstration of antisocial behavior, punishers are individualized, undesirable by the offender, escape is impossible, punishers are not spread out, and alternative prosocial behavior is taught.   Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 90%. This rate should fall between 65 and 85%.
- While aftercare services are provided by the program, it is optional and only about 25% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, supervision of assessments, and supervision of program and staff certification updates.
- The program provides a moderate level of monitoring of contractual providers to ensure quality assurance.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of outside providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for NOVA HOUSE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (11)	50.0 (11)
Female	50.0 (9)	50.0 (9)
Race		
White	50.0 (16)	50.0 (16)
Non-white	50.0 (4)	50.0 (4)
Marital Status		
Married	57.1 (4)	42.9 (3)
Single/not married	48.3 (14)	51.7 (15)
Age Category		
16 to 23	41.7 (5)	58.3 (7)
24 to 30	50.0 (4)	50.0 (4)
31-39	50.0 (8)	50.0 (8)
40+	75.0 (3)	25.0 (1)
Mean Age	33.5	30.3
SD	9.7	7.1

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for NOVA HOUSE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.6	0.8
SD	0.8	1.6
Previous Conviction	**% (N)**	**% (N)**
No	63.6 (14)	36.4 (8)
Yes	33.3 (6)	66.7 (12)
Offense Level		
Felony 1	33.3 (1)	66.7 (2)
Felony 2	25.0 (1)	75.0 (3)
Felony 3	41.7 (5)	58.3 (7)
Felony 4	25.0 (1)	75.0 (3)
Felony 5/M	70.6 (12)	29.4 (5)
Offense Category		
Violent/person	77.8 (7)	22.2 (2)
Sex	N/A	N/A
Drugs	33.3 (4)	66.7 (8)
Property	50.0 (8)	50.0 (8)
Traffic/DUI	0.0 (0)	100.0 (1)
Other	50.0 (1)	50.0 (1)
Substance Abuse Problem		
No	50.0 (1)	50.0 (1)
Yes	50.0 (19)	50.0 (19)
Employment Problem		
No	52.9 (9)	47.1 (8)
Yes	47.8 (11)	52.2 (12)
Emotional Problem		
No	54.2 (13)	45.8 (11)
Yes	43.8 (7)	56.3 (9)
Risk Categories		
Low	50.0 (1)	50.0 (1)
Moderate	50.0 (17)	50.0 (17)
High	50.0 (2)	50.0 (2)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	17.6	18.3
Females	11.2	12.2
Overall	28.8	30.5

*Difference significant at p<.05

Descriptive Statistics for NOVA HOUSE by Termination Status

	HWH	
Variable	**Successful**	**Unsuccessful**
	% (N)	**% (N)**
Gender		
Male	41.7 (5)	75.0 (6)
Female	58.3 (7)	25.0 (2)
Race		
White	75.0 (9)	87.5 (7)
Non-white	25.0 (3)	12.5 (1)
Marital Status		
Married	30.0 (3)	12.5 (1)
Single/not married	70.0 (7)	87.5 (7)
Age Category		
16 to 23	25.0 (3)	25.0 (2)
24 to 30	25.0 (3)	12.5 (1)
31-39	33.3 (4)	50.0 (4)
40+	16.7 (2)	12.5 (1)
Mean Age	32.5	34.9
SD	7.8	12.5

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for NOVA HOUSE by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	0.8 (12)	0.3 (8)
SD	0.9	0.5
Previous Conviction	% (N)	% (N)
No	75.0 (9)	62.5 (5)
Yes	25.0 (3)	37.5 (3)
Offense Level		
Felony 1	8.3 (1)	0.0 (0)
Felony 2	8.3 (1)	0.0 (0)
Felony 3	25.0 (3)	25.0 (3)
Felony 4	8.3 (1)	0.0 (0)
Felony 5/M	50.0 (6)	75.0 (6)
Offense Category		
Violent/person	41.7 (5)	25.0 (2)
Sex	0.0 (0)	0.0 (0)
Drugs	25.0 (3)	12.5 (1)
Property	33.3 (4)	50.0 (4)
Traffic/DUI	0.0 (0)	0.0 (0)
Other	0.0 (0)	12.5 (1)
Substance Abuse Problem		
No	8.3 (1)	0.0 (0)
Yes	91.7 (11)	100.0 (8)
Employment Problem		
No	58.3 (7)	25.0 (2)
Yes	41.7 (5)	75.0 (6)
Emotional Problem		
No	58.3 (7)	75.0 (6)
Yes	41.7 (5)	25.0 (2)
Risk Categories		
Low	8.3 (1)	0.0 (0)
Moderate	83.3 (10)	87.5 (7)
High	8.3 (1)	12.5 (1)
Average risk scores	Mean (N)	Mean (N)
Males	11.8 (5)	26.4 (6)
Females	13.9 (7)	7.3 (2)
Overall		

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Nova House

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	15.0 (3)	0.0 (0)	17.6 (3)	0.0 (0)
Comparison	25.0 (5)	0.0 (0)	17.6 (3)	100.0 (2)
Successful Completers				
Treatment	16.7 (2)	0.0 (0)	10.0 (1)	50.0 (1)
Comparison	8.3 (1)	0.0 (0)	10.0 (1)	0.0 (0)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Nova House

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	25.0 (5)	0.0 (0)	23.5 (4)	50.0 (1)
Comparison	30.0 (6)	0.0 (0)	23.5 (4)	100.0 (2)
Successful Completers				
Treatment	16.7 (2)	0.0 (0)	20.0 (2)	0.0 (0)
Comparison	25.0 (3)	0.0 (0)	20.0 (2)	100.0 (1)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Nova House

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.0 (7)	0.0 (0)	35.3 (6)	50.0 (1)
Comparison	30.0 (6)	0.0 (0)	29.4 (5)	50.0 (1)
Successful Completers				
Treatment	25.0 (3)	0.0 (0)	30.0 (3)	0.0 (0)
Comparison	25.0 (3)	0.0 (0)	30.0 (3)	0.0 (0)

*Difference significant at p<.05

Oriana Community Correction and Treatment Center (CCTC)

Oriana Community Correction and Treatment Center is a Halfway House located in Cleveland, Ohio. This facility serves adult males placed on probation, federal offenders, as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Oriana Community Correction and Treatment Center has been in operation since 2001 and is contracted to serve 130 men. This facility is funded by ODRC, Federal Bureau of Prisons (FBOP) and Cuyahoga County. Services include substance abuse treatment and cognitive restructuring. Oriana Community Correction and Treatment Center was visited by a University of Cincinnati research team on August 28, 2006. At the time of the visit, there were 127 offenders. RoEllen Sinkewich was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services via group treatment to offenders in the program.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable and adequate, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of peer-reviewed literature related to effective interventions with offenders.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines are in place.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

- Staff should have more input into the structure of the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI to further assess substance abuse need as well as an employment readiness scale.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality, mental health and learning styles.
- The program should provide re-assessment of need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse and employment).
- Structured curricula or manuals are used for all groups.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs and phone calls in and out.
- Higher risk offenders are separated from lower risk individuals in the program via separate treatment groups.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- A community meeting provides offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate as does the process for reinforcing behavior.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing and homework assignments.
- Appropriate discharge planning has been implemented.
- Aftercare services are provided by the program to all offenders.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Men and women should be separated for all groups.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.   Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved if punishers were consistently and immediately administered, not spread out and if prosocial alternative behavior was taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association, is licensed by ODADAS and is monitored by the FBOP.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, and tracking offender recidivism.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of internal services as well as external providers.

Descriptive Statistics for ORIANA CCTC by Group Membership

Variable	HWH	
	Treatment Group **% (N)**	**Comparison Group** **% (N)**
Gender		
Male	50.0 (254)	50.0 (254)
Female	50.0 (23)	50.0 (23)
Race		
White	50.0 (80)	50.0 (80)
Non-white	50.0 (197)	50.0 (197)
Marital Status*		
Married	34.7 (26)	65.3 (49)
Single/not married	59.1 (251)	40.9 (174)
Age Category*		
16 to 23	61.1 (102)	38.9 (65)
24 to 30	49.6 (69)	50.4 (70)
31-39	44.0 (59)	56.0 (75)
40+	41.2 (47)	58.8 (67)
Mean Age*	31.9	35.3
SD	9.4	10.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ORIANA CCTC by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	2.0	1.5
SD	1.8	1.8
Previous Conviction*	% (N)	% (N)
No	72.7 (168)	27.3 (63)
Yes	33.2 (106)	66.8 (213)
Offense Level		
Felony 1	36.7 (22)	63.3 (38)
Felony 2	47.9 (57)	52.1 (62)
Felony 3	53.8 (91)	46.2 (78)
Felony 4	48.6 (51)	51.4 (54)
Felony 5/M	56.0 (56)	44.0 (44)
Offense Category*		
Violent/person	50.9 (111)	49.1 (107)
Sex	0.0 (0)	0.0 (0)
Drugs	62.7 (101)	37.3 (60)
Property	40.9 (45)	59.1 (65)
Traffic/DUI	100.0 (3)	0.0 (0)
Other	27.4 (17)	72.6 (45)
Substance Abuse Problem*		
No	38.0 (49)	62.0 (80)
Yes	53.9 (228)	46.1 (195)
Employment Problem		
No	50.4 (113)	49.6 (111)
Yes	49.7 (164)	50.3 (166)
Emotional Problem*		
No	57.4 (217)	42.6 (161)
Yes	34.5 (60)	65.5 (114)
Risk Categories		
Low	50.0 (22)	50.0 (22)
Moderate	50.0 (165)	50.0 (165)
High	50.0 (87)	50.0 (87)
Average risk scores	Mean (N)	Mean (N)
Males	33.1	32.9
Females	1.9	1.7
Overall	34.9	34.7

*Difference significant at $p < .05$

Descriptive Statistics for ORIANA CCTC by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender*		
Male	88.7 (133)	95.3 (121)
Female	11.3 (17)	4.7 (6)
Race*		
White	33.3 (50)	23.6 (30)
Non-white	66.7 (100)	76.4 (97)
Marital Status		
Married	9.3 (14)	9.4 (12)
Single/not married	90.7 (136)	90.6 (115)
Age Category*		
16 to 23	24.7 (37)	51.2 (65)
24 to 30	27.3 (41)	22.0 (28)
31-39	26.7 (40)	15.0 (19)
40+	21.3 (32)	11.8 (15)
Mean Age*	33.9	29.5
SD	9.2	9.2

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for ORIANA CCTC by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.9	2.3
SD	1.3	2.2
Previous Conviction*	**% (N)**	**% (N)**
No	68.5 (102)	52.8 (66)
Yes	31.5 (47)	47.2 (59)
Offense Level		
Felony 1	9.3 (14)	6.3 (8)
Felony 2	20.7 (31)	20.5 (26)
Felony 3	29.3 (44)	37.0 (47)
Felony 4	20.7 (31)	15.7 (20)
Felony 5/M	20.0 (30)	20.5 (26)
Offense Category		
Violent/person	36.7 (55)	44.1 (56)
Sex	N/A	N/A
Drugs	38.7 (58)	33.9 (43)
Property	18.0 (27)	14.2 (18)
Traffic/DUI	1.3 (2)	0.8 (1)
Other	5.3 (8)	7.1 (9)
Substance Abuse Problem		
No	14.7 (22)	21.3 (27)
Yes	85.3 (128)	78.7 (100)
Employment Problem*		
No	58.7 (88)	19.7 (25)
Yes	41.3 (62)	80.3 (102)
Emotional Problem		
No	80.7 (121)	75.6 (96)
Yes	19.3 (29)	24.4 (31)
Risk Categories*		
Low	12.8 (19)	2.4 (3)
Moderate	65.8 (98)	53.6 (67)
High	21.5 (32)	44.0 (55)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	29.2	37.6
Females	2.5	1.1
Overall*	31.7	38.7

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Oriana CCTC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	39.1 (107)	22.7 (5)	33.9 (56)	52.9 (46)
Comparison	33.2 (91)	4.5 (1)	30.9 (51)	44.8 (39)
Successful Completers				
Treatment	32.9 (49)	26.3 (5)	30.6 (30)	43.8 (14)
Comparison	31.5 (47)	5.3 (1)	33.7 (33)	40.6 (13)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Oriana CCTC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.2 (121)	27.3 (6)	38.2 (63)	59.8 (52)
Comparison	40.5 (111)	9.1 (2)	37.0 (61)	55.2 (48)
Successful Completers				
Treatment	38.9 (58)	26.3 (5)	36.7 (36)	53.1 (17)
Comparison	40.3 (60)	10.5 (2)	38.8 (38)	62.5 (20)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Oriana CCTC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.1 (129) *	31.8 (7) *	43.0 (71)	58.6 (51) *
Comparison	32.8 (90)	4.5 (1)	34.5 (57)	36.8 (32)
Successful Completers				
Treatment	23.5 (35) *	21.1 (4)	20.4 (20) *	34.4 (11)
Comparison	36.2 (54)	5.3 (1)	38.8 (38)	46.9 (15)

*Difference significant at p<.05

Oriana Residential Correction Center (RCC)

Oriana House is an agency based in Akron Ohio that operates several halfway houses and community based correctional facilities. Oriana's Residential Correction Center (RCC) is one of the Halfway House located in Akron, Ohio. This facility serves adult females who are probationers, diversions from jail, federal offenders, parole violators or offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Oriana RCC has been in operation since 1991 and is contracted to serve 80 women, including 6 dually diagnosed offenders. This facility is funded by ODRC, CCA, the federal government, municipalities, and grants. The primary internal services provided by the program are education, substance abuse treatment, parenting, employment readiness and aftercare. Oriana RCC was visited by a University of Cincinnati research team on August 02, 2006. At the time of the visit, there were 62 female offenders. Rebecca Callahan was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While staff can attend local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Chemical dependency counselors receive clinical supervision by a licensed professional and staff attend treatment team and agency meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours on initial and ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Level of Service Inventory Revised to assess risk level and to identify criminogenic needs. Likewise the program uses the SASSI to further assess substance abuse need.
- According to the file review, the program is targeting moderate to high risk residents.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment of criminogenic needs (i.e. criminal attitude) at discharge.
- Offender risk levels should be formally tracked.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. substance abuse, criminal behavior, and employment).
- Treatment groups use a structured curriculum or manual.
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls in and out, and drug testing).
- Treatment varies by risk as higher risk offenders attend additional treatment groups.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing/discussing.
- The program completion rate is 73%, which falls within the recommended range of 65 to 85%.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the treatment uses cognitive-behavioral, social learning and motivational enhancement principles, the program also relies on a 12-step and educational philosophies for an overall eclectic treatment model.
- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.

- Although much of the treatment is single sex, women do have to participate in Intensive Outpatient, relapse prevention and aftercare groups with men. Separate drug/alcohol treatment should be provided.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be significantly increased.
- Attempts should be made to separate higher risk offender from lower risk individuals in the program.
- While need assessment results are used to refer offenders to treatment, responsivity factors should also guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.   Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, and individualized.
- The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if they were individualized, undesirable by the offenders, varied, escape were impossible, if they were not spread out, and if prosocial alternatives were taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- Although the program offers training to family members who might assist in providing prosocial support for the offenders, only about 1/3 of the women participate in such services. Thus, attempts should be made to increase family involvement in the program.
- While aftercare services are provided by the agency, this service is only available for chemical dependency issues and only about 60% of RCC offenders participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and has a federal audit.
- The program uses several internal quality review mechanisms including file review, client surveys, staff feedback, and recidivism tracking.
- The program provides monitoring of contractual providers consisting of direct observation of treatment delivery.
- The program collects recidivism data on offenders discharged from the program.
- The program has been evaluated in the past via a process and outcome evaluation and performed better than the comparison group on at least some measures of recidivism.

Recommendations for Improvement:

- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation.
- The program should provide increased monitoring of external providers consisting of direct observation of treatment delivery.

