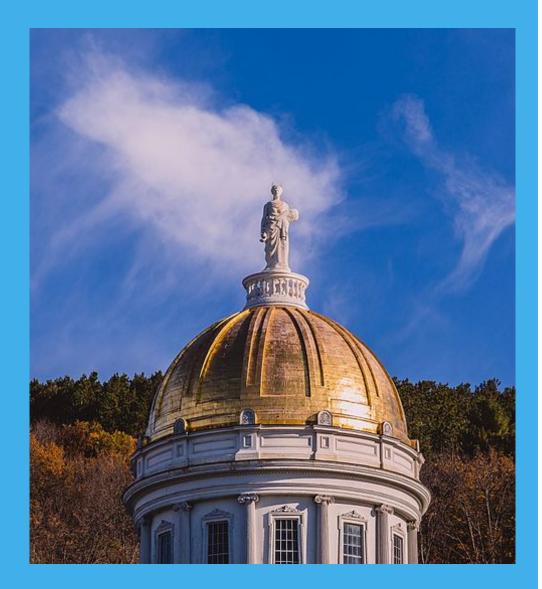


Vermont Justice Reinvestment II Working Group Meeting October 15, 2019

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A data-driven approach to identify and respond to public safety challenges.

Supported by funding from the U.S. Department of Justice's Bureau of Justice Assistance (BJA) and The Pew Charitable Trusts.

Increasing public safety is the focus of Justice Reinvestment.

Reduce Recidivism: People who commit crimes are held accountable, receive the intervention needed to change their behavior, and do not reoffend.

Repair Harm: Victims are safe, have access to help, understand how the criminal justice system works, see accountability, and heal.

Prevent Crime: A state utilizes policing strategies and public safety approaches to decrease crime and violence, not just *reported incidents* of crime.

Build Trust: Communities heavily impacted by crime and incarceration are supported, and any underlying conditions of distrust are directly addressed.



Presentation Outline



Analysis and Assessment Updates

- 2. Criminal Justice System Design and Programs
- 3. Key Considerations and Questions

Justice Reinvestment includes a two-part process spanning analysis, policy development, and implementation.

Phase I - Pre-Enactment

States apply by submitting a letter to funders for Phase I approval and funding.

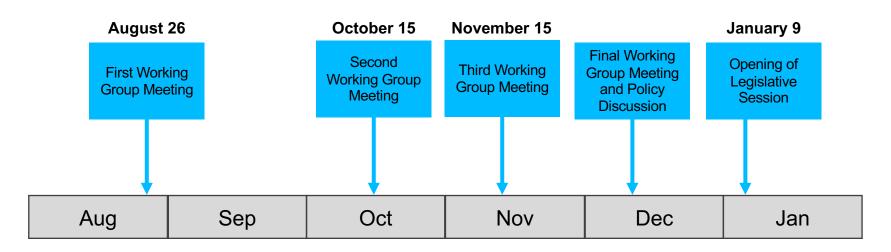
1	Bipartisan, Interbranch Working Group	Assemble practitioners and leaders; receive and consider information, reports, and policies.	
2	Data Analysis	Analyze data sources from across the criminal justice system for comprehensive perspective.	
3	Stakeholder Engagement	Complement data analysis with input from stakeholder groups and interested parties.	
4	Policy Option Development	Present a policy framework to reduce corrections costs, increase public safety, and project the impacts.	

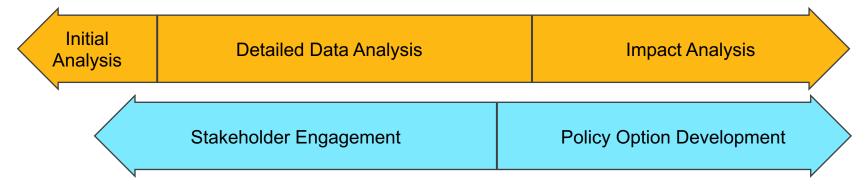
Phase II - Post-Enactment

States that enact Justice Reinvestment legislation apply by submitting a letter to funders for Phase II approval and funding.

5	Policy Implementation	Identify needs for implementation and deliver technical assistance for reinvestment strategies.
6	Monitor Key Measures	Monitor the impact of enacted policies and programs; adjust implementation plan as needed.

