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To: Joint Justice Oversight Committee  
From: Karen Gennette, Executive Director  
Date: October 26, 2018

## Testimony for the Joint Justice Oversight Committee – October 26, 2018

### 1. Sequential Intercept Model – Creating geographic justice

- SIM Chart - updated
- Review of Alternative Strategies from the Tri-Branch Task Force Strategic Plan (2014)

### 2. Outcomes for Vermont Programs

- Sparrow Project (June 2012)
- Spectrum Rapid Referral (October 2012)
- Chittenden Mental Health Court (January 2013)
- Chittenden Rapid Intervention Community Court (February 2013)
- Chittenden Treatment Docket/Court (March 2014)
- Community Justice Center Reparative Panels (April 2014)
- Court Diversion (April 2014)
- Rutland Treatment Docket/Court (April 2014)

### 3. National Criminal Justice Reform Project (NCJRP)

- Led by DPS
- Outcomes and Performance Measures for Pretrial Field: Appendix I: Sample Measures Diagram

### 4. Future CRG Study

- Offender Characteristics of Incarcerated Individuals including out-of-state criminal histories

# DRAFT Sequential Intercept Model (10/2018)

Intercept 0	Intercept 1	Intercept 2	Intercept 3	Intercept 4
Crisis Lines / Crisis Care Continuum	Law Enforcement Initiatives	Initial Detention / Initial Court Hearings: Prosecutor Initiatives	Pretrial Status: Prosecutor Initiatives & Court Initiatives	Post Adjudication
Access to SA treatment: Levels of Care, MAT: Hubs (10) & Spokes, Residential Tx: Valley Vista, Serenity House, Willow Grove	Local Law Enforcement (e.g. social worker riding with police, LEAD, drug market intervention, Project Vision – where are they all?)	Pretrial Services Umbrella: risk assessment & needs screening in DOC facilities	Home Detention: could include a treatment condition	Home Confinement: could include a treatment condition
Access to MH Treatment: Levels of Care, Mobile Crisis Services, Vt Psychiatric Care Hospital	Pre-charge Program: Community Justice Centers	PTS: Pretrial Monitoring (Court referral)	Direct Referral to Reparative Board (CJC) (Court referral)	DOC: Risk Reduction Program
Brattleboro Retreat: mental health & addiction treatment	Public Inebriate Programs (RD, FN, CN, BN)	PTS: Court Diversion (enter a plea first)	Drug Court (CN, RD, WN): all take co-occurring disorders (post plea / inactive status)	DOC: Second Chance Act Grant serving people on furlough
Lund Family Center (Residential Tx – women & children)	YSASP (underage alcohol & marijuana possession) referral by LEAs	PTS: Tamarack (prosecutor referral)	Mental Health Court (CN)	Tapestry (drug rehab for women on furlough – residential 33 beds.
Grace House (Public Inebriate, Detox, transitional housing, 14 beds)			DUI Court (WR): expanding to other counties – OE & WM	Re-entry Programs (CJC)
Peer Services/Recovery Centers (12)			Court Diversion (prosecutor referral)	DAs re-entry service planning for SFI
Housing & Housing Supports / TransitionalHousing.org			Pretrial Monitoring (Court referral)	Probation: could include treatment conditions
Employment Services & Support / VocRehab			Conditions of Release (may include treatment-oriented condition)	
Public Assistance / Economic Services				
Medical Care				
Transportation				



### **ISSUE AREA THREE: Alternative Strategies**

#### **Problem Statement**

The criminal justice system is often resorted to out of expedience when alternative strategies have not been exhausted, the service system is ineffective, services are unavailable or inaccessible, knowledge about services is lacking or when services don't exist.

#### **Issue Area 3 Alternative Strategies Goal 1: Mapping of Community Resources**

Increase communication and awareness about available and appropriate strategies at the local level as alternatives to the criminal justice system. Increase communication about how to access services with the courts and the communities in general.

**Issue Area 3 Alternative Strategies: Goal 1, Objective 1.** Inventory current resources and appropriate strategies at the local level. Encourage greater collaboration and cooperation.