Descriptive Statistics for ORIANA RCC by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50 (103)	50 (103)
Female	50 (103)	50 (103)
Race		
White	50 (63)	50 (63)
Non-white	50 (40)	50 (40)
Marital Status		
Married	53.6 (15)	46.4 (13)
Single/not married	49.7 (88)	50.3 (89)
Age Category		
16 to 23	59.1 (26)	40.9 (18)
24 to 30	47.8 (22)	52.2 (24)
31-39	45.6 (31)	54.4 (37)
40+	50.0 (24)	50.0 (24)
Mean Age	35.0	34.2
SD	9.5	8.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ORIANA RCC by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.1	0.8
SD	1.1	1.6
Previous Conviction*	% (N)	% (N)
No	59.6 (68)	40.4 (46)
Yes	38.0 (35)	62.0 (57)
Offense Level		
Felony 1	46.7 (7)	53.3 (8)
Felony 2	37.9 (11)	62.1 (18)
Felony 3	55.6 (20)	44.4 (16)
Felony 4	50.0 (15)	50.0 (15)
Felony 5/M	52.1 (50)	47.9 (46)
Offense Category		
Violent/person	50.0 (25)	50.0 (25)
Sex	0.0 (0)	0.0 (0)
Drugs	58.2 (46)	41.8 (33)
Property	36.4 (20)	63.6 (35)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	55.0 (11)	45.0 (9)
Substance Abuse Problem		
No	40.9 (9)	59.1 (13)
Yes	51.1 (94)	48.9 (90)
Employment Problem		
No	54.3 (57)	45.7 (48)
Yes	45.5 (46)	54.5 (55)
Emotional Problem		
No	51.2 (42)	48.8 (40)
Yes	49.2 (61)	50.8 (63)
Risk Categories		
Low	50.0 (28)	50.0 (28)
Moderate	50.0 (59)	50.0 (59)
High	50.0 (16)	50.0 (16)
Average risk scores	Mean (N)	Mean (N)
Males	N/A	N/A
Females	23.5	23.5
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ORIANA RCC by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (73)	100.0 (30)
Race		
White	56.2 (41)	73.3 (22)
Non-white	43.8 (32)	26.7 (8)
Marital Status		
Married	17.8 (13)	6.7 (2)
Single/not married	82.2 (60)	93.3 (28)
Age Category		
16 to 23	19.2 (14)	40.0 (12)
24 to 30	23.3 (17)	16.7 (5)
31-39	30.1 (22)	30.0 (9)
40+	27.4 (20)	13.3 (4)
Mean Age	36.0	32.4
SD	9.5	9.2

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ORIANA RCC by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.1	1.0
SD	1.0	1.1
Previous Conviction	**% (N)**	**% (N)**
No	68.5 (50)	60.0 (18)
Yes	31.5 (23)	40.0 (12)
Offense Level		
Felony 1	9.6 (7)	0.0 (0)
Felony 2	12.3 (9)	6.7 (2)
Felony 3	17.8 (13)	23.3 (7)
Felony 4	15.1 (11)	13.3 (4)
Felony 5/M	45.2 (33)	56.7 (17)
Offense Category		
Violent/person	23.3 (17)	26.7 (8)
Sex	N/A	N/A
Drugs	43.8 (32)	46.7 (14)
Property	21.9 (16)	13.3 (4)
Traffic/DUI	1.4 (1)	0.0 (0)
Other	9.6 (7)	13.3 (4)
Substance Abuse Problem		
No	11.0 (8)	3.3 (1)
Yes	89.0 (65)	96.7 (29)
Employment Problem*		
No	68.5 (50)	23.3 (7)
Yes	31.5 (23)	76.7 (23)
Emotional Problem		
No	43.8 (32)	33.3 (10)
Yes	56.2 (41)	66.7 (20)
Risk Categories		
Low	31.5 (23)	16.7 (5)
Moderate	54.8 (40)	63.3 (19)
High	13.7 (10)	20.0 (6)
Average risk scores*	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	22.2	26.6
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Oriana RCC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	15.5 (16)	7.1 (2)	15.3 (9)	31.3 (5)
Comparison	17.5 (18)	10.7 (3)	18.6 (11)	25.0 (4)
Successful Completers				
Treatment	15.1 (11)	4.3 (1).	20.0 (8)	20.0 (2)
Comparison	19.2 (14)	13.0 (3)	17.5 (7)	40.0 (4)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Oriana RCC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	21.4 (22)	14.3 (4)	16.9 (10)	50.0 (8)
Comparison	24.3 (25)	21.4 (6)	25.4 (15)	25.0 (4)
Successful Completers				
Treatment	21.9 (16)	13.0 (3)	20.0 (8)	50.0 (5)
Comparison	27.4 (20)	21.7 (5)	27.5 (11)	40.0 (4)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Oriana RCC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.2 (29)	17.9 (5)	30.5 (18)	37.5 (6)
Comparison	21.4 (22)	10.7 (3)	27.1 (16)	18.8 (3)
Successful Completers				
Treatment	21.9 (16)	17.4 (4)	25.0 (10)	20.0 (2)
Comparison	20.5 (15)	13.0 (3)	22.5 (9)	30.0 (3)

*Difference significant at p<.05

Oriana Residential Institution Probation (RIP)

Oriana House is an agency based in Akron Ohio that operates several halfway houses and community based correctional facilities. Oriana's Residential Institution Probation Program (RIPP) is one of the Halfway House located in Akron, Ohio. This facility serves adult males who are probationers, work release offenders, municipal offenders, or offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). Oriana RIPP has been in operation since 1985 and is contracted to serve 218 men. This facility is funded primarily by ODRC and municipalities. The primary internal services provided by the program are education, cognitive restructuring, skill building, substance abuse treatment, employment readiness and aftercare. Oriana RIPP was visited by a University of Cincinnati research team on August 03, 2006. At the time of the visit, there were 123 male offenders. Vickie McGeee was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in training and supervising staff.
- The program is well established and supported by the criminal justice community and community-at-large.
- New interventions undergo a formal, designated pilot period prior to full implementation of the intervention.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- External consultants are available to advise on programming.

Recommendations for Improvement:

- The program director should take a more active role in selecting staff.
- The program director should provide direct services to offenders on a more regular basis via conducting groups, assessments or carrying a small caseload of clients.
- While staff can attend local or national conferences and curricula is reviewed before its adoption, the program should regularly consult a wider range of literature related to effective interventions with offenders which is disseminated to staff.
- The program has experienced some recent funding cuts which has affected programming.

Staff Characteristics

Strengths:

- Staff delivering cognitive skills group receive clinical supervision by a licensed professional and staff attend treatment team and agency meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours on initial and ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular problem and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Level of Service Inventory Revised to assess risk level and to identify criminogenic needs. Likewise the program uses the SASSI to further assess substance abuse need.
- According to the file review, the program is targeting primarily moderate risk (and few low risk) offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment of criminogenic needs (i.e. criminal attitude) at discharge.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, social skills, substance abuse, and employment).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- There are several mechanisms for monitoring offenders while on pass (e.g. home incarceration, schedules/logs, phone calls out, drug testing, and signed verification).
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- Groups utilize structured curricula and do not routinely exceed the maximum recommended facilitator to offender ratio of 1/10.
- Staff are matched to services they provide based upon desire, skill level and professional experience.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via homework assignments and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some of the treatment uses cognitive-behavioral and social learning principles, the program also relies on a 12-step and educational model to treating offenders.
- The program should offer additional structured skill building opportunities, including more consistent use of modeling and role play across all groups.

- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be significantly increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment and attempts should be made to separate higher risk offenders from lower risk individuals in the program.
- While need assessment results are used to refer offenders to treatment, risk levels and responsivity factors should also guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.   Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, varied and individualized.
- The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if they were immediate, individualized, varied, not spread out, and if prosocial alternatives were taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- The program completion rate is 58%, which falls outside the recommended range of 65 to 85%.
- While aftercare services (intensive outpatient) are provided to some offenders, the program should offer aftercare to all offenders discharged from the program. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of service delivery, staff feedback, and recidivism tracking.
- The program collects recidivism data on offenders discharged from the program.
- The program has been evaluated in the past via a process and outcome evaluation and performed better than the comparison group on at least some measures of recidivism.
- The program uses and evaluator to assist in evaluating program performance.

Recommendations for Improvement:

- In order to improve internal quality assurance, the frequency of observation of direct service with feedback to staff should be increased to at least monthly observation across all groups.
- The program should provide increased monitoring of external providers consisting of direct observation of treatment delivery.

Descriptive Statistics for ORIANA RIP by Group Membership

| Variable | HWH | |
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (272)	50.0 (272)
Female	50.0 (272)	50.0 (272)
Race		
White	50.0 (123)	50.0 (123)
Non-white	50.0 (149)	50.0 (149)
Marital Status		
Married	39.7 (23)	60.3 (35)
Single/not married	51.3 (249)	48.7 (236)
Age Category*		
16 to 23	56.9 (87)	43.1 (66)
24 to 30	42.2 (57)	57.8 (78)
31-39	53.8 (78)	46.2 (67)
40+	45.0 (50)	55.0 (61)
Mean Age	33.2	33.3
SD	10.1	10.2

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ORIANA RIP by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.4	1.0
SD	1.6	1.4
Previous Conviction*	**% (N)**	**% (N)**
No	57.3 (126)	42.7 (94)
Yes	45.1 (146)	54.9 (178)
Offense Level		
Felony 1	54.3 (25)	45.7 (21)
Felony 2	56.6 (43)	43.4 (33)
Felony 3	53.2 (67)	46.8 (59)
Felony 4	44.0 (59)	56.0 (75)
Felony 5/M	48.1 (78)	51.9 (84)
Offense Category*		
Violent/person	50.3 (86)	49.7 (85)
Sex	50.0 (20)	50.0 (20)
Drugs	45.9 (61)	54.1 (72)
Property	34.1 (29)	65.9 (56)
Traffic/DUI	0.0 (0)	100.0 (3)
Other	67.9 (76)	32.1 (36)
Substance Abuse Problem*		
No	34.9 (29)	65.1 (54)
Yes	52.7 (243)	47.3 (218)
Employment Problem*		
No	45.4 (124)	54.6 (149)
Yes	54.6 (148)	45.4 (123)
Emotional Problem*		
No	53.7 (211)	46.3 (182)
Yes	40.4 (61)	59.6 (90)
Risk Categories		
Low	50.0 (21)	50.0 (21)
Moderate	50.0 (180)	50.0 (180)
High	50.0 (71)	50.0 (71)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	34.6	33.9
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ORIANA RIP by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (132)	100.0 (140)
Female	N/A	N/A
Race		
White	46.2 (61)	44.3 (62)
Non-white	53.8 (71)	55.7 (78)
Marital Status*		
Married	12.1 (16)	5.0 (7)
Single/not married	87.9 (116)	95.0 (133)
Age Category		
16 to 23	25.8 (34)	37.9 (53)
24 to 30	19.7 (26)	22.1 (31)
31-39	31.8 (42)	25.7 (36)
40+	22.7 (30)	14.3 (20)
Mean Age*	35.1	31.5
SD	10.1	9.7

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ORIANA RIP by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.2	1.7
SD	1.4	1.8
Previous Conviction	% (N)	% (N)
No	43.2 (57)	49.3 (69)
Yes	56.8 (75)	50.7 (71)
Offense Level		
Felony 1	11.4 (15)	7.1 (10)
Felony 2	12.1 (16)	19.3 (27)
Felony 3	23.5 (31)	25.7 (36)
Felony 4	19.7 (26)	23.6 (33)
Felony 5/M	33.3 (44)	24.3 (34)
Offense Category*		
Violent/person	25.0 (33)	37.9 (53)
Sex	12.1 (16)	2.9 (4)
Drugs	22.0 (29)	22.9 (32)
Property	9.1 (12)	12.1 (17)
Traffic/DUI	N/A	N/A
Other	31.8 (42)	24.3 (34)
Substance Abuse Problem		
No	12.1 (16)	9.3 (13)
Yes	87.9 (116)	90.7 (127)
Employment Problem*		
No	65.9 (87)	26.4 (37)
Yes	34.1 (45)	73.6 (103)
Emotional Problem		
No	77.3 (102)	77.9 (109)
Yes	22.7 (30)	22.1 (31)
Risk Categories*		
Low	12.1 (16)	3.6 (5)
Moderate	70.5 (93)	62.1 (87)
High	17.4 (23)	34.3 (48)
Average risk scores	Mean (N)	Mean (N)
Males*	31.0	37.9
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

<div align="center">**RECIDIVISM OUTCOMES**</div>

New Felony Conviction by Group Membership and Risk Level for Oriana RIP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.3 (96)	28.6 (6) *	31.7 (57)	46.5 (33)
Comparison	32.0 (87)	0.0 (0)	28.3 (51)	50.7 (36)
Successful Completers				
Treatment	27.3 (36)	25.0 (4)	25.8 (24)	34.8 (8)
Comparison	32.6 (43)	0.0 (0)	33.3 (31)	52.2 (12)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Oriana RIP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.9 (122)	28.6 (6) *	41.1. (74)	59.2 (42)
Comparison	37.9 (103)	4.8 (1)	35.6 (64)	53.5 (38)
Successful Completers				
Treatment	35.6 (47)	25.0 (4)	36.6 (24)	39.1 (9)
Comparison	37.9 (50	0.0 (0)	39.8 (37)	56.5 (13)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Oriana RIP

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	48.5 (132) *	19.0 (4)	43.3 (78) *	70.4 (50) *
Comparison	32.7 (89)	14.3 (3)	28.3 (51)	49.3 (35)
Successful Completers				
Treatment	30.3 (40)	12.5 (2)	29.0 (27)	47.8 (11)
Comparison	32.6 (43)	12.5 (2)	31.2 (29)	52.2 (12)

*Difference significant at p<.05

Oriana Special Housing Adjustment Residential Program (SHARP)

Oriana House is an agency based in Akron Ohio that operates several halfway houses and community based correctional facilities. Oriana Special Housing Adjustment Residential Program (SHARP) is a halfway house designed specifically for dually diagnosed offenders located in Akron, Ohio. This facility serves adult males who are probationers and offenders placed on parole/Post-Release Control from the Ohio Department of Rehabilitation and Correction (ODRC). SHARP has been in operation since 1997 and is contracted to serve 12 men. There are also 6 SHARP beds located in Oriana's female halfway house, RCC.   The primary internal services provided by the program are education, mental health, substance abuse treatment and aftercare. Oriana SHARP was visited by a University of Cincinnati research team on September 4, 2006. At the time of the visit, there were 11 male residents in the program. Phil Boley was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training and supervising staff.
- The program director provides direct services via conducting assessments and carrying a caseload of offenders in the program.
- The program regularly consults a wide range of literature related to effective interventions with offenders via peer reviewed journals and other literature, staff reviewing curricula before its adoption, and literature exposure through local and national conferences.
- The program is well established and supported by the criminal justice community and community-at-large.
- Problems or crises tend to be handled with a problem-solving approach.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Program funding has been relatively unstable the past two years, affecting program operations.
- Staff and management report some tension or unresolved conflict that at times affects the program's harmony.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial and ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Although there are few staff to operate the program, clinical staff meetings should still be held regularly.
- Additional training should relate to clinical issues as well as the theory and practice of interventions used by the program (for both clinical and security staff).
- Staff should have more input into the structure of the program.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilizes a psychosocial assessment, a chemical dependency assessment and the SASSI as program assessments.

Recommendations for Improvement:

- Since program participants are correctional clients, the program should be utilizing a risk need tool to identify risk levels and assess criminogenic need factors to be targeted in treatment.
- The program should have a spectrum of standardized, validated responsivity assessments to assess such areas as personality, mental health, motivation, education, and learning styles.
- The program should provide re-assessment criminogenic need factors.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. self-management, substance abuse and employment).
- IOP is offered as a separate group for the dually diagnosed offenders rather than integrating them with general offenders.
- The group offered by the program uses a structured manual and is an appropriate average size at 1 facilitator to 7 offenders.
- There are several mechanisms for monitoring offenders while on pass (e.g. schedules/logs, phone calls in to the facility and drug testing).
- Staff are matched to groups based on professional experience.
- The program provides the structure for offenders to give input into the operation of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via group activities, processing, and developing a relapse prevention plan.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While some treatment components are based on a cognitive-behavioral model, this model does not permeate the program as a whole.
- The program's average length of stay is 2.5 months, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment.

- The program should offer additional structured skill building opportunities, including increased use of modeling and role play. Likewise, graduated rehearsal should be regularly used to teach resident skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be significantly increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, based upon the demonstration of prosocial behavior, varied and individualized.
- The procedure by which offenders are punished could be improved if the purpose of punishers was viewed as a mechanism to extinguish unwanted behavior, if punishers were immediate, consistently applied, varied, if they matched the infraction, and if escape were impossible.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 64%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, only about 25% of offenders participate in such services. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association, is licensed by ODADAS, and is monitored by ODMH.
- The program uses several internal quality review mechanisms including file review, client surveys, staff feedback, supervision of program and staff certification updates, and aftercare monitoring.
- The program collects recidivism data on offenders discharged from the program.
- The program has participated in a past process evaluation.