The Vermont Justice Reinvestment timeline is short and requires commitment to focus on analysis, engagement, and discussions.





While there have been delays accessing data from state agencies, data sharing and analysis have begun and must continue on time.

Data Type	Source	Status
Crime/Arrests	Department of Public Safety	NIBRS data accessed
Pretrial Detention	Department of Corrections	In process
Court Dispositions/ Diversions	Vermont Judiciary	Disposition data received; some diversion information accessed
Criminal Histories	Vermont Judiciary/ Department of Public Safety	Process to access identified; will pursue time permitting
Furlough Supervision	Department of Corrections	Snapshot data received; admissions and release data in process
Prison	Department of Corrections	Snapshot data received; admissions and release data in process
Probation/Parole Supervision	Department of Corrections	Snapshot data received; admissions and release data in process
Victim Services	Vermont Center for Crime Victim Services	Summary data accessed
Behavioral Health	Department of Corrections/ Department of Health	In process

The CSG Justice Center team has begun conversations with stakeholders across the state and is continuing engagement and outreach.

Front-End System Pressures

- Law enforcement officers and leadership
- ✓ Victim advocates
- People with lived experience
- Diversion program and pretrial services administrators
- ✓ Court officials, including judges
- □ State's attorneys
- Criminal defense attorneys

Incarcerated Populations

- ✓ Department of Corrections leadership and staff, including supervision officers
- ✓ Court officials, including judges
- ✓ Parole officials
- Housing experts and leadership
- ✓ Victim advocates
- ✓ People with lived experience

Behavioral Health

- Agency staff

 implementing behavioral health programs for
 criminal justice
 populations and tracking
 data and outcomes
 across both systems
- Community-based providers and treatment experts
- Law enforcement officers and leadership
- ✓ Victim advocates
- People with lived experience

In August, the working group discussed the primary objectives of Vermont's second Justice Reinvestment Initiative.

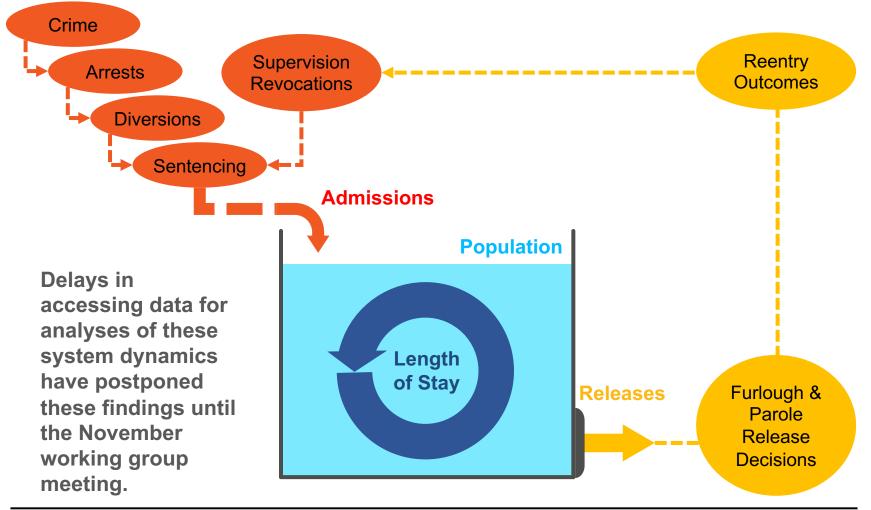
A second Justice Reinvestment project in Vermont will primarily seek to:

- Analyze how increases in some categories of crime may be impacting other parts of the state's criminal justice system.
- Explain the connection between supervision revocations and incarceration.
- Assess how individuals' behavioral health challenges, such as serious mental illnesses and substance addictions, play a role in their movement through and their reentry from the criminal justice system.
- Identify where Vermont's data tracking and analytics must be strengthened to provide lawmakers with sustainable information to guide safe policymaking in future legislative sessions.