#### **Actions:**

- **Priority:** Identify and implement agreed upon minimal level /type of services per geographic region AOD/MH/Medical, other; statewide consistencies & universal assess
- **Priority:** Look at the systemic framework, identify priorities and gaps at each intercept point by county / identify resources, treatment options and other services.
  - Update the SIM Chart and map the current services by county / AHS District.
  - Conduct a gap analysis – identify effective programs to expand statewide (e.g. rapid referral, rapid intervention, treatment courts)
  - Include Judiciary and local court staff
- Evaluate programs and identify what's working, take it to scale – increase effectiveness
- Identify and disseminate successful county and regional strategies that allow individuals to receive community-based services as an alternative to incarceration.
- Local teams identify the process for referral, coordinates services and proposes ways for them to work systematically
- Create cross –county agreements to eliminate redundancies
- Invite the Governor's office to initiate a public awareness campaign with others in authority. Tri-Branch leadership can help coordinate. Use to educate communities on community level problems (Governor's Cabinet)
- Continue the VLS/Innovative Practices Conference

## CONCLUSIONS

### **1. THE SPARROW PROJECT APPEARS TO BE A PROMISING APPROACH FOR REDUCING RECIDIVISM AMONG PROJECT PARTICIPANTS WHO COMPLETED THE PROJECT.**

Participants who successfully completed the Project (58%) had a reconviction rate of 17.9% which is substantially less than the 29.3% recidivism rate for those participants who were dis-enrolled from the Project. Though the de-enrolled group is not technically a control group for those participants who did complete the Project they have characteristics which are similar to the successful participant group and therefore suggest the efficacy of the Sparrow Project.

### **2. PARTICIPANTS WHO SUCCESSFULLY COMPLETED THE SPARROW PROJECT RECIDIVATED AT THE SAME PACE AS DID PARTICIPANTS WHO WERE DIS-ENROLLED FROM THE PROJECT.**

For the recidivists who successfully completed the Sparrow Project, 100% of those reconvictions for any new crime occurred in less than one year. For the recidivists who were unsuccessful in completing the Project, 91.7% (11 of 12) of reconvictions for any new crime occurred in less than one year, and only one occurred during the first year after being dis-enrolled from the Project. Further analysis indicated that though the vast majority of recidivism occurs within the first year, it is unlikely that recidivism will increase substantially as post-Project elapsed time continues to increase for participants.

### **3. THE SPARROW PROJECT APPEARS TO BE A PROMISING APPROACH FOR REDUCING THE NUMBER OF POST-PROJECT RECONVICTIONS FOR PARTICIPANTS WHO COMPLETED THE PROJECT.**

Sparrow Project participants who completed the Project were convicted of a total of 22 crimes during the study period (39 reconvictions per 100 participants). Sparrow Project participants who were dis-enrolled from the Project were convicted of 27 crimes during the study period (66 reconvictions per 100 participants). There were no felony reconvictions for participants who successfully completed the Project, whereas there were four felony reconvictions for the dis-enrolled group. For both groups approximately 85% of their reconvictions involved (listed in order of frequency) motor vehicle charges, violations of conditions of release, drug crimes, theft, false information to a law enforcement officer, and violation of probation. There was only one reconviction for a violent crime (Domestic Assault); it involved a participant from the "successful completion" group.



was then systematically filtered based on the parameters developed from the participant study group from the previous study. This resulted in a control group with a total of 394 subjects and a demographic and criminal history profile that matched closely with the original outcome evaluation study group.