Recommendations for Improvement:

- The program supervisors should provide regular observation of service delivery as well as increased monitoring of outside providers in order to improve external quality assurance.

Descriptive Statistics for ORIANA SHARP TX/COMP by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (40)	50.0 (40)
Female	50.0 (40)	50.0 (40)
Race		
White	50.0 (17)	50.0 (17)
Non-white	50.0 (23)	50.0 (23)
Marital Status		
Married	20.0 (1)	80.0 (4)
Single/not married	52.0 (39)	48.0 (36)
Age Category		
16 to 23	58.8 (10)	41.2 (7)
24 to 30	40.0 (8)	60.0 (12)
31-39	47.8 (11)	52.2 (12)
40+	55.0 (11)	45.0 (9)
Mean Age	35.7	33.2
SD	9.8	9.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ORIANA SHARP by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	2.2	1.6
SD	2.7	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	62.8 (27)	37.2 (16)
Yes	35.1 (13)	64.9 (24)
Offense Level		
Felony 1	66.7 (2)	33.3 (1)
Felony 2	55.6 (5)	44.4 (4)
Felony 3	50.0 (7)	50.0 (7)
Felony 4	52.6 (10)	47.4 (9)
Felony 5/M	45.7 (16)	54.3 (19)
Offense Category		
Violent/person	52.9 (9)	47.1 (8)
Sex	0 (0)	0.0 (0)
Drugs	33.3 (5)	66.7 (10)
Property	52.8 (19)	47.2 (17)
Traffic/DUI	0 (0)	0.0 (0)
Other	58.3 (7)	41.7 (5)
Substance Abuse Problem*		
No	0.0 (0)	100.0 (8)
Yes	55.6 (40)	44.4 (32)
Employment Problem*		
No	37.5 (15)	62.5 (25)
Yes	62.5 (25)	37.5 (15)
Emotional Problem*		
No	2.9 (1)	97.1 (33)
Yes	84.8 (39)	15.2 (7)
Risk Categories		
Low	50.0 (3)	50.0 (3)
Moderate	50.0 (18)	50.0 (18)
High	50.0 (19)	50.0 (19)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	39.3	37.3
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ORIANA SHARP by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (23)	100.0 (17)
Female	N/A	N/A
Race		
White	47.8 (11)	35.3 (6)
Non-white	52.2 (12)	64.7 (11)
Marital Status		
Married	0.0 (0)	5.9 (1)
Single/not married	100.0 (23)	94.1 (16)
Age Category		
16 to 23	26.1 (6)	23.5 (4)
24 to 30	17.4 (4)	23.5 (4)
31-39	26.1 (6)	29.4 (5)
40+	30.4 (7)	23.5 (4)
Mean Age	36.2	35.1
SD	10.7	8.8

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for ORIANA SHARP by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.6	3.1
SD	0.5	0.7
Previous Conviction	**% (N)**	**% (N)**
No	65.2 (15)	70.6 (12)
Yes	34.8 (8)	29.4 (5)
Offense Level		
Felony 1	8.7 (2)	0.0 (0)
Felony 2	13.0 (3)	11.8 (2)
Felony 3	8.7 (2)	29.4 (5)
Felony 4	39.1 (9)	5.9 (1)
Felony 5/M	30.4 (7)	52.9 (9)
Offense Category		
Violent/person	34.8 (8)	5.9 (1)
Sex	N/A	N/A
Drugs	13.0 (3)	11.8 (2)
Property	43.5 (10)	52.9 (9)
Traffic/DUI	N/A	N/A
Other	8.7 (2)	29.4 (5)
Substance Abuse Problem		
No	0.0 (0)	0.0 (0)
Yes	100.0 (23)	100.0 (17)
Employment Problem		
No	43.5 (10)	29.4 (5)
Yes	56.5 (13)	70.6 (12)
Emotional Problem		
No	4.3 (1)	0.0 (0)
Yes	95.7 (22)	100.0 (17)
Risk Categories		
Low	8.7 (2)	5.9 (1)
Moderate	56.5 (13)	29.4 (5)
High	34.8 (8)	64.7 (11)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	37.6	41.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p<.05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Oriana SHARP

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	32.5 (13)	0.0 (0)	44.4 (8)	26.3 (5)
Comparison	30.0 (12)	0.0 (0)	22.2 (4)	42.1 (8)
Successful Completers				
Treatment	39.1 (9)	0.0 (0)	53.8 (7)	25.0 (2)
Comparison	21.7 (5)	0.0 (0)	23.1 (3)	25.0 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Oriana SHARP

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.0 (16)	0.0 (0)	50.0 (9)	36.8 (7)
Comparison	35.0 (14)	0.0 (0)	27.8 (5)	47.4 (9)
Successful Completers				
Treatment	43.5 (10)	0.0 (0)	61.5 (8)	25.0 (2)
Comparison	26.1 (6)	0.0 (0)	23.1 (3)	37.5 (3)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Oriana--SHARP

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	42.5 (17)	0.0 (0)	38.9 (7)	52.6 (10)
Comparison	47.5 (19)	33.3 (1)	33.3 (6)	63.2 (12)
Successful Completers				
Treatment	34.8 (8)	0.0 (0)	46.2 (6)	25.0 (2)
Comparison	47.8 (11)	50.0 (1)	38.5 (5)	62.5 (5)

*Difference significant at p<.05

Oriana TMRC

Oriana TMRC is a Halfway House located in Akron, Ohio. This facility serves adult males placed on probation, work release, federal offenders, as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Oriana TMRC has been in operation since 1995 and is contracted to serve 124 men. This facility is funded by ODRC, the Federal Bureau of Prisons (FBOB) and Summit County. Services include substance abuse treatment, education, employment readiness and aftercare. Oriana TMRC was visited by a University of Cincinnati research team on August 3, 2006. At the time of the visit, there were 123 offenders. Kelly Cornett was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting, training, and supervising staff.
- The program director provides direct services, via group treatment to offenders in the program.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director had a limited role in designing the program as it currently operates.
- While staff can attend local or national conferences, the program should regularly consult a range of literature related to effective interventions with offenders which is disseminated to all staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- Funding is relatively unstable and funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend treatment team meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Treatment and administrative staff are supportive of the treatment goals and ethical guidelines are in place.

Recommendations for Improvement:

- While a licensed professional is available to provide clinical supervision, such supervision is provided informally on an as needed basis.

- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff should have more input into the structure of the program.
- Security staff appear to lack support for the treatment efforts of the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised (LSI-R) as a general risk/need assessment.
- The program also uses the SASSI to further assess substance abuse need as well as an employment readiness scale.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality, mental health and learning styles.
- The program should provide re-assessment of need factors.
- Offender risk levels should be formally tracked and the program should target primarily moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. substance abuse and employment).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Structured curricula or manuals are developed for all groups and groups typically do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program is effective at monitoring offenders while on passes to the community via electronic monitoring, drug testing, schedules/logs and phone calls in and out.
- A community meeting provides offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via a relapse prevention group.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While the program uses cognitive-behavioral elements, treatment aspects are still based in the 12-step model.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards. Rewards should outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, consistently applied, individualized and desired by the offender.
- The process by which offenders are punished could be improved by improving staff consistency, varying the types of punishers, disallowing escape from punishers and teaching prosocial alternative behaviors. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 63%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided by the program, services are only provided to offenders participating in Intensive Outpatient treatment. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and monitored by FBOP.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, staff feedback, and tracking offender recidivism.
- The program collects recidivism data on offenders discharged from the program.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of internal services as well as external providers.

Descriptive Statistics for ORIANA-TMRC by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (297)	50.0 (297)
Female	N/A	N/A
Race		
White	50.0 (154)	50.0 (154)
Non-white	50.0 (143)	50.0 (143)
Marital Status		
Married	45.6 (26)	54.4 (31)
Single/not married	51.0 (271)	49.0 (260)
Age Category*		
16 to 23	59.0 (102)	41.0 (71)
24 to 30	47.1 (74)	52.9 (83)
31-39	51.3 (77)	48.7 (73)
40+	38.6 (44)	61.4 (70)
Mean Age*	32.1	34.2
SD	9.3	10.0

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ORIANA-TMRC by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations*	Mean (N)	Mean(N)
Mean (N)	1.3	0.9
SD	1.1	1.4
Previous Conviction*	% (N)	% (N)
No	63.5 (160)	36.5 (92)
Yes	40.1 (137)	59.9 (205)
Offense Level		
Felony 1	45.2 (28)	54.8 (34)
Felony 2	46.3 (56)	53.7 (65)
Felony 3	57.0 (90)	43.0 (68)
Felony 4	46.6 (55)	53.4 (63)
Felony 5/M	50.4 (68)	49.6 (67)
Offense Category*		
Violent/person	49.0 (98)	51.0 (102)
Sex	50.0 (7)	50.0 (7)
Drugs	56.6 (98)	43.4 (75)
Property	32.0 (32)	68.0 (68)
Traffic/DUI	61.5 (8)	38.5 (5)
Other	57.4 (54)	42.6 (40)
Substance Abuse Problem*		
No	34.7 (43)	65.3 (81)
Yes	54.0 (254)	46.0 (216)
Employment Problem*		
No	60.8 (186)	39.2 (120)
Yes	45.7 (111)	54.3 (132)
Emotional Problem*		
No	58.2 (238)	41.8 (171)
Yes	31.9 (59)	68.1 (126)
Risk Categories		
Low	50.0 (32)	50.0 (32)
Moderate	50.0 (208)	50.0 (208)
High	50.0 (57)	50.0 (57)
Average risk scores	Mean (N)	Mean (N)
Males	31.4	31.7
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for ORIANA TMRC by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100.0 (163)	100.0 (134)
Race		
White	55.8 (91)	47.0 (63)
Non-white	44.2 (72)	53.0 (63)
Marital Status		
Married	11.0 (18)	6.0 (8)
Single/not married	89.0 (145)	94.0 (126)
Age Category*		
16 to 23	26.4 (43)	44.0 (59)
24 to 30	23.3 (28)	26.9 (36)
31-39	31.3 (51)	19.4 (26)
40+	19.0 (31)	9.7 (13)
Mean Age*	34.1	29.8
SD	9.5	8.5

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for ORIANA TMRC by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.2	1.4
SD	1.1	1.1
Previous Conviction*	% (N)	% (N)
No	58.9 (96)	47.8 (64)
Yes	41.1 (67)	52.2 (70)
Offense Level		
Felony 1	11.7 (19)	6.7 (9)
Felony 2	16.6 (27)	21.6 (29)
Felony 3	28.8 (47)	32.1 (43)
Felony 4	17.2 (28)	20.1 (27)
Felony 5/M	25.8 (42)	19.4 (26)
Offense Category*		
Violent/person	25.8 (42)	41.8 (56)
Sex	3.7 (6)	.7 (1)
Drugs	41.1 (67)	23.1 (31)
Property	8.6 (14)	13.4 (18)
Traffic/DUI	3.1 (5)	2.2 (3)
Other	17.8 (29)	18.7 (25)
Substance Abuse Problem		
No	12.9 (21)	16.4 (22)
Yes	87.1 (142)	83.6 (112)
Employment Problem*		
No	75.5 (123)	47.0 (63)
Yes	24.5 (40)	53.0 (71)
Emotional Problem		
No	81.0 (132)	79.1 (106)
Yes	19.0 (31)	20.9 (28)
Risk Categories*		
Low	15.3 (25)	5.2 (7)
Moderate	72.4 (118)	67.2 (90)
High	12.3 (20)	27.6 (37)
Average risk scores	Mean (N)	Mean (N)
Males*	28.8	34.8
Females	N/A	N/A
Overall*	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Oriana TMRC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	28.6 (86)	15.6 (5)	28.4 (59)	36.8 (21)
Comparison	28.3 (84)	9.4 (3)	28.4 (59)	38.6 (22)
Successful Completers				
Treatment	19.6 (32)	16.0 (4)	20.3 (24)	20.0 (4)
Comparison	24.5 (40)	8.0 (2)	26.3 (31)	35.0 (7)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Oriana TMRC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.0 (113)	15.6 (5)	38.9 (81)	47.4 (27)
Comparison	39.1 (116)	12.5 (4)	38.5 (80)	56.1 (32)
Successful Completers				
Treatment	30.1 (49)	16.0 (4)	33.1 (39)	30.0 (6)
Comparison	37.4 (61)	12.0 (3)	39.8 (47)	55.0 (11)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Oriana TMRC

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.8 (139) *	34.4 (11) *	43.8 (91) *	64.9 (37)
Comparison	26.3 (78)	12.5 (4)	24.0 (50)	42.1 (24)
Successful Completers				
Treatment	21.5 (35)	28.0 (7)	18.6 (22)	30.0 (6)
Comparison	25.8 (42)	16.0 (4)	24.6 (29)	45.0 (9)

*Difference significant at p<.05

Pathfinder House

Pathfinder House is a Halfway House located in Lima, Ohio. This facility serves adult males and females placed on Transitional Control, parole/Post-Release Control or Transitional Release from the Ohio Department of Rehabilitation and Correction (ODRC). Pathfinder House has been in operation since 1981 and has a capacity to serve 40 men and 19 women. This facility is funded by ODRC. Services include substance abuse, anger management, cognitive-behavioral treatment, parenting, life skills and victim awareness. Pathfinder House was visited by a University of Cincinnati research team on September 12, 2006. At the time of the visit, there were 39 male and 19 female residents. Lori Reidenbach was the identified program director.

Program Leadership/Development

Strengths:

- The program director was involved in the creation of the current program and provides staff training.
- The program is stable and is valued by the criminal justice community**.**
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should provide regular supervision of staff and direct service to residents.
- While the administration reviews new curricula before its adoption, there is no regular literature review related to effective interventions with offenders by the program director or staff.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support treatment goals and ethical guidelines.

Recommendations for Improvement:

- The program should utilize a more detailed annual staff evaluation that rates staff on skills related to service delivery.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Level of Service Inventory-Revised to asses risk and identify need factors for all residents.
- The program targets moderate to high risk offenders.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess areas such as motivation, personality and learning styles.
- The program should provide re-assessment of risk and need factors.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse and empathy development).
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4 months
- All groups have a manual or use a curriculum.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building, including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program should attempt to provide separate groups for males and females rather than mixed gender groups.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, phone calls out and breathalyzers), the monitoring mechanisms should be enhanced.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from more moderate risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- While there is a range of rewards for staff to choose from to reinforce offenders, the frequency of use of rewards should be increased, particularly for the males.
- The procedure by which offenders are punished for rule violations should be improved. Punishers should be consistent, immediate, used for the purpose of extinguishing unwanted behavior, brief, and alternative prosocial behaviors should be taught to offenders.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.

- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or other means of determining offender improvement.
- The program completion rate for male offenders was 41% and for females 63%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is licensed by ODADAS.
- Internal quality review mechanisms include client surveys as well as monthly file review and observation of treatment groups.
- The program has been formally evaluated in the past and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve internal quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for PATHFINDER by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (119)	50.0 (119)
Female	50.0 (51)	50.0 (51)
Race		
White	50.0 (104)	50.0 (104)
Non-white	50.0 (66)	50.0 (66)
Marital Status*		
Married	30.4 (14)	69.6 (32)
Single/not married	56.4 (154)	43.6 (119)
Age Category		
16 to 23	56.8 (63)	43.2 (48)
24 to 30	43.0 (40)	57.0 (53)
31-39	56.3 (36)	43.8 (28)
40+	43.1 (31)	56.9 (41)
Mean Age	32.4	33.8
SD	9.7	11.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for PATHFINDER by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.4	0.8
SD	1.6	1.7
Previous Conviction	**% (N)**	**% (N)**
No	49.8 (111)	50.2 (112)
Yes	49.1 (56)	50.9 (58)
Offense Level		
Felony 1	47.8 (11)	52.2 (12)
Felony 2	48.1 (26)	51.9 (28)
Felony 3	41.7 (30)	58.3 (42)
Felony 4	48.4 (31)	51.6 (33)
Felony 5/M	58.1 (72)	41.9 (52)
Offense Category		
Violent/person	60.0 (54)	40.0 (36)
Sex	N/A	N/A
Drugs	48.9 (46)	51.1 (48)
Property	43.0 (49)	57.0 (65)
Traffic/DUI	60.0 (3)	40.0 (2)
Other	48.6 (18)	51.4 (19)
Substance Abuse Problem		
No	50.0 (23)	50.0 (23)
Yes	50.0 (147)	50.0 (147)
Employment Problem*		
No	57.4 (117)	42.6 (87)
Yes	39.0 (53)	61.0 (83)
Emotional Problem*		
No	56.4 (128)	43.6 (99)
Yes	37.2 (42)	62.8 (71)
Risk Categories		
Low	50.0 (23)	50.0 (23)
Moderate	50.0 (117)	50.0 (117)
High	50.0 (27)	50.0 (27)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	22.2	6.4
Females	6.4	6.6
Overall	28.7	28.6

*Difference significant at p<.05

Descriptive Statistics for PATHFINDER by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	64.0 (55)	76.2 (64)
Female	36.0 (31)	23.8 (20)
Race		
White	62.8 (54)	59.5 (50)
Non-white	37.2 (32)	40.5 (34)
Marital Status		
Married	7.0 (6)	9.8 (8)
Single/not married	93.0 (80)	90.2 (74)
Age Category*		
16 to 23	29.1 (25)	45.2 (38)
24 to 30	20.9 (18)	26.2 (22)
31-39	24.4 (21)	17.9 (15)
40+	25.6 (22)	10.7 (9)
Mean Age*	34.2	30.5
SD	9.9	9.1

*Difference significant at $p<.05$

Descriptive Statistics for Risk/Need Factors for PATHFINDER by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.3	1.5
SD	1.5	1.7
Previous Conviction	% (N)	% (N)
No	64.7 (55)	68.3 (56)
Yes	35.3 (30)	31.7 (26)
Offense Level		
Felony 1	5.8 (5)	7.1 (6)
Felony 2	17.4 (15)	13.1 (11)
Felony 3	14.0 (12)	21.4 (18)
Felony 4	18.6 (16)	17.9 (15)
Felony 5/M	44.2 (38)	40.5 (34)
Offense Category		
Violent/person	30.2 (26)	33.3 (28)
Sex	N/A	N/A
Drugs	29.1 (25)	25.0 (21)
Property	30.2 (26)	27.4 (23)
Traffic/DUI	1.2 (1)	2.4 (2)
Other	9.3 (8)	11.9 (10)
Substance Abuse Problem		
No	11.6 (10)	15.5 (13)
Yes	88.4 (76)	84.5 (71)
Employment Problem		
No	95.3 (82)	41.7 (35)
Yes	4.7 (4)	58.3 (49)
Emotional Problem		
No	75.6 (65)	75.0 (63)
Yes	24.4 (21)	25.0 (21)
Risk Categories		
Low	16.5 (14)	11.0 (9)
Moderate	70.6 (60)	69.5 (57)
High	12.9 (11)	19.5 (16)
Average risk scores	Mean (N)	Mean (N)
Males*	17.8	26.8
Females	7.8	5.0
Overall*	25.6	31.8

*Difference significant at $p < .05$

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Pathfinder House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	19.2 (32)	4.3 (1)	18.8 (22)	33.3 (9)
Comparison	21.0 (35)	0.0 (0)	17.9 (21)	51.9 (14)
Successful Completers				
Treatment	17.6 (15)	7.1 (1)	20.0 (12)	18.2 (2)
Comparison	21.2 (18)	0.0 (0)	20.0 (12)	54.5 (6)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Pathfinder House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	24.0 (40)	4.3 (1)	24.8 (29)	37.0 (10)
Comparison	24.0 (40)	0.0 (0)	21.4 (25)	55.6 (15)
Successful Completers				
Treatment	22.4 (19)	7.1 (1)	25.0 (15)	27.3 (3)
Comparison	24.7 (21)	0.0 (0)	25.0 (15)	54.5 (6)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Pathfinder House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	41.9 (70) *	26.1 (6) *	44.4 (52) *	44.4 (12)
Comparison	21.0 (35)	4.3 (1)	20.5 (24)	37.0 (10)
Successful Completers				
Treatment	16.5 (14)	7.1 (1)	20.0 (12)	9.1 (1) *
Comparison	24.7 (21)	0.0 (0)	23.3 (14)	63.6 (7)

*Difference significant at p<.05

Salvation Army Booth House

Salvation Army Booth House is a Halfway House located in Dayton, Ohio. This facility serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Salvation Army Booth House has been in operation since 1995 and is contracted to serve 15 men. This facility is funded primarily by ODRC. Services include substance abuse education, skill building, cognitive restructuring and employment readiness. Salvation Army Booth House was visited by a University of Cincinnati research team on October 18, 2006. At the time of the visit, there were 15 offenders. Jane Benner was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via group treatment, conducting assessments, carrying a caseload, and running house meetings with offenders in the program.
- Funding is stable, allowing the program to operate as designed
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives literature exposure via non-peer reviewed journals and conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, problem solving skills and appropriate interaction with residents.

- Security staff should receive formalized initial training and at least 40 hours of ongoing training.
- More initial staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program uses the Ohio Risk and Ohio Needs Assessment to asses risk and identify criminogenic need factors for all residents. The program also uses a diagnostic assessment form/psychosocial assessment
- The program provides re-assessment of risk and need factors.
- The program targets primarily moderate to high risk offenders.

Recommendations for Improvement:

- The program should consider using specialized assessments of criminogenic need areas such as the Addiction Severity Index or SASSI to measure substance abuse need or the How I Think or Criminal Sentiments Scale to measure criminal attitude
- The program should also have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- The program provides offenders with the opportunity for input into the structure of the program via community meetings and a program counsel meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing, homework assignments and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling, role play and graduated practice (or practicing skills in increasingly difficult situations) needs to be increased across all groups.
- While the program has elements of a cognitive-behavioral model, the substance abuse treatment still has 12-step elements and is an educational model.
- Structured curricula or manuals should be used for all groups.
- Groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 2 months, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment.
- While there is some monitoring of offenders while on pass (e.g. occasional visits, stops to AA meetings, and breathalyzers), the monitoring mechanisms should be enhanced.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are individualized, escape is impossible and punishers are not spread out. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 57%. This rate should fall between 65 and 85%.
- The program should offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.
- While some offenders are referred to external providers for aftercare services (approximately 25%), all offenders should be receiving aftercare following residential placement. Furthermore, aftercare treatment should be structured and incorporate graduated practice of real-life issues offenders contend with in the community.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including file review, observation of treatment groups, staff feedback, supervision of assessments, conducting re-assessments and quarterly meeting with an ACA consultant.
- The program has been evaluated in the past via an outcome evaluation.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of contractual and external providers and increase the frequency of direct observation of treatment delivery.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for BOOTH HOUSE/SALV ARMY by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (69)	50.0 (69)
Female	N/A	N/A
Race		
White	50.0 (40)	50.0 (40)
Non-white	50.0 (29)	50.0 (29)
Marital Status		
Married	11.1 (1)	88.9 (8)
Single/not married	54.0 (68)	46.0 (58)
Age Category*		
16 to 23	62.5 (30)	37.5 (18)
24 to 30	30.0 (9)	70.0 (21)
31-39	45.7 (16)	54.3 (19)
40+	56.0 (14)	44.0 (11)
Mean Age	32.6	32.1
SD	11.1	11.3

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for BOOTH HOUSE/SALV ARMY by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.6	0.9
SD	1.8	1.7
Previous Conviction*	**% (N)**	**% (N)**
No	67.9 (36)	32.1 (17)
Yes	38.8 (33)	61.2 (52)
Offense Level		
Felony 1	53.8 (7)	46.2 (6)
Felony 2	54.2 (13)	45.8 (11)
Felony 3	45.2 (14)	54.8 (17)
Felony 4	41.7 (10)	58.3 (14)
Felony 5/M	54.3 (25)	45.7 (21)
Offense Category		
Violent/person	55.0 (33)	45.0 (27)
Sex	N/A	N/A
Drugs	64.0 (16)	36.0 (9)
Property	44.4 (16)	55.6 (20)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	20.0 (3)	80.0 (12)
Substance Abuse Problem*		
No	9.5 (2)	90.5 (19)
Yes	57.3 (67)	42.7 (50)
Employment Problem		
No	52.6 (50)	47.4 (45)
Yes	44.2 (19)	55.8 (24)
Emotional Problem		
No	48.8 (40)	51.2 (42)
Yes	51.8 (29)	48.2 (27)
Risk Categories		
Low	50.0 (4)	50.0 (4)
Moderate	50.0 (53)	50.0 (53)
High	50.0 (12)	50.0 (12)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	33.0	33.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

Descriptive Statistics for BOOTH HOUSE/SALVATION ARMY by Termination Status

Variable	HWH	
	Successful % (N)	Unsussessful % (N)
Gender		
Male	100.0 (34)	100.0 (35)
Female	N/A	N/A
Race		
White	50.0 (17)	65.7 (23)
Non-white	50.0 (17)	34.3 (12)
Marital Status		
Married	0.0 (0)	2.9 (1)
Single/not married	100.0 (34)	97.1 (34)
Age Category		
16 to 23	41.2 (14)	45.7 (16)
24 to 30	11.8 (4)	14.3 (5)
31-39	20.6 (7)	25.7 (9)
40+	26.5 (9)	14.3 (5)
Mean Age	34.1 (34)	31.2 (35)
SD	12.6	9.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for BOOTH HOUSE/SALVATION ARMY by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.7 (34)	1.4 (35)
SD	2.1	1.6
Previous Conviction	**% (N)**	**% (N)**
No	61.8 (21)	42.9 (15)
Yes	28.2 (13)	57.1 (20)
Offense Level		
Felony 1	8.8 (3)	11.4 (4)
Felony 2	20.6 (7)	17.1 (6)
Felony 3	11.8 (4)	28.6 (10)
Felony 4	14.7 (5)	14.3 (5)
Felony 5/M	44.1 (15)	28.6 (10)
Offense Category		
Violent/person	38.2 (13)	57.1 (20)
Sex	0.0 (0)	0.0 (0)
Drugs	26.5 (9)	20.0 (7)
Property	32.4 (11)	14.3 (5)
Traffic/DUI	2.9 (1)	0.0 (0)
Other	0.0 (0)	8.6 (3)
Substance Abuse Problem		
No	0.0 (0)	5.7 (2)
Yes	100.0 (34)	94.3 (33)
Employment Problem*		
No	94.1 (32)	51.4 (18)
Yes	5.9 (2)	48.6 (17)
Emotional Problem		
No	58.8 (20)	57.1 (20)
Yes	41.2 (14)	42.9 (15)
Risk Categories		
Low	11.8 (4)	0.0 (0)
Moderate	76.5 (26)	77.1 (27)
High	11.8 (4)	22.9 (8)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	31 (34)	34.9 (35)
Females	N/A	N/A
Overall	31 (34)	34.9 (35)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Booth House--Salvation Army

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.6 (28)	0.0 (0)	43.4 (23)	41.7 (5)
Comparison	44.9 (31)	0.0 (0)	47.2 (25)	50.0 (6)
Successful Completers				
Treatment	26.5 (9)	0.0 (0)	26.9 (7)	50.0 (2)
Comparison	38.2 (13)	0.0 (0)	42.3 (11)	50.0 (2)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Booth House--Salvation Army

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	46.4 (32)	0.0 (0)	47.2 (25)	58.3 (7)
Comparison	53.6 (37)	0.0 (0)	56.6 (30)	58.3 (7)
Successful Completers				
Treatment	29.4 (10)	0.0 (0)	30.8 (8)	50.0 (2)
Comparison	44.1 (15)	0.0 (0)	50.0 (13)	50.0 (2)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Booth House--Salvation Army

| | Risk Levels | | | |
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.6 (28)	0.0 (0)	41.5 (22)	50.0 (6)
Comparison	40.6 (28)	0.0 (0)	43.4 (23)	41.7 (5)
Successful Completers				
Treatment	29.4 (10)	0.0 (0)	30.8 (8)	50.0 (2)
Comparison	32.4 (11)	0.0 (0)	38.5 (10)	25.0 (1)

*Difference significant at p<.05

Southwestern Ohio Serenity Hall (SOS)

Southwestern Ohio Serenity Hall is a Halfway House located in Hamilton, Ohio. This facility serves adult males placed on probation and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Southwestern Ohio Serenity Hall has been in operation since 1968 and is contracted to serve 35 men. This facility is funded by ODRC. Services include substance abuse, relapse prevention, cognitive restructuring, anger management, life skills, spirituality, cultural diversity and aftercare. Southwestern Ohio Serenity Hall was visited by a University of Cincinnati research team on October 6, 2006. At the time of the visit, there were 33 offenders. Marae Martin was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff and should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives literature exposure via local and national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program should work to build relations with the community in which it is housed.
- While funding is relatively stable, inadequate funding has made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Although staff are evaluated annually with an assessment, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority, effective reinforcement and communication skills with residents.
- More staff training, particularly for security staff, should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment and Ohio Offender Needs Assessment to assess risk and identify criminogenic need factors for all residents.
- The program also uses the Addiction Severity Index to further assess substance abuse issues.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should target moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger and substance abuse).
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs and phone calls out.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Offenders have the opportunity to provide input into the structure of the program via a community meeting and agency questionnaires.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- The program mandates family intervention for participants who desire visitation.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While most of the program's targets are criminogenic in nature, some are non-criminogenic such as life skills, parenting, budgeting, spirituality and cultural diversity. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).

- While the program uses some cognitive-behavioral elements, it still relies heavily on the 12-step/medical model for the substance abuse treatment.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be employed or increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, immediate, individualized, varied, escape is impossible, they are not spread out, they are seen as valuable for extinguishing behavior and that alternative prosocial behaviors are taught. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 55%. This rate should fall between 65 and 85%.
- While aftercare services are provided by the program, only about 5% of offenders participate in such services. Likewise, aftercare consists of a process/education group rather than a group designed to practice skills offenders have learned while in the program.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association, is licensed by ODADAS, and is monitored by the United Way.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, supervision of program and staff certification and monitoring of the aftercare program.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- The frequency with which staff are observed delivering treatment and given feedback should be increased.