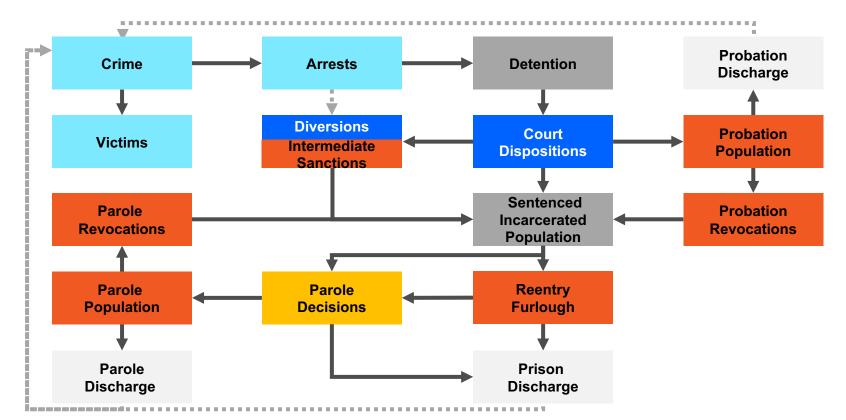
Presentation Outline

- 1. Analysis and Assessment Updates
- 2. Criminal Justice System Design and Programs
 - I. Front-End Community-Based Alternatives
 - II. Reentry Programming and Services
 - III. Supervision Statuses and Structures
- 3. Key Considerations and Questions

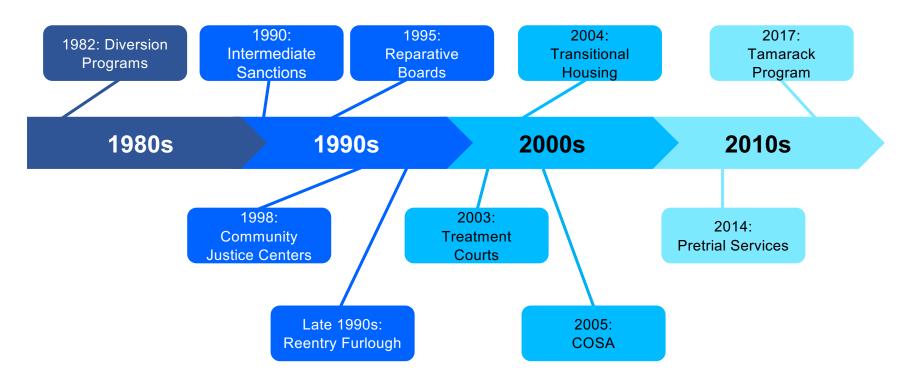
Vermont has developed strategies to decrease admissions and prepare people for successful reentry, but these efforts have resulted in a highly complicated system with varied or unknown impacts.



Vermont's criminal justice system and its various components provide context for what the data and system analyses will show in November.



This "map" charts the major pathways people follow through Vermont's criminal justice system. Within each of these pathways, there are various programs, sentencing options, supervision standards, and recidivism outcomes that impact individuals, communities, and the overall system. Over several decades, Vermont has established a variety of programs and sentencing options with the goals of safely lowering the criminal justice population through diversion and recidivism reduction.



Stakeholders feel that many of the programs are not given the resources and time required to have a strong impact before "the next great idea" is enacted by statute or policy change.

Presentation Outline

- 1. Analysis and Assessment Updates
- 2. Criminal Justice System Design and Programs



Front-End Community-Based Alternatives

- II. Reentry Programming and Services
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Reparative boards have evolved into a statewide option for diverting people from the criminal justice system for lower-level offenses.

ELIGIBILITY: Primarily misdemeanor offenses but can allow for felony cases. Excludes any offenses that involve intimate partner violence.

REFRRALS: From local law enforcement, the state's attorney, or the judiciary. The offending party must take responsibility for his or her actions.

BOARD PROCESS: Local board of volunteers meets with responsible and harmed parties to determine how to hold responsible party accountable.

ADMINISTRATION & FUNDING: Reparative boards were established through legislation that required DOC to ensure boards exist throughout the state. While they are administered by 20 local community justice centers, funding for the boards comes from discretionary grants administered and funded by DOC.

IMPACTS & CASES: Over 2,000 cases were referred in FY2019

- 512 reparative probation cases (usually a deferred probation sentence)
- 1,736 other cases (mix of pre- and post-adjudication)

Participation in Vermont reparative boards may come before or after adjudication.

Analysis of the reparative boards found that people who participated in reparative probation instead of standard probation were less likely to be convicted of a new offense during the five-year follow-up period.

Also, additional analysis showed that people who are referred before adjudication were less likely to receive a new conviction than those referred after adjudication.