## CONCLUSIONS

1. The research confirmed that it is feasible to develop a valid control group for use in comparing recidivism results from outcome evaluations.
2. Comparing the recidivism rate for Program participants (18.7%) with the recidivism rate observed for the control group (84.3%) revealed a significant reduction in recidivism, confirming the original conclusion that the Rapid Referral Program appears to be a promising approach for reducing recidivism among Program participants.
3. Comparisons between the Program participants and the control group with respect to demographics and criminal histories showed insignificant or minor differences. The conclusion is that the low recidivism rate observed for the Program participants compared to the control group was likely to be a result of the benefits the participants received from the Program and not a result of the differences observed between the subjects.
4. As part of the discriminant analysis, a test of equality of the group means of the independent variables was conducted. The analysis revealed that six independent variables – *Base Charge Offense Severity Rank, Number of Prior Misdemeanor Convictions, Gender, Age at Recidivism Start Date, Mean Prior Convictions Offense Level, and Mean Prior Convictions Sentence Type* – showed significant differences between the recidivist and non-recidivist groups among the Program participants.
5. The final discriminant analysis generated a recidivism model that included five variables: *Base Charge Offense Rank, Number of Prior Misdemeanor Convictions, Gender, Age at Recidivism Start Date, and Base Charge Sentence Type*. The model, however, was not statistically significant and only correctly assigned 66% of the subjects into recidivist/non-recidivist groups. Based on this analysis, the conclusion can be made that the differences in demographic characteristics and criminal histories among the Program participants were not important factors in determining the tendency to recidivate.

## SUMMARY OF CONCLUSIONS

1. The Chittenden County Mental Health Court (CMHC) appears to be a promising approach for reducing recidivism among participants who completed the program. An analysis of the Vermont criminal records for the 99 study subjects shows that significantly fewer CMHC graduates were reconvicted of some type of crime as compared to the subjects who were terminated/withdrew from the program (25.0% versus 51.2%).
2. The CMHC was shown to be effective in producing graduates that remained conviction free in the community during their first year after leaving the program. Approximately 82% of the successful graduates of the CMHC were conviction-free during their first year after leaving the program. The success rate dropped to 72% for the study group that was terminated or withdrew from the CMHC.
3. The CMHC appears to be a promising approach for reducing the number and severity of reconvictions for participants who completed CMHC. The reconviction rate of the successful CMHC participants was less than one-half the rate for the participants that were unsuccessful (91 compared to 225 reconvictions per 100, respectively).
4. The CMHC recidivists from both study groups tended to commit a majority of their post-CMHC crime in Chittenden County.
5. Subject characteristics that were found to have some correlation with the tendency to recidivate were the *Age at First Conviction/Contact*, *Age at Referral to CMHC*, the *Base Charge Sentence Type*, and *Total Prior Misdemeanors*. However, further analysis showed that these correlations were not strong enough to result in a useful model that could be used as a predictor of recidivism.



## Summary of Conclusions

1. The RICC appears to be a promising approach for reducing recidivism among participants who successfully complete the program. Only 7.4% of the successful participants of the RICC were reconvicted of a crime after leaving the program. In comparison, 25.4% of participants who were unsuccessful at completing the RICC were convicted of a new crime after leaving the program. Although this is a significantly higher rate of recidivism compared to the successful participants, the rate is still relatively low. This indicates that even an abbreviated exposure to the benefits of the RICC may provide a positive influence on those participants who do not complete the program.
2. The RICC was shown to be very effective in producing successful participants that remained conviction free in the community during their first year after leaving the program. Approximately 93% of the successful participants of the RICC had no arrest for any new criminal conviction within one year after program completion. The unsuccessful participants had a significantly lower success rate – only 78% remained conviction free within the first year after leaving the program.
3. The RICC appears to be a promising approach for reducing the number of post-program reconvictions for participants who successfully complete the RICC. The successful participants of the RICC had a significantly lower reconviction rate of 15 per 100 participants compared to 48 reconvictions per 100 participants for those who did not complete the program.
4. A large majority of the recidivists who completed the RICC were reconvicted in Chittenden County (91%), followed by Franklin and Addison counties. The recidivists who did not complete the RICC showed a similar pattern with most of their crimes occurring in Chittenden County (76%), and the remaining occurring in Franklin, Addison, Grand Isle, and Lamoille counties.
5. Comparing the demographic and criminal history profiles between the subjects who were successful in completing the RICC and those who were unsuccessful revealed no significant differences. This leads to the conclusion that the reduced recidivism rates observed for the successful participants compared with those who were unsuccessful at completing the program were more likely due to the benefits of the RICC program rather than to differences in characteristics of the study segments.