Descriptive Statistics for SOS by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (130)	50.0 (130)
Female	N/A	N/A
Race		
White	50.0 (91)	50.0 (91)
Non-white	50.0 (39)	50.0 (39)
Marital Status*		
Married	20.7 (6)	79.3 (23)
Single/not married	54.1 (124)	45.9 (105)
Age Category		
16 to 23	46.0 (29)	54.0 (34)
24 to 30	55.4 (36)	44.6 (29)
31-39	43.2 (32)	56.8 (42)
40+	56.9 (33)	43.1 (25)
Mean Age*	35.1	32.3
SD	9.7	9.5

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for SOS by Group Membership

Variable	HWH	
	Treatment Group	Comparison Group
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	1.1	1.1
SD	1.4	2.1
Previous Conviction*	% (N)	% (N)
No	67.8 (97)	32.2 (46)
Yes	28.2 (33)	71.8 (84)
Offense Level*		
Felony 1	60.0 (6)	40.0 (4)
Felony 2	48.1 (13)	51.9 (14)
Felony 3	49.0 (25)	51.0 (26)
Felony 4	33.3 (19)	66.7 (38)
Felony 5/M	58.3 (67)	41.7 (48)
Offense Category*		
Violent/person	29.6 (16)	70.4 (38)
Sex	N/A	N/A
Drugs	59.3 (51)	40.7 (35)
Property	50.6 (41)	49.4 (40)
Traffic/DUI	50.0 (2)	50.0 (2)
Other	57.1 (20)	42.9 (15)
Substance Abuse Problem*		
No	0.0 (0)	100.0 (20)
Yes	54.2 (130)	45.8 (110)
Employment Problem*		
No	34.4 (45)	65.6 (86)
Yes	65.9 (85)	34.1 (44)
Emotional Problem		
No	48.1 (90)	51.9 (97)
Yes	54.8 (40)	45.2 (33)
Risk Categories		
Low	50.0 (5)	50.0 (5)
Moderate	50.0 (90)	50.0 (90)
High	50.0 (35)	50.0 (35)
Average risk scores	Mean (N)	Mean (N)
Males	35.5	34.7
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for SOS by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (70)	100.0 (60)
Female	N/A	N/A
Race		
White	75.7 (53)	63.3 (38)
Non-white	24.3 (17)	36.2 (22)
Marital Status		
Married	2.9 (2)	6.7 (4)
Single/not married	97.1 (68)	93.3 (56)
Age Category		
16 to 23	24.3 (17)	20.0 (12)
24 to 30	31.4 (22)	23.3 (14)
31-39	22.9 (16)	26.7 (16)
40+	21.4 (15)	30.0 (18)
Mean Age	34.3	35.9
SD	10.0	9.3

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for SOS by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	0.9	1.4
SD	1.1	1.7
Previous Conviction	% (N)	% (N)
No	75.7 (53)	73.3 (44)
Yes	24.3 (17)	26.7 (16)
Offense Level		
Felony 1	2.9 (2)	6.7 (4)
Felony 2	11.4 (8)	8.3 (5)
Felony 3	21.4 (15)	16.7 (10)
Felony 4	17.1 (12)	11.7 (7)
Felony 5/M	47.1 (33)	56.7 (34)
Offense Category		
Violent/person	15.7 (11)	8.3 (5)
Sex	N/A	N/A
Drugs	37.1 (26)	41.7 (25)
Property	30.0 (21)	33.3 (20)
Traffic/DUI	1.4 (1)	1.7 (1)
Other	15.7 (11)	15.0 (9)
Substance Abuse Problem		
No	100.0 (70)	100.0 (60)
Yes	N/A	N/A
Employment Problem*		
No	45.7 (32)	21.7 (13)
Yes	54.3 (38)	78.3 (47)
Emotional Problem		
No	74.3 (52)	63.3 (38)
Yes	25.7 (18)	36.7 (22)
Risk Categories		
Low	4.3 (3)	3.3 (2)
Moderate	77.1 (54)	60.0 (36)
High	18.6 (13)	36.7 (22)
Average risk scores	Mean (N)	Mean (N)
Males	34.3	37.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Southwestern Ohio Serenity Hall (SOS)

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	40.0 (52) *	20.0 (1)	34.4 (31)	57.1 (20)
Comparison	29.2 (38)	0.0 (0)	18.9 (17) *	60.0 (21)
Successful Completers				
Treatment	31.4 (22)	0.0 (0)	31.5 (17)	38.5 (5)
Comparison	24.3 (17)	0.0 (0)	16.7 (9)	61.5 (8)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Southwestern Ohio Serenity Hall (SOS)

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	53.1 (69) *	40.0 (2)	47.8 (43) *	68.9 (24)
Comparison	33.8 (44)	0.0 (0)	24.4 (22)	62.9 (22)
Successful Completers				
Treatment	50.0 (35) *	33.3 (1)	48.1 (26) *	61.5 (8)
Comparison	31.4 (22)	0.0 (0)	25.9 (14)	61.5 (8)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Southwestern Ohio Serenity Hall (SOS)

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	36.9 (48)	40.0 (2)	28.9 (26)	57.1 (20)
Comparison	29.2 (38)	0.0 (0)	20.0 (18)	57.1 (20)
Successful Completers				
Treatment	25.7 (18)	33.3 (1)	20.4 (11)	46.2 (6)
Comparison	22.9 (16)	0.0 (0)	16.7 (9)	53.8 (7)

*Difference significant at p<.05

Spencer House

Spencer House is a Halfway House located in Newark, Ohio. This facility serves adult males placed on probation and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). The program also serves self-referral clients. Spencer House has been in operation since 1969 and has a sister facility, Courage House, that serves female offenders. Spencer House is contracted to serve 16 men. This facility is funded by ODRC, Community Mental Health Recreation Board, United Way, and through fundraising efforts.   Services include substance abuse treatment, education, cognitive restructuring, and employment readiness.   Spencer House was visited by a University of Cincinnati research team on November 2, 2006. At the time of the visit, there were 16 offenders. Sharon Stockton was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services to offenders in the program as a psychiatric nurse.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.
- Funding is stable, allowing the program to operate as designed.
- The program offers separate treatment for male and female offenders.

Recommendations for Improvement:

- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- Staff should receive clinical supervision by a licensed professional.

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate offender reinforcement.
- More staff training, particularly initial training, should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program uses the Ohio Risk Assessment and Ohio Offender Needs Assessment to assess risk and identify criminogenic need factors for all residents.
- The program uses the MAST and DAST to further assess substance abuse issues as well as a biopsychosocial assessment, a medical screener and a gambling screener.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health and learning styles.
- The program should consistently provide re-assessment of risk and need factors.
- Offender risk levels should be formally tracked and the program should target moderate to high risk offenders.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, coping skills, and employment).
- While the substance abuse treatment still has 12-step elements, the majority of treatment is based upon a cognitive-behavioral and a motivational enhancement model.
- The program's average length of stay is 6 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Staff are matched to groups based on motivation to provide a particular service.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program including a community meeting and advisory meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 66%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning and processing.
- Aftercare services are provided by the program to all offenders.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.

- While there is some monitoring of offenders while on pass (e.g. schedules/logs, drug testing, and site checks), the monitoring mechanisms should be enhanced.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program, particularly if non-offenders are in the program.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior should be increased to a ratio of at least 4 rewards for every 1 punisher.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, varied, consistently applied, individualized and based on the demonstration of a prosocial behavior
- The procedure by which offenders are punished could be improved by ensuring that punishers are consistently applied, immediate, individualized, undesirable by the offender, escape is impossible, they are not spread out, and they are based on demonstration of an antisocial behavior. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members (beyond a program overview) who might assist in providing prosocial support for the offenders.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association, is licensed by ODADAS, and is monitored by United Way.
- The program uses several internal quality review mechanisms, including file review (staff and peer review), client surveys, supervision of assessments, CCIS audits and an exit interview with the probation/parole officer.
- The program collects recidivism data on offenders discharged from the program.

Recommendations for Improvement:

- While there are several internal quality assurance processes, staff are not monitored and given feedback regarding treatment delivery. This should be taking place at least monthly.
- In order to improve external quality assurance, the program should provide increased monitoring of external providers.
- The program should follow offenders for a longer period than three months following discharge when collecting recidivism data.

Descriptive Statistics for SPENCER HOUSE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (11)	50.0 (11)
Female	N/A	N/A
Race		
White	50.0 (9)	50.0 (9)
Non-white	50.0 (2)	50.0 (2)
Marital Status		
Married	0.0 (0)	100.0 (2)
Single/not married	55.0 (11)	45.0 (9)
Age Category		
16 to 23	83.3 (5)	16.7 (1)
24 to 30	33.3 (1)	66.7 (2)
31-39	28.6 (2)	71.4 (5)
40+	50.0 (3)	50.0 (3)
Mean Age	32.6	36.0
SD	10.5	8.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for SPENCER HOUSE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.4	0.7
SD	1.2	1.8
Previous Conviction	**% (N)**	**% (N)**
No	55.6 (10)	44.4 (8)
Yes	25.0 (1)	75.0 (3)
Offense Level		
Felony 1	N/A	N/A
Felony 2	100.0 (1)	0.0 (0)
Felony 3	33.3 (1)	66.7 (2)
Felony 4	33.3 (2)	66.7 (4)
Felony 5/M	58.3 (7)	41.7 (5)
Offense Category		
Violent/person	50.0 (1)	50.0 (1)
Sex	N/A	N/A
Drugs	40.0 (4)	60.0 (6)
Property	71.4 (5)	28.6 (2)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	0.0 (0)	100.0 (1)
Substance Abuse Problem		
No	0.0 (0)	100.0 (2)
Yes	55.0 (11)	45.0 (9)
Employment Problem		
No	66.7 (8)	33.3 (4)
Yes	30.0 (3)	70.0 (7)
Emotional Problem		
No	33.3 (4)	66.7 (8)
Yes	70.0 (7)	30.0 (3)
Risk Categories		
Low	50.0 (1)	50.0 (1)
Moderate	50.0 (9)	50.0 (9)
High	50.0 (1)	50.0 (1)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	29.7	31.8
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for SPENCER HOUSE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (9)	100.0 (2)
Female	N/A	N/A
Race		
White	88.9 (8)	50.0 (1)
Non-white	11.1 (1)	50.0 (1)
Marital Status		
Married	N/A	N/A
Single/not married	100.0 (9)	100.0 (2)
Age Category		
16 to 23	33.3 (3)	100.0 (2)
24 to 30	11.1 (1)	.0 (0)
31-39	22.2 (2)	.0 (0)
40+	33.3 (3)	.0 (0)
Mean Age*	35.6	19.5
SD	9.2	2.1

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for SPENCER HOUSE by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.4	0.0
SD	1.3	0.0
Previous Conviction	**% (N)**	**% (N)**
No	100.0 (9)	50.0 (1)
Yes	0.0 (0)	50.0 (1)
Offense Level		
Felony 1	N/A	N/A
Felony 2	11.1 (1)	0.0 (0)
Felony 3	11.1 (1)	0.0 (0)
Felony 4	11.1 (1)	50.0 (1)
Felony 5/M	66.7 (6)	50.0 (1)
Offense Category		
Violent/person	11.1 (1)	0.0 (0)
Sex	0.0 (0)	0.0 (0)
Drugs	44.4 (4)	0.0 (0)
Property	33.3 (3)	100.0 (2)
Traffic/DUI	11.1 (1)	0.0 (0)
Other	0.0 (0)	0.0 (0)
Substance Abuse Problem		
No	0.0 (0)	0.0 (0)
Yes	100.0 (9)	100.0 (2)
Employment Problem		
No	77.8 (7)	50.0 (1)
Yes	22.2 (2)	50.0 (1)
Emotional Problem		
No	44.4 (4)	0.0 (0)
Yes	55.6 (5)	100.0 (2)
Risk Categories		
Low	11.1 (1)	0.0 (0)
Moderate	88.9 (8)	50.0 (1)
High	0.0 (0)	50.0 (1)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	26.8	43.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Spencer Halfway House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.3 (3)	0.0 (0)	33.3 (3)	0.0 (0)
Comparison	27.3 (3)	0.0 (0)	22.2 (2)	100.0 (1)
Successful Completers				
Treatment	22.2 (2)	0.0 (0)	25.0 (2)	0.0 (0)
Comparison	22.2 (2)	0.0 (0)	25.0 (2)	0.0 (0)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Spencer Halfway House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.3 (3)	0.0 (0)	33.3 (3)	0.0 (0)
Comparison	27.3 (3)	0.0 (0)	22.2 (2)	100.0 (1)
Successful Completers				
Treatment	22.2 (2)	0.0 (0)	25.0 (2)	0.0 (0)
Comparison	22.2 (2)	0.0 (0)	25.0 (2)	0.0 (0)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Spencer Halfway House

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	45.5 (5)	0.0 (0)	44.4 (4)	100.0 (1)
Comparison	36.4 (4)	0.0 (0)	44.4 (4)	0.0 (0)
Successful Completers				
Treatment	33.3 (3)	0.0 (0)	37.5 (3)	0.0 (0)
Comparison	44.4 (4)	0.0 (0)	50.0 (4)	0.0 (0)

*Difference significant at p<.05

Talbert House Beekman

Talbert House Beekman is a Halfway House located in Cincinnati, Ohio. This is one of three "Men's Cluster" Talbert House facilities which is designed to serve moderate to high risk offenders. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Talbert House Beekman has been in operation since 1989 and is contracted to serve 48 men. This facility is funded primarily by ODRC. Services include substance abuse treatment, cognitive restructuring, life skills, and employment readiness. Talbert House Beekman was visited by a University of Cincinnati research team on November 9, 2006. At the time of the visit, there were 32 offenders. Doris Tribble was the identified program director.

Program Leadership/Development

Strengths:

- The program director created of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community and community at large.
- Problems or crises tend to be handled with a problem-solving approach and staff and management appear to work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

Assessment

Strengths:

- The program identifies and follows rational exclusionary criteria for residents.
- The program accesses completed copies of the Level of Service Inventory-Revised for all offenders, which are conducted at Talbert House Cornerstone to determine appropriate placement at Talbert House Spring Grove.
- The program also accesses copies of a Diagnostic Assessment Form, How I Think assessment to measure criminal attitude, and the initial Individual Service Plan.
- Offender risk levels are formally tracked and the program primarily targets moderate to high risk offenders.
- The program provides re-assessment with the How I Think tool.

Recommendations for Improvement:

- While the program has rational exclusionary criteria in place, staff suggest that many of the offenders admitted to the program are inappropriate for the services offered, due to excessive substance abuse and mental health issues. Thus, more effective screening mechanisms should be in place.
- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, mental health, personality, education, and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse and employment).
- Structured curricula or manuals are used for all groups.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Much of the treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs, phone calls in and out and checking pay stubs.
- Higher risk offenders are separated from lower risk individuals via placement by risk into the men's cluster facilities.
- Staff are matched to groups based on professional experience.
- There are several mechanisms that provide offenders with the opportunity for input into the structure of the program including a suggestion box, community meeting and a resident spokesperson.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be applied across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment.
- Risk, need, and responsivity factors should guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, varied, consistently applied, individualized and based upon the demonstration of prosocial behavior.
- The procedure by which offenders are punished could be improved by ensuring that punishers are seen as valuable for extinguishing behavior, they are immediately applied, varied, individualized, consistently applied, escape is impossible, punishers are not spread out, and they appropriately match the infraction.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 50%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, observation of treatment groups, conducting re-assessments, and staff feedback.
- The program makes an attempt to collect recidivism data on offenders discharged from the program at 3, 6 and 9 months via self-report.
- The program has been formally evaluated in the past and performed better than the comparison group on at least some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, staff should be observed delivering treatment and be given feedback on a regular basis. Likewise, the program should provide increased monitoring of contractual and external providers.
- Follow-up on offenders could be enhanced if the program utilized a more formal measure of recidivism, such as record checks.

Descriptive Statistics for TALBERT HOUSE BEEKMAN by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (135)	50.0 (135)
Female	N/A	N/A
Race		
White	50.0 (63)	50.0 (63)
Non-white	50.0 (72)	50.0 (72)
Marital Status*		
Married	34.5 (10)	65.5 (190
Single/not married	52.7 (125)	47.3 (112)
Age Category		
16 to 23	54.3 (51)	45.7 (43)
24 to 30	45.0 (27)	55.0 (33)
31-39	56.9 (33)	43.1 (25)
40+	41.4 (24)	58.6 (34)
Mean Age	32.1	33.6
SD	9.1	10.4

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE BEEKMAN by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.0	1.4
SD	1.7	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	67.9 (72)	32.1 (34)
Yes	38.4 (63)	61.6 (101)
Offense Level		
Felony 1	46.4 (13)	53.6 (15)
Felony 2	45.6 (26)	54.4 (31)
Felony 3	47.6 (40)	52.4 (44)
Felony 4	62.2 (23)	37.8 (14)
Felony 5/M	51.6 (33)	48.4 (31)
Offense Category*		
Violent/person	34.7 (25)	65.3 (47)
Sex	N/A	N/A
Drugs	62.9 (44)	37.1 (26)
Property	48.2 (41)	51.8 (44)
Traffic/DUI	100.0 (5)	0.0 (0)
Other	52.6 (20)	47.4 (18)
Substance Abuse Problem*		
No	22.7 (10)	77.3 (34)
Yes	55.3 (125)	44.7 (101)
Employment Problem*		
No	57.0 (77)	43.0 (58)
Yes	43.0 (58)	57.0 (77)
Emotional Problem*		
No	54.4 (99)	45.6 (83)
Yes	40.9 (36)	59.1 (52)
Risk Categories		
Low	50.0 (8)	50.0 (8)
Moderate	50.0 (85)	50.0 (85)
High	50.0 (42)	50.0 (42)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	36.6	36.0
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for TALBERT HOUSE BEEKMAN by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (68)	100.0 (67)
Female	N/A	N/A
Race		
White	51.5 (35)	41.8 (28)
Non-white	48.5 (33)	58.2 (39)
Marital Status		
Married	8.8 (6)	6.0 (4)
Single/not married	91.2 (62)	94.0 (63)
Age Category		
16 to 23	35.3 (24)	40.3 (27)
24 to 30	17.6 (12)	22.4 (15)
31-39	27.9 (19)	20.9 (14)
40+	19.1 (13)	16.4 (11)
Mean Age	33.1	31.0
SD	9.6	8.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE BEEKMAN by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.5 (68)	2.4 (67)
SD	1.5	1.7
Previous Conviction	**% (N)**	**% (N)**
No	55.9 (38)	50.7 (34)
Yes	44.1 (30)	49.3 (33)
Offense Level*		
Felony 1	5.9 (4)	13.4 (9)
Felony 2	14.7 (10)	23.9 (16)
Felony 3	22.1 (15)	37.3 (25)
Felony 4	22.1 (15)	11.9 (8)
Felony 5/M	35.3 (24)	13.4 (9)
Offense Category		
Violent/person	20.6 (14)	16.4 (11)
Sex	0.0 (0)	0.0 (0)
Drugs	30.9 (21)	34.3 (23)
Property	23.5 (16)	37.3 (25)
Traffic/DUI	5.9 (4)	1.5 (1)
Other	19.1 (13)	10.4 (7)
Substance Abuse Problem		
No	8.8 (6)	6.0 (4)
Yes	91.2 (62)	94.0 (63)
Employment Problem*		
No	66.2 (45)	47.8 (32)
Yes	33.8 (23)	52.2 (35)
Emotional Problem		
No	72.1 (49)	74.6 (50)
Yes	27.9 (19)	24.4 (17)
Risk Categories		
Low	8.8 (6)	3.0 (2)
Moderate	72.1 (49)	53.7 (36)
High	19.1 (13)	43.3 (29)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	33.4 (67)	39.9 (68)
Females	N/A	N/A
Overall	33.4 (67)	39.9 (68)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Talbert House Beekman