Are there opportunities to expand referrals to reparative boards to a broader range of people?

Sources: 28 V.S.A. § 2a; Tim Halvorsen and Peter Wicklund, Vermont Community Justice Center Reparative Panel Programs Outcome Evaluation Final Report (Northfield Falls: The Vermont Center for Justice Research, 2014); Gale Burford, Meredith P. Huey and John A Humphrey, Reparative versus Standard Probation: Community Justice Outcomes, (University of Vermont).

Court diversion programs are also designed for lower-level offenses, and referrals have significantly increased since 2017 legislative changes.

ELIGIBILITY: People charged with first or second misdemeanor or first nonviolent felony

REFRRALS: From state's attorney

COURT DIVERSION PROGRAM PROCESS: A restorative process involving responsible and harmed parties, staff, and often volunteers, is used to jointly develop an agreement to repair the harm caused.

ADMINISTRATION & FUNDING: Court diversion programs are overseen by the AG's Community Justice Division. Each of the 14 counties has a court diversion program run by either a nonprofit or a local municipality.

IMPACTS & CASES: Between FY2017 and FY2019, referrals increased by 148 percent, from just over 1,200 cases to 3,000 cases.

Recidivism outcomes vary dramatically among participants with and without prior criminal histories.

A study that focused on court diversion participants between 2014 and 2016 found an overall recidivism rate (measured by new conviction) of 17 percent. Participants with no criminal history had a recidivism rate near zero (.68 percent), and participants with criminal histories had a recidivism rate close to 90 percent.

In 2017, Tamarack was established, a court diversion program designed for people with substance use and mental health treatment needs regardless of their criminal justice histories.

Are there differences in the nature and the outcomes of the different programs across varying counties and administering agencies?

Sources: 13 V.S.A. § 164; Robin Joy, Recidivism Study and Cost Analysis for Vermont Court Diversion (Montpelier: Crime Research Group, June 2019).

Created in 2017, the Tamarack program is a new diversion opportunity that many courts are utilizing for more complex behavioral health cases.

ELIGIBILITY: People with substance addiction or mental health treatment needs, regardless of their prior criminal history record. People charged with misdemeanors and felonies are eligible, unless the offense is a listed crime.

REFRRALS: From state's attorney

TAMARACK PROGRAM PROCESS: Pretrial coordinators in every county meet with participants and quickly connect them to substance use, mental health, or other supportive community-based services.

ADMINISTRATION & FUNDING: The Attorney General Community Justice Division provides and oversees funding for local organizations that hire a pretrial services coordinator to administer the Tamarack program and work directly with clients.

IMPACTS & CASES: In just two years, referrals have grown 42 percent. In FY2018, 819 cases were referred, and in FY2019 there were 1,166 cases. Referrals to Tamarack and court diversion programs represented 33 percent of all new misdemeanor cases filed in FY2019.

Court diversion programs, the Tamarack program, and pretrial services are overseen by the Community Justice Division of the AG's office (AGO). Currently, the AGO contracts with one provider who offers all AGO-funded programs for each county or counties served.

What will data show are the long-term impacts of this program, and how can this information potentially bolster state's attorneys' confidence in referring people to Tamarack?

Sources: 13 V.S.A. § 164; Court Diversion and Pretrial Services Fiscal Year 2019 Report (Montpelier, Office of the Attorney General, 2017).

Statewide pretrial services grew from a successful program in Chittenden County, and courts' use of this resource has grown significantly.

ELIGIBILITY: People who are charged with crimes are eligible for pretrial services, with the exception of charges that would require sex offender registration or life imprisonment.

REFERRALS: Court-ordered or self-referral

PRETRIAL SERVICES DELIVERY: Services are provided by coordinators, who connect people to substance addiction and mental health treatment providers and other services, including transportation, employment, and housing. Needs screenings are used to help determine what services and supports are appropriate for the client.

ADMINISTRATION & FUNDING: Pretrial services are overseen by the Community Justice Division of the AG's office. The organization that provides the court diversion program for the county also provides pretrial services.

IMPACTS & CASES: Court referrals to pretrial services have increased 345 percent since FY2017. There were 729 cases referred in FY2019, up from 164 in FY2017.

A primary barrier that pretrial service coordinators have helped clients with is transportation, including to court and service appointments.