## EXECUTIVE SUMMARY

### SUMMARY OF CONCLUSIONS

1. The research confirmed that it is feasible to develop a valid control group for use in comparing recidivism results from outcome evaluations.
2. The previous outcome evaluation for the CCTC reported a recidivism rate for the participants who graduated from the program of 41.8% which was at parity with the rate of 50.6% observed for the subjects who were terminated from the program. The control group developed in this study showed a significantly higher recidivism rate of 82.0%, leading to the conclusion that the CCTC appears to be a promising approach for reducing recidivism among both graduates of the program and also those subjects who participate in the program but are either terminated or choose to withdraw from the program.
3. The positive impact of the CCTC was further revealed in the comparison of reconviction rates (number of reconvictions per 100 subjects) among the subjects who completed the CCTC, the subjects that were terminated or withdrew from the program, and the control group. The reconviction rate for those participants who completed the program was nearly half the rate observed for the terminated/withdrew group (127 vs. 241 reconvictions per 100 subjects) and almost four time less than the rate determined for the control group (127 vs. 495 reconvictions per 100 subjects).
4. Comparisons between the CCTC participants and the control group with respect to demographics and criminal histories showed only a few minor differences. The conclusion is that the reduced recidivism rates observed for the CCTC graduates and the subjects who were terminated or withdrew from the program represented a significant reduction in recidivism compared to the control group and is most likely a result of the benefits the participants received from the CCTC program and not a result of the differences observed between the participants and control subjects



## CONCLUSIONS

1. The Vermont Community Justice Center (CJC) Reparative Panel programs may provide a promising approach for minimizing recidivism among non-violent offenders. A relatively low recidivism rate of 20.8% was found for CJC participants who were referred to a program pre-adjudication (n=403). CJC program participants who were referred post-adjudication recidivated at a significantly higher rate of 30.1% (n=949).
2. The research also revealed that participant success in completing a CJC Reparative Panel program was correlated with or related to recidivism rate. For both pre- and post-adjudication program participants, subjects that successfully completed a program had significantly lower recidivism rates – 18.1% vs. 30.1% for pre-adjudication participants, and 27.1% vs. 41.4% for post-adjudication participants.

It is important to remember that, since a valid control sample was not available at the time of this study, it cannot be determined if these recidivism rates represent a significant reduction in recidivism compared to a similar sample of subjects who had not participated in a CJC Reparative Panel program. In other words, one cannot assume that CJC Reparative Panel program participation caused reduced recidivism since other factors associated with participant's likelihood of participating and completing a program may also be associated with the likelihood of recidivism.

3. CJC Reparative Panel programs were shown to be effective in keeping their participants conviction-free in the community within the first year after program completion. Analysis of when participants were convicted revealed a recidivism rate of only 12.1% for the total study cohort during the post-program time period of less than one year.
4. CJC Reparative Panel program recidivists were convicted for 1231 crimes during the follow-up period, of which over 90% were misdemeanors. The five most frequent types of crimes, comprising over 60% of the total were (listed in descending order): DMV, theft, assault, violations of probation, and DUI.
5. Approximately 93% of crimes for which the pre-adjudication CJC Reparative Panel program recidivists were convicted, were committed in (listed in order of frequency): Chittenden, Washington, Rutland, Caledonia, and Windsor counties. For the post-adjudication recidivists, over 85% of their post-Reparative Panel program crimes occurred in (listed in order of frequency): Chittenden, Washington, Caledonia, Windham, and Orange counties.

## CONCLUSIONS

1. The outcome evaluation of the Vermont Court Diversion program revealed a recidivism rate of 14.3% for the total study cohort (n=3464). It should be noted that since a valid control sample was not available at the time of this study, it cannot be determined if this result represents a significant reduction in recidivism compared to a sample of similar offenders who had not experienced the benefit of the Diversion program and who were prosecuted through a Vermont Superior Court - Criminal Division.

It is important to remember that this recidivism rate represents a "point-in-time" calculation and does not take into account the large variability in elapsed time from program completion exhibited by the study cohort.

There is a chance that the recidivism rate reported for the total study group may be understated. It was not within the scope of this study to confirm if there were inaccuracies in the name/DOB data for the subjects that did not have VCIC records, as noted in the Methodology section. Criminal records were not found for about two thirds of the total study group. Since the Diversion program is targeted at minor offenders, it is most likely that for these participants, their referral to Diversion was their first contact with the criminal justice system. Upon successful completion of the program, they left without a criminal record and for this study, were assumed to be non-recidivist.