			Risk Levels	
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	43.7 (59) *	0.0 (0)	40.0 (34)	59.5 (25) *
Comparison	32.6 (44)	25.0 (2)	30.6 (26)	38.1 (16)
Successful Completers				
Treatment	30.9 (21)	0.0 (0)	30.6 (15)	46.2 (6)
Comparison	27.9 (19)	33.3 (2)	28.6 (14)	23.1 (3)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Talbert House Beekman

			Risk Levels	
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	56.3 (76) *	12.5 (1)	54.1 (46) *	69.0 (29)
Comparison	41.5 (56)	25.0 (2)	35.3 (30)	57.1 (24)
Successful Completers				
Treatment	39.7 (27)	16.7 (1)	38.8 (19)	53.8 (7)
Comparison	36.8 (25)	33.3 (2)	30.6 (15)	61.5 (8)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Talbert House Beekman

			Risk Levels	
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	51.9 (70) *	25.0 (2)	44.7 (38)	71.4 (30) *
Comparison	32.6 (44)	25.0 (2)	32.9 (28)	33.3 (14)
Successful Completers				
Treatment	32.4 (22)	16.7 (1)	28.6 (14)	53.8 (7)
Comparison	29.4 (20)	33.3 (2)	26.5 (13)	38.5 (5)

*Difference significant at p<.05

Talbert House Cornerstone

Talbert House Cornerstone is a Halfway House located in Cincinnati, Ohio. This is one of three "Men's Cluster" Talbert House facilities which is designed to serve moderate and low risk offenders. This facility serves adult males placed on probation, federal offenders, voluntary/homeless clients, as well as Transitional Control, and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Talbert House Cornerstone has been in operation since 1970 and is contracted to serve 88 men. This facility is funded by ODRC and the Federal Bureau of Prisons. Services include substance abuse treatment, cognitive restructuring, life skills and employment readiness. Talbert House Cornerstone was visited by a University of Cincinnati research team on October 31, 2006. Erica Williamson was the identified program director.

Program Leadership/Development

Strengths:

- The program director is involved in selecting and supervising staff.
- The program director provides direct services via carrying a caseload of clients.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable, allowing the program to operate as designed.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director did not have a significant role in the design of the program as it currently exists.
- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff have limited input into the structure of the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised as a general risk/need assessment.
- The program also uses How I Think to assess criminal thinking and a Diagnostic Assessment Form.
- Offender risk levels are formally tracked and the program serves primarily moderate risk offenders (75%).
- The program provides re-assessment of criminal attitude with the HIT.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, mental health, personality and learning styles.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, substance abuse, and employment).
- Much of the treatment is based upon a cognitive-behavioral model.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is appropriate.
- Treatment varies by risk so that higher risk offenders receive a higher dosage of treatment via extra time with case managers. Likewise, higher risk offenders are separated from lower risk individuals in the program.
- Offenders are adequately monitored while on passes to the community via drug testing, schedules/logs, phone calls in and out and site checks.
- Staff are matched to groups based on professional experience.
- Offenders are given the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program completion rate is 85%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 1 month, which does not fall within the 3 to 9 month window for an appropriate length of stay in treatment.
- While need assessment results determine group referral, responsivity factors should also guide how offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, varied, consistently applied, individualized, and based upon the demonstration of a prosocial behavior.
- The procedure by which offenders are punished could be improved by ensuring that punishers are based on the demonstration of antisocial behavior, they are immediately applied, they are varied, escape is impossible and punishers are not spread out.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond parole supervision, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- The program uses several internal quality review mechanisms including staff and peer file review, client surveys, conducting re-assessments, supervising training protocol for treatment curriculum, and CQI monitoring.
- The program has been evaluated in the past with an outcome evaluation.

Recommendations for Improvement:

- In order to improve quality assurance, program supervisors should be directly observing the delivery of treatment with feedback to staff.
- The program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for TALBERT HOUSE CORNERSTONE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (76)	50.0 (76)
Female	N/A	N/A
Race		
White	50.0 (55)	50.0 (55)
Non-white	50.0 (21)	50.0 (21)
Marital Status		
Married	37.5 (6)	62.5 (10)
Single/not married	51.9 (69)	48.1 (64)
Age Category*		
16 to 23	17.2 (5)	82.8 (24)
24 to 30	48.1 (13)	51.9 (14)
31-39	60.4 (29)	39.6 (19)
40+	60.4 (29)	39.6 (19)
Mean Age*	39.6	34.8
SD	8.5	11.6

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE CORNERSTONE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.8	1.3
SD	1.7	2.0
Previous Conviction*	**% (N)**	**% (N)**
No	75.3 (58)	24.7 (19)
Yes	24.0 (18)	76.0 (57)
Offense Level*		
Felony 1	33.3 (5)	66.7 (10)
Felony 2	30.4 (7)	69.6 (16)
Felony 3	36.1 (13)	63.9 (23)
Felony 4	76.4 (42)	23.6 (13)
Felony 5/M	39.1 (9)	60.9 (14)
Offense Category*		
Violent/person	15.8 (6)	84.2 (32)
Sex	N/A	N/A
Drugs	58.6 (17)	41.4 (12)
Property	48.4 (150	51.6 (16)
Traffic/DUI	97.2 (35)	2.8 (1)
Other	16.7 (3)	83.3 (15)
Substance Abuse Problem*		
No	15.6 (5)	84.4 (27)
Yes	59.2 (71)	40.8 (49)
Employment Problem		
No	50.0 (43)	50.0 (43)
Yes	50.0 (33)	50.0 (33)
Emotional Problem*		
No	57.1 (64)	42.9 (48)
Yes	30.0 (12)	70.0 (28)
Risk Categories		
Low	50.0 (10)	50.0 (10)
Moderate	50.0 (49)	50.0 (49)
High	50.0 (17)	50.0 (17)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	31.8	32.6
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for TALBERT HOUSE CORNERSTONE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100 (56)	100 (20)
Female	N/A	N/A
Race		
White	78.6 (44)	55.0 (11)
Non-white	21.4 (12)	45 (9)
Marital Status		
Married	10.7 (6)	0.0 (0)
Single/not married	89.3 (50)	100.0 (19)
Age Category		
16 to 23	3.6 (2)	15.0 (3)
24 to 30	17.9 (10)	15.0 (3)
31-39	39.3 (22)	35.0 (7)
40+	39.3 (22)	35.0 (7)
Mean Age	40.0	38.3
SD	7.8	10.3

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE CORNERSTONE by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.7	2.0
SD	1.6	2.2
Previous Conviction*	**% (N)**	**% (N)**
No	82.1 (46)	60.0 (12)
Yes	40.0 (8)	17.9 (10)
Offense Level*		
Felony 1	1.8 (1)	20.0 (4)
Felony 2	3.6 (2)	25.0 (5)
Felony 3	21.4 (12)	5.0 (1)
Felony 4	67.9 (38)	20.0 (4)
Felony 5/M	5.4 (3)	30.0 (6)
Offense Category*		
Violent/person	5.4 (3)	15.0 (3)
Sex	0.0 (0)	0.0 (0)
Drugs	21.4 (12)	25.0 (5)
Property	10.7 (6)	45.0 (9)
Traffic/DUI	58.9 (33)	10.0 (2)
Other	3.6 (2)	5.0 (1)
Substance Abuse Problem		
No	7.1 (4)	5.0 (1)
Yes	92.9 (52)	95.0 (19)
Employment Problem		
No	73.2 (2)	10.0 (2)
Yes	26.8 (15)	90.0 (18)
Emotional Problem		
No	89.3 (50)	70.0 (14)
Yes	10.7 (6)	30.0 (6)
Risk Categories		
Low	17.9 (10)	0.0 (0)
Moderate	67.9 (38)	55.0 (11)
High	14.3 (8)	45.0 (9)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	28.7 (56)	40.7 (20)
Females	N/A	N/A
Overall	28.7 (56)	40.7 (20)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Talbert House Cornerstone

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	27.6 (21)	10.0 (1)	30.6 (15)	29.4 (5)
Comparison	35.5 (27)	20.0 (2)	30.6 (15)	58.8 (10)
Successful Completers				
Treatment	21.4 (12)	10.0 (1)	26.3 (10)	12.5 (1)
Comparison	33.9 (19)	20.0 (2)	31.6 (12)	62.5 (5)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Talbert House Cornerstone

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	35.5 (27)	20.0 (2)	34.7 (17)	47.1 (8)
Comparison	42.1 (32)	40.0 (4)	34.7 (17)	64.7 (11)
Successful Completers				
Treatment	28.6 (16)	20.0 (2)	28.9 (11)	37.5 (3)
Comparison	42.9 (24)	40.0 (4)	36.8 (14)	75.0 (6)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Talbert House Cornerstone

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	23.7 (18)	10.0 (1)	22.4 (11)	35.3 (6)
Comparison	35.5 (27)	40.0 (4)	30.6 (15)	47.1 (8)
Successful Completers				
Treatment	19.6 (11)	10.0 (1)	21.1 (8)	25.0 (2)
Comparison	32.1 (18)	40.0 (4)	28.9 (11)	37.5 (3)

*Difference significant at p<.05

Talbert House Pathways

Talbert House Pathways is a Halfway located in Cincinnati, Ohio. This facility serves adult females placed on probation, federal offenders, county offenders as well as Transitional Control, and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Talbert House Pathways has been in operation since 2001 and is contracted to serve 64 women. This facility is funded by ODRC, the Bureau of Prisons, Hamilton and outside counties, ODADAS, and the municipal courts. Services include substance abuse treatment, education, cognitive restructuring, trauma and recovery, parenting, women's issues, health and awareness, reintegration, and employment readiness. Talbert House Pathways was visited by a University of Cincinnati research team on October 13, 2006. At the time of the visit, there were 56 offenders. Kathy Kramer was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program director provides direct services, via regularly conducting assessments with offenders in the program.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is stable, allowing the program to operate as designed
- Problems or crises tend to be handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program receives some non-peer reviewed literature and gets literature exposure via conferences, the program should regularly consult a wider range of peer-reviewed literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate reinforcement of residents.
- More staff training should relate to the theory and practice of interventions used by the program, including effective correctional practices and the cognitive-behavioral model.
- Administrative and security staff appear to lack support for the treatment efforts provided by the program.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised as a general risk/need assessment.
- The program also uses assessment tools to further assess criminogenic needs, such as the SASSI to assess substance abuse need and the How I Think to assess criminal thinking.
- The program uses the Zung Depression assessment, a Diagnostic Assessment Form and a lethality assessment as responsivity tools.
- The program provides re-assessment of criminal attitude with the HIT.

Recommendations for Improvement:

- The program should have a wider spectrum of standardized and validated responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- Offender risk levels should be formally tracked and the program should be targeting moderate to high risk offenders.

Treatment

Strengths:

- Several program interventions focus on criminogenic needs areas (i.e. criminal attitude, substance abuse, reintegration issues and employment).
- While the substance abuse treatment still has 12-step elements, much of the other treatment is based upon a cognitive-behavioral model.
- The program's average length of stay is 3 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community via electronic monitoring, drug testing, schedules/logs and phone calls in and out.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Staff are matched to groups based on skill level and motivation to provide a particular service.
- Offenders are given the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program as well as the procedure for administering rewards appear appropriate.
- The program completion rate is 70%, which falls within the recommended range of 65 to 85%.
- The program teaches offenders to monitor and anticipate high risk situations via group activities.

- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While many of the program's targets are criminogenic in nature, many are also non-criminogenic such as parenting, women's issues, trauma, and health and awareness. At least 75% of the treatment focus should be on criminogenic need areas (e.g. antisocial attitudes, antisocial peers, antisocial personality, education, employment, structured leisure, family, and substance abuse).
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased and used consistently across all groups. Likewise, graduated rehearsal should be used to teach residents skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and groups should not exceed the maximum recommended facilitator to offender ratio of 1/10.
- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- While residents are assigned to groups based upon need assessment results, risk and responsivity factors should also guide how offenders are matched to interventions.
- The frequency of rewards should be increases so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are punished could be improved by ensuring that punishers are seen as valuable for extinguishing behavior, immediately and consistently applied, they are varied, escape is impossible, punishers are not spread out and alternative prosocial behaviors are taught.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While aftercare services are provided internally by the program, only in-county residents can participate in such services (about 30% of the clients). All residents should receive some form of aftercare.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, and observation of treatment groups with staff feedback.
- Talbert house employs CQI personnel to monitor the quality of treatment in the programs.

Recommendations for Improvement:

- In order to improve quality assurance, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for TALBERT HOUSE PATHWAYS by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	N/A	N/A
Female	50.0 (87)	50.0 (87)
Race		
White	50.0 (53)	50.0 (53)
Non-white	50.0 (34)	50.0 (34)
Marital Status		
Married	42.1 (8)	57.9 (11)
Single/not married	51.6 (79)	48.4 (74)
Age Category		
16 to 23	55.2 (16)	44.8 (13)
24 to 30	50.0 (15)	50.0 (15)
31-39	50.8 (30)	49.2 (29)
40+	46.4 (26)	53.6 (30)
Mean Age	36.3	35.6
SD	9.1	8.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE PATHWAYS by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.7	0.6
SD	1.1	1.1
Previous Conviction*	**% (N)**	**% (N)**
No	59.2 (74)	40.8 (51)
Yes	25.0 (12)	75.0 (36)
Offense Level*		
Felony 1	71.4 (5)	28.6 (2)
Felony 2	27.8 (5)	72.2 (13)
Felony 3	36.4 (8)	63.6 (14)
Felony 4	40.7 (11)	59.3 (16)
Felony 5/M	58.0 (58)	42.0 (42)
Offense Category*		
Violent/person	33.3 (11)	66.7 (22)
Sex	N/A	N/A
Drugs	65.0 (52)	35.0 (28)
Property	34.2 (13)	65.8 (25)
Traffic/DUI	0.0 (0)	100.0 (1)
Other	50.0 (11)	50.0 (11)
Substance Abuse Problem*		
No	33.3 (11)	66.7 (220
Yes	54.3 (76)	45.7 (64)
Employment Problem		
No	55.1 (59)	44.9 (48)
Yes	41.8 (28)	58.2 (39)
Emotional Problem		
No	43.8 (42)	56.3 (54)
Yes	58.4 (45)	41.6 (32)
Risk Categories		
Low	50.0 (31)	50.0 (31)
Moderate	50.0 (50)	50.0 (50)
High	50.0 (5)	50.0 (5)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	19.7	20.7
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for TALBERT HOUSE PATHWAYS by Termination Status

Variable	HWH Successful % (N)	Unsuccessful % (N)
Gender		
Male	N/A	N/A
Female	100 (56)	100 (31)
Race		
White	57.1 (32)	67.7 (21)
Non-white	42.9 (24)	32.3 (10)
Marital Status		
Married	10.7 (6)	6.5 (2)
Single/not married	89.3 (50)	93.5 (29)
Age Category		
16 to 23	14.3 (8)	25.8 (8)
24 to 30	14.3 (8)	22.6 (7)
31-39	37.5 (21)	29 (9)
40+	33.9 (19)	22.6 (7)
Mean Age	37.8	33.7
SD	8.8	9.3