Pretrial services also include risk assessments for people held in pretrial detention to inform judicial decisionmaking, but the primary use of pretrial services has been for people who are not incarcerated and can benefit from services, particularly substance addiction and mental health treatment.

Given that most people charged with crimes are eligible for pretrial services, are there certain types of offenses or cases that are more likely to receive referrals from the court? What are the statewide variations, if any?

Sources: 13 V.S.A. § 7554c; Court Diversion and Pretrial Services Fiscal Year 2019 Report (Montpelier, Office of the Attorney General, 2017).

Front-End Community-Based Alternatives

Vermont has built an array of "off ramps" at the front end of the system for people with limited criminal history, which almost ensures that people ineligible to participate in them who end up under DOC control will have higher criminogenic risks and needs.

- Each of these programs provides a variety of opportunities for people to be diverted from the criminal justice system or chart a less punitive path through it, either through straight diversion, reduced charges, or access to services.
- Most of these opportunities are available across the state, but the consistency in the types and quality of the services that are offered likely vary by county.
- Referrals to most of these programs rely on local actors, principally state's attorneys, which will also lead to variances in who is able to receive or participate in these programs.
- Only one of these programs (Tamarack) has broad enough eligibility criteria to allow for people with more extensive criminal histories or who are charged with more serious offenses to participate.
- Data collection and outcome reports are inconsistent, and some programs may be duplicating efforts depending on varying structures.
- In many cases, individuals who are at higher criminogenic risk and have greater needs and longer histories with the criminal justice system will continue on to some form of sentenced supervision or incarceration.

Presentation Outline

- 1. Analysis and Assessment Updates
- 2. Criminal Justice System Design and Programs
 - I. Front-End Community-Based Alternatives



- Reentry Programming and Services
- III. Community Supervision Statuses and Structures
- 3. Key Considerations and Questions

People who are sentenced to a period of DOC incarceration are assessed to determine their risks and needs and inform what programming they may receive to prepare them for eventual reentry.



Effective recidivism reduction begins with addressing a person's needs through evidence-based programming while in an institution and continues with programming in the community alongside effective supervision.

CRIMINOGENIC RISK AND NEEDS ASSESSMENT

Conducted by DOC casework staff for all people who receive an incarceration sentence. DOC uses the Ohio Risk Assessment System (ORAS) for their risk and needs assessment. Substance use screenings are also conducted and, when appropriate, sex offender and domestic violence assessments are also used.

HEALTH CARE ASSESSMENT

Conducted for all people who are admitted to a DOC facility and includes a mental health and substance use screening and assessment followup, where appropriate. These screenings are conducted by health care contract employees.

DOC provides a variety of programs and reentry planning for sentenced people inside facilities, but timely access to programming can be limited.

Depending on a person's risk assessment score and their offense type, DOC provides a variety of risk-reduction programming (RRP) to people serving incarcerated sentences, with the goal of improving recidivism outcomes when they return to their communities.

Only people who are medium-high to high risk and convicted of listed crimes are eligible for violence-reduction programming.

Upon sentencing, people are assigned to case managers who conduct risk assessments, help connect incarcerated people to appropriate programming, and coordinate with reentry officers to provide case planning for parole and furlough. When people move between facilities they also change case managers.

RRP criminal thinking programs:

- Charting a New Course
- Thinking for a Change

RRP violence reduction:

- Aggression Interruption Training
- Achieving Change Through Value Based Behavior
- Cognitive Behavioral Interventions for Sexual Offending

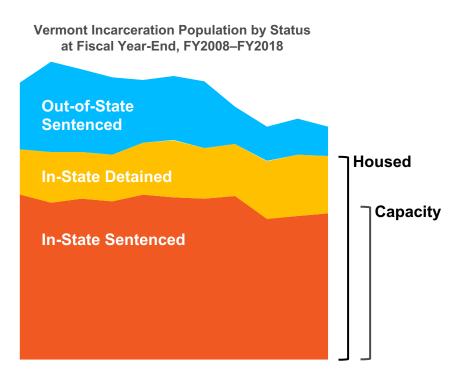
RRP substance addiction treatment:

- Texas Christian University Curriculum
- Criminal Conduct and Substance Abuse
- Cognitive Behavioral Intervention Substance
 Abuse

DOC also offers educational and vocational programming that is informed by the risk, needs, responsivity principle for people who are sentenced to terms of incarceration.