2. The Vermont Court Diversion program was shown to be effective in keeping its participants conviction-free in the community within the first year after program completion. Analysis of when participants were reconvicted revealed a recidivism rate of only 5.8% during the post-program time period of less than one year.
3. The vast majority of post-Diversion recidivists were misdemeanants. Post-Diversion recidivists were convicted of a total of 1544 crimes during the follow-up period, of which almost 90% were misdemeanors. Approximately 40% (199 of 496) of recidivists were convicted of only one post-Diversion crime. The five most frequent types of crimes, comprising almost 60% of the total, were (listed in descending order): theft, criminal Department of Motor Vehicle violations, driving under the influence (DUI), violations of probation, and drug crimes.



## EXECUTIVE SUMMARY

### SUMMARY OF CONCLUSIONS

1. The research confirmed that it is feasible to develop a valid control group for use in comparing recidivism results from outcome evaluations.
2. Comparing the recidivism rate for the RCTC participants who graduated from the program (34.5%) with the recidivism rate observed for the RCTC participants who were terminated from the program (54.0%), and the control group (58.8%), revealed a significant reduction in recidivism for the graduates, confirming the original conclusion that the RCTC appears to be a promising approach for reducing recidivism among graduating program participants.
3. The positive impact of the RCTC was further revealed in the comparison of reconviction rates (number of reconvictions per 100 subjects) among the subjects who completed the RCTC, the subjects that were terminated or withdrew from the program, and the control group. The reconviction rate for those participants who completed the program was approximately half the rate observed for the terminated/withdrew group (115 vs. 226 reconvictions per 100 subjects) and 2 ½ times less than the rate determined for the control group (115 vs. 296 reconvictions per 100 subjects).
4. Comparisons between the RCTC participants and the control group, with respect to demographics and criminal histories, showed only a few minor differences. The conclusion is that the significantly lower recidivism rate observed for the RCTC graduates compared to both the terminated/withdrew group and the control group was likely a result of the benefits the participants received from the RCTC program and not a result of the differences observed between the participants and control subjects.

## APPENDIX I: SAMPLE MEASURES DIAGRAM

### MISSION/OBJECTIVE

*Reducing the likelihood of future arrests through appropriate interventions based on thorough assessments and intervention plans tailored to an individual participant's risks and needs*

or

*Conserving/redirecting criminal justice resources to more serious crimes and those that warrant prosecution by providing a meaningful response to participant conduct*

### OUTCOME MEASURES

**SUCCESS RATE:** The percentage of diversion participants who successfully complete the diversion program.

**SAFETY RATE:** The percentage of diversion participants who are not charged with a new offense while participating in diversion programs or services.

**POST-PROGRAM SUCCESS RATE:** The percentage of participants in problem-solving diversion initiatives who are not charged with a new offense within a specific time period after diversion program completion.

**Strategic Objectives**  
Conserving/redirecting criminal justice resources to more appropriate cases

**Strategic Objective**  
Enhancing personal accountability and responsibility

**Strategic Objective**  
Reducing arrests by modifying behaviors linked to further criminal activity

#### Performance Measures

**SCREENING:** The percentage of eligible persons assessed for diversion placement.

**PLACEMENT:** The percentage of persons appropriate for diversion placement who are placed into diversion programs or services.

**SATISFACTION:** Stakeholder opinions of the diversion program's quality of supervision, services, interactions, and worth.

#### Performance Measures

**COMPLIANCE:** The percentage of participants successfully completing specific diversion requirements (community service hours, restitution, fees, etc.)

**RESPONSE:** The frequency of policy-approved responses to compliance and noncompliance with diversion conditions.

#### Performance Measures

**PROVISION:** The percentage of assessed and appropriate participants who receive substance abuse, mental health or other needed services.

External Factors/Assumptions

Community ❖ Legal ❖ Defendant ❖ System

From: Outcome + Performance measures for Pretrial Diversion Field  
National Association of Pretrial Service Agencies 2015