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE PATHWAYS by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	0.6	0.8
SD	0.8	1.4
Previous Conviction	**% (N)**	**% (N)**
No	89.3 (50)	80 (24)
Yes	10.7 (6)	20 (6)
Offense Level		
Felony 1	8.9 (5)	0.0 (0)
Felony 2	7.1 (4)	3.2 (1)
Felony 3	7.1 (4)	12.9 (4)
Felony 4	12.5 (7)	12.9 (4)
Felony 5/M	64.3 (36)	71 (22)
Offense Category		
Violent/person	14.3 (8)	9.7 (3)
Sex	0.0 (0)	0.0 (0)
Drugs	64.3 (36)	51.6 (16)
Property	14.3 (8)	16.1 (5)
Traffic/DUI	0.0 (0)	0.0 (0)
Other	7.1 (4)	22.6 (7)
Substance Abuse Problem		
No	12.5 (7)	12.9 (4)
Yes	87.5 (49)	87.1 (27)
Employment Problem*		
No	85.7 (48)	35.5 (11)
Yes	14.3 (8)	64.5 (20)
Emotional Problem		
No	51.8 (29)	41.9 (13)
Yes	48.2 (27)	58.1 (18)
Risk Categories*		
Low	42.9 (24)	23.3 (7)
Moderate	57.1 (32)	60 (18)
High	0 (0)	16.7 (5)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	N/A	N/A
Females	17.9 (56)	22.9 (31)
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Talbert House Pathways

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	3.5 (3) *	0.0 (0)	6.0 (3)	0.0 (0)
Comparison	16.3 (14)	6.5 (2)	18.0 (9)	60.0 (3)
Successful Completers				
Treatment	1.8 (1) *	0.0 (0)	3.1 (1) *	N/A
Comparison	14.3 (8)	4.2 (1)	21.9 (7)	N/A

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Talbert House Pathways

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	16.3 (14)	6.5 (2)	20.0 (10)	40.0 (2)
Comparison	20.9 (18)	9.7 (3)	24.0 (12)	60.0 (3)
Successful Completers				
Treatment	10.7 (6)	8.3 (2)	12.5 (4)	N/A
Comparison	16.1 (9)	8.3 (2)	21.9 (7)	N/A

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Talbert House Pathways

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	22.1 (19)	9.7 (3)	24.0 (12)	80.0 (4)
Comparison	22.1 (19)	12.9 (4)	24.0 (12)	60.0 (3)
Successful Completers				
Treatment	10.7 (6)	8.3 (2)	12.5 (4)	N/A
Comparison	12.5 (7)	8.3 (2)	15.6 (5)	N/A

*Difference significant at p<.05

Talbert House Spring Grove

Talbert House Spring Grove is a Halfway House located in Cincinnati, Ohio. This is one of three "Men's Cluster" Talbert House facilities which is designed to serve moderate to low risk and dually diagnosed offenders. This facility serves adult males placed on probation, municipal offenders as well as Transitional Control, and parole/Post-Release Control offenders released from the Ohio Department of Rehabilitation and Correction (ODRC). Talbert House Spring Grove has been in operation since 1995 and is contracted to serve 108 men. This facility is funded by ODRC, a municipal contract, an Able contract, and Title 1 dollars. Services include substance abuse treatment, education, dual diagnosis, cognitive restructuring, and employment readiness. Talbert House Spring Grove was visited by a University of Cincinnati research team on October 16, 2006. At the time of the visit, there were 73 offenders. Will Marshall was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a significant role in the creation of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- While the program director provides direct services via co-facilitation of a monthly group with police, the director should be providing direct services on a more regular basis.
- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding is relatively stable, some funding issues have made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff are evaluated annually with an assessment that includes several ratings of service delivery skills.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a significant amount of input into the structure of the program and for the most part appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.
- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program provides re-assessment of risk and need factors.
- The program uses the How I Think assessment to assess criminal attitudes
- The program accesses completed copies of the Level of Service Inventory-Revised for all offenders, which are conducted at Talbert House Cornerstone, to determine appropriate placement at Talbert House Spring Grove.

Recommendations for Improvement:

- The program should have a spectrum of standardized, validated responsivity assessments to assess such areas as motivation, education, mental health, personality and learning styles.
- Offender risk levels should be formally tracked by the program and the program should not be targeting low risk offenders, which according to file review currently make up approximately half of the population.

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- The program's average length of stay is 3.5 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community.
- Treatment varies by risk so that offenders with a higher relative risk score receive a higher dosage of treatment. Likewise, higher risk offenders are separated from lower risk offenders by men's cluster facilities.
- Staff are matched to the drug/alcohol group based on professional experience.
- Offenders are provided with the opportunity for input into the structure of the program via a community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via processing and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.

- Structured curricula or manuals should be used for all groups.
- While the program uses cognitive-behavioral elements, such as the corrective thinking group, other treatment components, such as substance abuse and SAMI treatment still has 12-step and educational elements.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.
- While offenders are assigned to groups by need assessment results, responsivity factors should also guide how offenders are matched to interventions.
- The frequency of rewards used to reinforce offender behavior needs to be increased.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are seen as valuable for extinguishing behavior, they are immediately applied, they are varied, they are individualized, escape is impossible, punishers are not spread out, and alternative prosocial behaviors are taught.
- Staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program completion rate is 55%. This rate should fall between 65 and 85%.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- While Talbert House at Victory Parkway offers aftercare services, it was unclear whether all offenders discharged from Spring Grove participate in such services.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including file review, client surveys, monitoring of contractual treatment groups, supervision of training protocol for treatment curriculum, and monitoring of CCIS entries.
- Talbert house employs CQI personnel to monitor the quality of treatment in the programs.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- In order to improve quality assurance, the program should be observing the delivery of treatment on a regular and providing feedback to staff. Also, the program should provide increased monitoring of external providers.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for TALBERT HOUSE SPRINGROVE by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (234)	50.0 (234)
Female	N/A	N/A
Race		
White	50.0 (109)	50.0 (109)
Non-white	50.0 (125)	50.0 (125)
Marital Status		
Married	49.2 (30)	50.8 (31)
Single/not married	52.5 (201)	47.5 (182)
Age Category		
16 to 23	53.7 (72)	46.3 (62)
24 to 30	52.5 (63)	47.5 (57)
31-39	44.2 (53)	55.8 (67)
40+	48.9 (46)	51.1 (48)
Mean Age	33.2	34.5
SD	9.8	10.8

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE SPRINGROVE by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.5	1.2
SD	1.2	1.7
Previous Conviction*	**% (N)**	**% (N)**
No	67.4 (149)	32.6 (72)
Yes	34.1 (84)	65.9 (162)
Offense Level		
Felony 1	47.1 (32)	52.9 (36)
Felony 2	51.4 (56)	48.6 (530
Felony 3	45.9 (56)	54.1 (66)
Felony 4	47.4 (36)	52.6 (40)
Felony 5/M	58.1 (54)	41.9 (39)
Offense Category*		
Violent/person	31.1 (50)	68.9 (111)
Sex	N/A	N/A
Drugs	66.9 (87)	33.1 (43)
Property	57.4 (62)	42.6 (46)
Traffic/DUI	81.8 (9)	18.2 (2)
Other	44.8 (26)	55.2 (32)
Substance Abuse Problem		
No	49.0 (71)	51.0 (74)
Yes	50.5 (163)	49.5 (160)
Employment Problem*		
No	61.4 (164)	38.6 (103)
Yes	34.8 (70)	65.2 (131)
Emotional Problem*		
No	55.6 (174)	44.4 (139)
Yes	38.7 (60)	61.3 (95)
Risk Categories		
Low	50.0 (17)	50.0 (17)
Moderate	50.0 (181)	50.0 (181)
High	50.0 (36)	50.0 (36)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	30.5	33.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for TALBERT HOUSE SPRINGROVE by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (130)	100.0 (104)
Female	N/A	N/A
Race		
White	49.2 (64)	43.3 (45)
Non-white	50.8 (66)	56.7 (59)
Marital Status*		
Married	17.1 (22)	7.8 (8)
Single/not married	82.9 (107)	92.2 (94)
Age Category		
16 to 23	24.6 (32)	38.5 (40)
24 to 30	27.7 (36)	26.0 (27)
31-39	24.6 (32)	20.2 (21)
40+	23.1 (30)	15.4 (16)
Mean Age	34.5	31.6
SD	9.8	9.6

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE SPRINGROVE by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.4	1.7
SD	1.0	1.3
Previous Conviction	**% (N)**	**% (N)**
No	63.8 (83)	64.1 (66)
Yes	36.2 (47)	35.9 (37)
Offense Level		
Felony 1	13.1 (17)	14.4 (15)
Felony 2	25.4 (33)	22.1 (23)
Felony 3	20.0 (26)	28.8 (30)
Felony 4	19.2 (25)	10.6 (11)
Felony 5/M	22.3 (29)	24.0 (25)
Offense Category		
Violent/person	24.6 (32)	17.3 (18)
Sex	N/A	N/A
Drugs	36.9 (48)	37.5 (39)
Property	21.5 (28)	32.7 (34)
Traffic/DUI	5.4 (7)	1.9 (2)
Other	11.5 (15)	10.6 (11)
Substance Abuse Problem*		
No	35.4 (46)	24 (25)
Yes	64.6 (84)	76 (79)
Employment Problem*		
No	80.8 (105)	56.7 (59)
Yes	19.2 (25)	43.3 (45)
Emotional Problem		
No	75.4 (98)	73.1 (76)
Yes	24.6 (32)	26.9 (28)
Risk Categories		
Low	10.0 (13)	3.8 (4)
Moderate	81.5 (106)	72.1 (75)
High	8.5 (11)	24 (25)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	27.5 (130)	34.3 (104)
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Talbert House Springrove

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	29.1 (68)	11.8 (2)	27.1 (49)	47.2 (17)
Comparison	27.8 (65)	0.0 (0)	27.6 (50)	41.7 (15)
Successful Completers				
Treatment	24.6 (32)	7.7 (1)	24.5 (26)	45.5 (5)
Comparison	23.8 (31)	0.0 (0)	25.5 (27)	36.4 (4)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Talbert House Springrove

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	41.9 (98) *	17.6 (3)	39.8 (72)	63.9 (23)
Comparison	33.3 (78)	0.0 (0)	32.6 (59)	52.8 (19)
Successful Completers				
Treatment	32.3 (42)	7.7 (1)	32.1 (34)	63.6 (7)
Comparison	30.0 (39)	0.0 (0)	32.1 (34)	45.5 (5)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Talbert House Springrove

| | Risk Levels | | | |
| | All | Low | Moderate | High |
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	34.6 (81)	11.8 (2)	30.9 (56)	63.9 (23) *
Comparison	29.1 (68)	0.0 (0)	29.3 (53)	41.7 (15)
Successful Completers				
Treatment	19.2 (25) *	15.4 (2)	16.0 (17) *	54.5 (6)
Comparison	30.8 (40)	0.0 (0)	32.1 (34)	54.5 (6)

*Difference significant at p<.05

Talbert House Turtle Creek Center

Talbert House Turtle Creek Center is a Halfway House located in Lebanon, Ohio. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Talbert House Turtle Creek Center has been in operation since 2003 and is contracted to serve 75 men. This facility is funded primarily by ODRC. Services include sex offender treatment, substance abuse treatment, cognitive restructuring, anger management, and employment readiness. Talbert House Turtle Creek Center was visited by a University of Cincinnati research team on October 20, 2006. At the time of the visit, there were 72 residents. Jennifer Burnside was the identified program director.

Program Leadership/Development

Strengths:

- The program director was the creator of the current program and is involved in selecting and supervising staff.
- The program is well established and supported by the criminal justice community and community at large.
- Funding is highly stable, allowing the program to operate as designed
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.
- The program has accessed external consultants to advise on services.

Recommendations for Improvement:

- The program director should be involved in the provision of formalized training to staff.
- The program director should provide direct services to offenders via conducting groups, assessments or carrying a small caseload of clients.
- While the program receives literature exposure via local or national conferences, the program should regularly consult a wider range of literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings regularly.
- Staff receive an adequate number of hours of initial and ongoing training, much of which includes clinical or treatment related topics and theory and practice of correctional interventions.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.
- Staff turnover is described as only a minor issue.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate reinforcement of residents.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria for residents.
- The program utilizes the Level of Service Inventory-Revised as a general risk/need assessment and the Static-99 and STABLE as a risk and need assessment for sex offenders.
- The program also uses several tools to further assess criminogenic needs, such as the SASSI to assess substance abuse need, the How I Think to assess criminal thinking and a vocational tool.
- Finally the program uses the Jesness Inventory Revised personality assessment, a Diagnostic Assessment Form and a lethality assessment as responsivity tools.
- The program provides re-assessment of criminal attitude with the HIT.

Recommendations for Improvement:

- The program should consider employing a wider spectrum of standardized, validated responsivity assessments (like the Jesness Inventory) to assess such areas as motivation, education, mental health and learning styles.
- The program should be targeting primarily moderate to high risk offenders (at least 70% of the population).

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, deviant sexual behavior, and employment).
- Structured curricula or manuals are used for all groups.
- Groups do not exceed the maximum recommended facilitator to offender ratio of 1/10 and all groups are facilitated from beginning to end by staff.
- Treatment is based upon a cognitive-behavioral and motivational enhancement model.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment is adequate.
- Treatment dosage varies by risk as higher risk offenders are required to attend additional treatment groups. Likewise, higher risk offenders are separated from lower risk individuals in the program via separate treatment groups and separate living quarters.
- Offenders are matched to treatment based upon need assessment results and risk level.
- Staff are matched to groups based on experience.
- Offenders are given the opportunity for input into the structure of the program via community meetings.
- The types of rewards and punishers used by the program appear appropriate and staff are trained on the appropriate use of reinforcers and punishers.
- The program completion rate is 72%, which falls within the recommended range of 65 to 85%.

- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, homework assignments, and group activities.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased and used consistently across all groups. Likewise, graduated rehearsal should be used more to teach resident skills in increasingly difficult situations, such as will an advanced practice group.
- While there is some monitoring of offenders while on pass (e.g. schedules/logs, electronic monitoring, phone calls out and site visits), the monitoring mechanisms should be enhanced.
- Although offenders are matched to interventions based on criminogenic needs, they should also be matched based on responsivity factors.
- The frequency of rewards should be increased so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are consistently applied, based on the demonstration of prosocial behavior and individualized.
- The procedure by which offenders are punished could be improved by ensuring that punishers are based on the demonstration of antisocial behavior, immediately and consistently applied, punishers are undesirable by the offender, they are varied, escape is impossible, and punishers are not spread out.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement.
- The program should offer training to family members who might assist in providing prosocial support for the offenders.
- Aftercare services should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association and is licensed by ODADAS.
- The program uses several internal quality review mechanisms including staff and peer file review, client surveys, conducting offender re-assessments, and supervising program and staff certification updates.
- Talbert house employs CQI personnel to monitor the quality of treatment in the programs.
- The program provides significant monitoring of contractual providers.
- The program has participated in past process and outcome evaluations.