Space and resource limitations can delay an eligible person's access to appropriate programming. As of October 2019, approximately 50 people were on waiting lists for appropriate DOC programs.

People awaiting trial are held in the same facilities as sentenced populations, which creates logistical challenges for an overcrowded system and limits what programming people may be able to access.



Currently 2 out of 6 DOC facilities are able to offer only educational programming:

Marble Valley Regional Correctional Facility (Rutland) and Northeast Correctional Complex (St. Johnsbury)

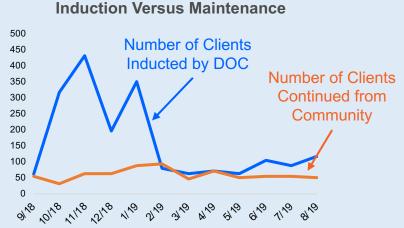
- People who are held on pretrial status are booked into DOC facilities across the state, which means an already dynamic population is in greater flux depending on who and how many people are held pretrial on any given day.
- This overcrowding creates space limitations that require incarcerated people to be moved between facilities frequently.
- A person who participates in risk-reduction programming (RRP) will usually be transferred to the facility offering the necessary programming a week or more before the class begins.
 The programming completion date will be tied to the expected release of the person through furlough, parole, or probation.

Sources: Summary data received from DOC, August 2019.

Many of the DOC behavioral health programs have expanded in recent years to serve more people held in DOC custody.

Behavioral health treatment and supports

- · People's needs are identified by the mental health and substance addiction screenings during the health care assessment.
- DOC offers individual and group mental health and substance addiction counseling and behavioral health interventions.
- A gender-informed curriculum is offered at Chittenden Regional Correctional Facility, including Seeking Safety and Women's Relapse Prevention.



DOC MAT Clients

DOC is a designated "spoke" within Hub & Spoke

Open Ears is a voluntary peer recovery

in DOC facilities. Individual coaching

coach service available to any person held

sessions support people with mental health

and substance use problems, or who wish

to discuss the traumas of incarceration or

other challenging life situations. Since its

coaching sessions have taken place in VT

creation in January 2018, over 11,500

- Between July 2018 and July 2019, the number of people in DOC facilities receiving MAT treatment increased 370 percent, from 176 to 827 people.
- The number of people who maintain • prescriptions from their communities and the number of people newly inducted to MAT within DOC have become approximately equal in number.

DOC facilities

Upon reentry, there are several programs and services to assist people, but the availability of services and the amount of people they serve varies across the state.

In 1998, DOC partnered with local governments to create **Community Justice Centers** (CJCs) across the state. Today, almost every county has a CJC that provides a variety of reentry services for people reintegrating into their communities from incarceration, including resource navigation, educational workshops, and family reintegration conferences.

CJCs are required to have reparative panels and accept COSA clients, and others expand beyond those standards to connect people with additional services as available in their county.

In FY2019, the 20 CJCs across Vermont provided reentry services and programming to 578 people.

Circles of Support and Accountability (COSA)

Created in 2005, COSA is a reentry program designed for moderate- to high-risk people who are released from prison. The program aims to help people reintegrate into their communities by connecting participants to community volunteers before and after their release. The program is primarily for people convicted of sex offenses but has expanded to allow other people with serious convictions to participate. In 2019, 20 CJCs across Vermont provided support to 70 new COSA clients who had been released from DOC.

Though small in sample size, recidivism studies on the Vermont COSA program have shown strong results.

Sources: Marc Wennberg, 360°Review of the Vermont COSA Program, (Montpelier: Community Justice Network of Vermont); Kathryn J. Fox, Circles of Support & Accountability, Final Report, (Burlington: University of Vermont, 2013).

Vermont's DOC provides limited access to a wide array of resources and services for people with identified housing needs, but there are challenges connecting people to long-term stable housing.

In FY2020, DOC budgeted \$6.2M to provide a range of housing supports and services to over 600 people who have reentered the community and are under supervision. These services and supports include:

- Housing search and retention
- Tenancy education
- Employment assistance
- Community referrals
- Recovery support
- Mental health and substance addiction support
- Medical/psychiatric services
- Case management
- Over 300 beds available in emergency shelters, scattered apartments, congregate housing, and permanent housing placements

Once a person is no longer under correctional supervision, housing assistance funds terminate.