Recommendations for Improvement:

- The program supervisors should be monitoring the delivery of treatment and providing feedback to staff regarding delivery skills.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for TALBERT HOUSE TURTLE CREEK by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (166)	50.0 (166)
Female	N/A	N/A
Race		
White	50.0 (131)	50.0 (131)
Non-white	50.0 (35)	50.0 (35)
Marital Status		
Married	54.7 (29)	45.3 (24)
Single/not married	51.3 (137)	48.7 (130)
Age Category		
16 to 23	46.4 (45)	53.6 (52)
24 to 30	46.8 (36)	53.2 (41)
31-39	55.8 (43)	44.2 (34)
40+	51.9 (42)	48.1 (39)
Mean Age	34.6	34.2
SD	9.8	10.9

*Difference significant at p<.05

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE TURTLE CREEK by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	1.5	0.9
SD	2.0	1.2
Previous Conviction*	**% (N)**	**% (N)**
No	70.9 (100)	29.1 (41)
Yes	34.6 (66)	65.4 (125)
Offense Level		
Felony 1	43.9 (18)	56.1 (23)
Felony 2	48.4 (31)	51.6 (33)
Felony 3	44.3 (43)	55.7 (54)
Felony 4	64.2 (43)	35.8 (24)
Felony 5/M	49.2 (31)	50.8 (32)
Offense Category*		
Violent/person	29.8 (31)	70.2 (73)
Sex	50.0 (10)	50.0 (10)
Drugs	69.5 (41)	30.5 (18)
Property	57.5 (50)	42.5 (37)
Traffic/DUI	71.4 (10)	28.6 (4)
Other	50.0 (24)	50.0 (24)
Substance Abuse Problem		
No	51.1 (48)	48.9 (46)
Yes	49.6 (118)	50.4 (120)
Employment Problem*		
No	55.3 (99)	44.7 (80)
Yes	43.8 (67)	56.2 (86)
Emotional Problem*		
No	58.3 (134)	41.7 (96)
Yes	31.4 (32)	68.6 (70)
Risk Categories		
Low	50.0 (17)	50.0 (17)
Moderate	50.0 (118)	50.0 (118)
High	50.0 (31)	50.0 (31)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	31.9	33.1
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at $p < .05$

Descriptive Statistics for TALBERT HOUSE TURTLE CREEK by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (119)	100.0 (47)
Female	-	-
Race		
White	78.2 (93)	80.9 (38)
Non-white	21.8 (26)	19.1 (9)
Marital Status		
Married	16.0 (19)	21.3 (10)
Single/not married	78.7 (37)	84.0 (100)
Age Category		
16 to 23	23.5 (28)	36.2 (17)
24 to 30	21.0 (25)	23.4 (11)
31-39	26.9 (32)	23.4 (11)
40+	28.6 (34)	17.0 (8)
Mean Age*	35.8	31.8
SD	9.9	8.9

Descriptive Statistics for Risk/Need Factors for TALBERT HOUSE TURTLE CREEK by Termination Status

Variable	HWH	
	Successful	**Unsuccessful**
Prior Incarcerations	**Mean (N)**	**Mean(N)**
Mean (N)	1.4 (119)	1.7 (47)
SD	9.9	8.9
Previous Conviction	**% (N)**	**% (N)**
No	59.7 (71)	61.7 (29)
Yes	40.3 (48)	38.3 (18)
Offense Level		
Felony 1	11.8 (14)	8.5 (4)
Felony 2	17.6 (21)	21.3 (10)
Felony 3	24.4 (29)	29.8 (14)
Felony 4	26.9 (32)	23.4 (11)
Felony 5/M	19.3 (23)	17.0 (8)
Offense Category		
Violent/person	17.6 (21)	21.3 (10)
Sex	5.0 (6)	8.5 (4)
Drugs	26.9 (32)	19.1 (9)
Property	29.4 (35)	31.9 (15)
Traffic/DUI	7.6 (9)	2.1 (1)
Other	13.4 (16)	17.0 (8)
Substance Abuse Problem		
No	28.6 (34)	29.8 (14)
Yes	71.4 (85)	70.2 (33)
Employment Problem		
No	73.1 (87)	25.5 (12)
Yes	26.9 (32)	74.5 (35)
Emotional Problem		
No	79.8 (95)	83.0 (39)
Yes	20.2 (24)	17.0 (8)
Risk Categories*		
Low	14.3 (17)	0.0 (0)
Moderate	70.6 (84)	72.3 (34)
High	15.1 (18)	27.7 (13)
Average risk scores	**Mean (N)**	**Mean (N)**
Males*	29.8 (119)	37.1 (47)
Females	N/A	N/A
Overall	29.8 (119)	37.1 (47)

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Talbert House Turtle Creek Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	33.7 (56)	17.6 (3)	35.6 (42) *	35.5 (11) *
Comparison	28.9 (48)	0.0 (0)	24.6 (29)	61.3 (19)
Successful Completers				
Treatment	25.2 (30)	17.6 (3)	27.4 (23)	22.2 (4) *
Comparison	25.2 (30)	0.0 (0)	23.8 (20)	55.6 (10)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Talbert House Turtle Creek Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	47.6 (79)	35.3 (6) *	46.6 (55)	58.1 (18)
Comparison	39.2 (65)	0.0 (0)	37.3 (44)	67.7 (21)
Successful Completers				
Treatment	42.0 (50)	35.3 (6) *	40.5 (34)	55.6 (10)
Comparison	35.3 (42)	0.0 (0)	36.9 (31)	61.1 (11)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Talbert House Turtle Creek Center

	Risk Levels			
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	38.6 (64)	23.5 (4)	38.1 (45)	48.4 (15)
Comparison	32.5 (54)	5.9 (1)	29.7 (35)	58.1 (18)
Successful Completers				
Treatment	23.5 (28)	23.5 (4)	22.6 (20)	22.2 (4)
Comparison	30.3 (36)	5.9 (1)	31.0 (26)	50.0 (9)

*Difference significant at p<.05

Toledo VOA

Toledo VOA is a Halfway House operated by Volunteers of America and located in Toledo, Ohio. This facility serves adult males placed on probation as well as Transitional Control and parole/Post-Release Control offenders from the Ohio Department of Rehabilitation and Correction (ODRC). Toledo VOA has been in operation since 1980 and is contracted to serve 75 men. This facility is funded by ODRC. Services include substance abuse treatment, education, anger management, skill building, cognitive restructuring, and employment readiness. Toledo VOA was visited by a University of Cincinnati research team on September 7, 2006. At the time of the visit, there were 73 offenders. Dave Spade was the identified program director.

Program Leadership/Development

Strengths:

- The program director had a moderate role in the creation of the current program and is involved in selecting, training, and supervising staff.
- The program director provides direct services, via group treatment to offenders in the program.
- The program is stable in terms of the number of years of operation.
- Problems or crises are handled with a problem-solving approach and staff and management for the most part work harmoniously.

Recommendations for Improvement:

- The program should regularly consult the literature related to effective interventions with offenders.
- New interventions should undergo a formal, designated pilot period prior to full implementation of the intervention.
- While funding has been stable, limited funding has made it difficult to operate the program as designed.
- The program has not accessed external consultants to advise on services.

Staff Characteristics

Strengths:

- Staff receive clinical supervision by a licensed professional and attend clinical staff meetings as well as agency meetings regularly.
- Staff receive an adequate number of hours of initial training as well as ongoing training.
- Staff have a moderate amount of input into the structure of the program and appear to support the treatment goals and ethical guidelines.

Recommendations for Improvement:

- While staff are evaluated annually, the assessment should include additional ratings of service delivery skills, such as group facilitation skills, effective use of authority and appropriate reinforcement and punishment of residents.
- More staff training should relate to the theory and practice of interventions used by the program (for both clinical and security staff), including effective correctional practices and the cognitive-behavioral model.

- Staff turnover is a regular issue and was described as disruptive to programming and services. Thus, administration should explore ways to address staff turnover.

Assessment

Strengths:

- The program receives appropriate residents for the services being provided.
- The program identifies and follows rational exclusionary criteria.
- The program utilized the Level of Service Inventory-Revised to assess risk level and criminogenic need factors for all facility residents.
- The program uses several additional assessments to further assess criminogenic needs such as the ASI, MAST, DAST and drug/alcohol questionnaire to assess substance abuse issues and a needs assessment to assess other general offender needs.
- Several of the assessments used by Toledo VOA are structured, validated tools.

Recommendations for Improvement:

- The program should have a spectrum of standardized responsivity assessments to assess such areas as motivation, education, personality and learning styles.
- The program should provide re-assessment of risk and need factors.
- The program should be targeting primarily higher risk offenders (70% moderate to high risk).

Treatment

Strengths:

- The majority of interventions focus on criminogenic needs (i.e. criminal attitude, anger, substance abuse, relationships and employment).
- The large majority of groups do not exceed the maximum recommended facilitator to offender ratio of 1/10.
- The program's average length of stay is 4 months, which falls within the 3 to 9 month window for an appropriate length of stay in treatment.
- Offenders are adequately monitored while on passes to the community.
- There are mechanisms that provide offenders with the opportunity for input into the structure of the program, such as a suggestion box and community meeting.
- The types of rewards and punishers used by the program appear appropriate.
- The program teaches offenders to monitor and anticipate high risk situations via relapse prevention planning, processing, and homework assignments.
- Appropriate discharge planning has been implemented.

Recommendations for Improvement:

- While the program uses cognitive behavioral elements, it is also based upon a 12-step and reality therapy model. The program should be consistently using a cognitive-behavioral approach.
- The emphasis on structured skill building (i.e. teaching offenders prosocial skills to replace antisocial skills), including the use of modeling and role play needs to be increased across all groups. Likewise, graduated rehearsal should be used to teach resident skills in increasingly difficult situations.
- Structured curricula or manuals should be used for all groups and all groups should be facilitated by staff.
- The amount of time offenders spend in structured therapeutic activity, including treatment, education or employment should be increased.

- Treatment should vary by risk so that higher risk offenders receive a higher dosage of treatment. Likewise, attempts should be made to separate higher risk offender from lower risk individuals in the program.
- Risk, need, and responsivity factors should guide how all offenders are matched to interventions.
- The range of rewards used to reinforce offender behavior needs to be increased as well as the frequency of rewards so that rewards outweigh punishers by a ratio of at least 4:1.
- The procedure by which offenders are reinforced should be improved so that rewards are immediate, seen as valuable for shaping behavior, consistently applied, desired by the offenders, and individualized.
- The procedure for effectively punishing behavior could be enhanced by ensuring that punishers are seen as valuable for extinguishing behaviors and that punishers are consistently applied, varied, escape is impossible, immediate, and that alternative prosocial behaviors are taught to offenders. Likewise, staff should be trained on the identification of negative effects of punishers and how to intervene on such effects.
- Program completion should be determined by the acquisition of prosocial skills which is measured with pre-post testing or some other objective means of determining offender improvement versus offender time in treatment.
- The program completion rate is 54%. This rate should fall between 65 and 85%.
- The program needs to offer training to family members (beyond visitation) who might assist in providing prosocial support for the offenders.
- Aftercare services, beyond referral to AA or NA, should be provided to all residents who complete treatment.

Quality Assurance

Strengths:

- The program is certified by the American Correctional Association.
- Internal quality assurance measures include file review and client exit surveys.
- The program has been formally evaluated in the past via both a process and outcome evaluation and performed better than the comparison group on some recidivism measures.

Recommendations for Improvement:

- Internal quality assurance could be enhanced if supervisors were to regularly observe staff delivery of treatment and provide feedback to staff regarding their performance.
- In order to improve quality assurance, the program should provide increased monitoring of external providers such as mental health agencies.
- The program should either collect recidivism data on offenders discharged from the program or contract with an external provider to collect and analyze such data.

Descriptive Statistics for TOLEDO VOA by Group Membership

Variable	HWH	
	Treatment Group % (N)	Comparison Group % (N)
Gender		
Male	50.0 (255)	50.0 (255)
Female	N/A	N/A
Race		
White	50.0 (115)	50.0 (115)
Non-white	50.0 (140)	50.0 (140)
Marital Status		
Married	49.2 (30)	50.8 (31)
Single/not married	53.8 (225)	46.2 (193)
Age Category		
16 to 23	53.2 (75)	46.8 (66)
24 to 30	56.3 (71)	43.7 (55)
31-39	47.9 (69)	52.1 (75)
40+	40.4 (40)	59.6 (59)
Mean Age*	33.0	35.0
SD	9.2	10.3

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for TOLEDO VOA by Group Membership

Variable	HWH	
	Treatment Group	**Comparison Group**
Prior Incarcerations*	**Mean (N)**	**Mean(N)**
Mean (N)	2.1	1.7
SD	1.6	1.9
Previous Conviction*	**% (N)**	**% (N)**
No	65.2 (107)	34.8 (57)
Yes	42.8 (148)	57.2 (198)
Offense Level*		
Felony 1	31.5 (17)	68.5 (37)
Felony 2	40.4 (42)	59.6 (62)
Felony 3	50.4 (64)	49.9 (63)
Felony 4	63.9 (76)	36.1 (43)
Felony 5/M	52.8 (56)	47.2 (50)
Offense Category*		
Violent/person	48.1 (103)	51.9 (111)
Sex	50.0 (1)	50.0 (1)
Drugs	63.9 (69)	36.1 (39)
Property	39.3 (44)	60.7 (68)
Traffic/DUI	50.0 (1)	50.0 (1)
Other	51.4 (37)	48.6 (35)
Substance Abuse Problem*		
No	14.9 (11)	85.1 (63)
Yes	56.0 (244)	44.0 (192)
Employment Problem*		
No	58.7 (138)	41.3 (97)
Yes	42.5 (117)	57.5 (158)
Emotional Problem*		
No	60.9 (204)	39.1 (131)
Yes	29.1 (51)	70.9 (124)
Risk Categories		
Low	50.0 (11)	50.0 (11)
Moderate	50.0 (143)	50.0 (143)
High	50.0 (101)	50.0 (101)
Average risk scores	**Mean (N)**	**Mean (N)**
Males	37.5	37.4
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

Descriptive Statistics for TOLEDO VOA by Termination Status

Variable	HWH	
	Successful % (N)	Unsuccessful % (N)
Gender		
Male	100.0 (133)	100.0 (122)
Female	N/A	N/A
Race		
White	45.1 (60)	45.1 (55)
Non-white	54.9 (73)	54.9 (67)
Marital Status		
Married	12.8 (17)	10.7 (13)
Single/not married	87.2 (116)	89.3 (109)
Age Category*		
16 to 23	18.8 (25)	41.0 (50)
24 to 30	29.3 (39)	26.2 (32)
31-39	30.1 (40)	23.8 (29)
40+	21.8 (29)	9.0 (11)
Mean Age*	35.1	30.6
SD	9.6	8.1

*Difference significant at $p < .05$

Descriptive Statistics for Risk/Need Factors for TOLEDO VOA by Termination Status

Variable	HWH	
	Successful	Unsuccessful
Prior Incarcerations	Mean (N)	Mean(N)
Mean (N)	2.1	2.2
SD	1.6	1.6
Previous Conviction	% (N)	% (N)
No	45.1 (60)	38.5 (47)
Yes	54.9 (73)	61.5 (75)
Offense Level		
Felony 1	9.0 (12)	4.1 (5)
Felony 2	14.3 (19)	18.9 (23)
Felony 3	26.3 (35)	23.8 (29)
Felony 4	27.8 (37)	32.0 (39)
Felony 5/M	22.6 (30)	21.3 (26)
Offense Category		
Violent/person	36.1 (48)	45.1 (55)
Sex	0.8 (1)	0.0 (0)
Drugs	31.6 (42)	22.1 (27)
Property	14.3 (19)	20.5 (25)
Traffic/DUI	0.8 (1)	0.0 (0)
Other	16.5 (22)	12.3 (15)
Substance Abuse Problem		
No	3.8 (5)	4.9 (6)
Yes	96.2 (128)	95.1 (116)
Employment Problem*		
No	66.9 (89)	40.2 (49)
Yes	33.1 (44)	59.8 (73)
Emotional Problem		
No	79.7 (106)	80.3 (98)
Yes	20.3 (27)	19.7 (24)
Risk Categories*		
Low	8.3 (11)	0.0 (0)
Moderate	57.1 (76)	54.9 (67)
High	34.6 (46)	45.1 (55)
Average risk scores	Mean (N)	Mean (N)
Males*	34.5	40.8
Females	N/A	N/A
Overall	N/A	N/A

*Difference significant at p<.05

RECIDIVISM OUTCOMES

New Felony Conviction by Group Membership and Risk Level for Toledo VOA

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	23.1 (59) *	9.1 (1)	18.9 (27) *	30.7 (31) *
Comparison	37.3 (95)	27.3 (3)	28.7 (41)	50.5 (51)
Successful Completers				
Treatment	15.0 (20) *	9.1 (1)	14.5 (11) *	17.4 (8) *
Comparison	38.3 (51)	27.3 (3)	30.3 (23)	54.3 (25)

*Difference significant at p<.05

Any New Conviction by Group Membership and Risk Level for Toledo VOA

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	30.6 (78) *	9.1 (1)	27.3 (39)	37.6 (38) *
Comparison	44.7 (114)	36.4 (4)	34.3 (49)	60.4 (61)
Successful Completers				
Treatment	23.3 (21) *	9.1 (1)	23.7 (18)	26.1 (12) *
Comparison	45.9 (61)	36.4 (4)	34.2 (26)	67.4 (31)

*Difference significant at p<.05

New Incarceration by Group Membership and Risk Level for Toledo VOA

		Risk Levels		
	All	Low	Moderate	High
	%(N)	%(N)	%(N)	%(N)
All Participants				
Treatment	44.3 (113) *	9.1 (1)	44.1 (63) *	48.5 (49)
Comparison	34.1 (87)	18.2 (2)	30.1 (43)	41.6 (42)
Successful Completers				
Treatment	16.5 (22) *	9.1 (1)	17.2 (13) *	17.4 (8) *
Comparison	33.1 (44)	18.2 (2)	30.3 (23)	41.3 (19)

*Difference significant at p<.05