People with severe mental health needs may access beds in supportive housing; DOC has partnered with community-based organizations, such as Pathways, to find permanent supportive housing for people with complex care needs who are reentering the community. However, once they are discharged from correctional supervision (parole or furlough) their DOC-provided subsidies end, which often results in lost housing.

People with mental health and substance addiction issues have many challenges in accessing and maintaining stable housing. Often, their only reentry housing option is in congregate sober houses, where relapse can result in losing their bed. Currently, Vermont lacks a common definition of recovery housing and is considering a formal certification process for recovery homes.

Presentation Outline

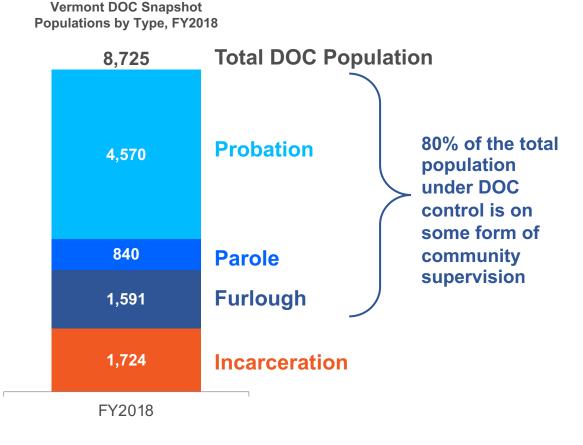
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Community Supervision Statuses and Structures

3. Key Considerations and Questions

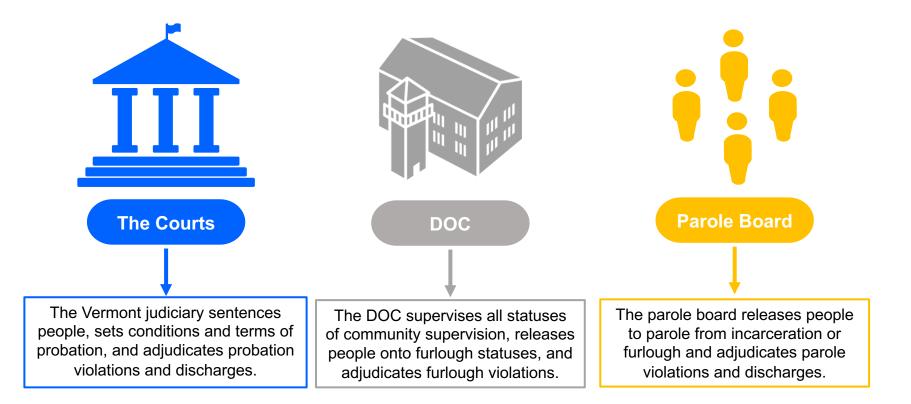
With the vast majority of sentenced people on some kind of community supervision, it is critical to understand how the structure of that system helps or hinders public safety goals.



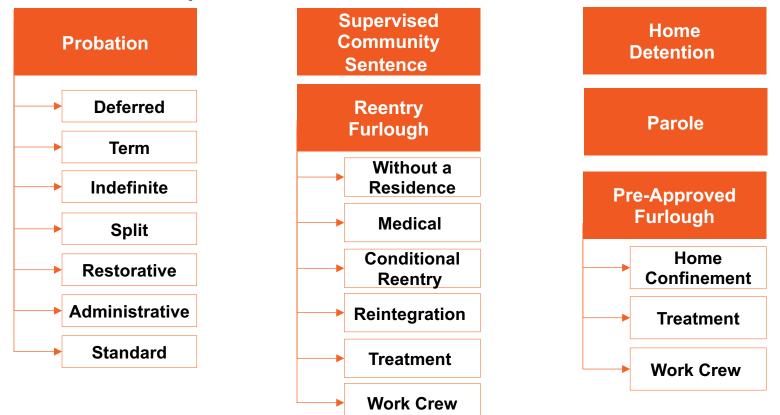
Vermont's community supervision system has evolved through policy and statute to become highly complicated and potentially undermined by the number and variances in legal statuses by which people are supervised in communities across the state.

Sources: Vermont Department of Corrections.

Community supervision in Vermont is uniformly administered by DOC, but the terms, conditions, releases, violations, and discharges of supervision are determined by three different entities.



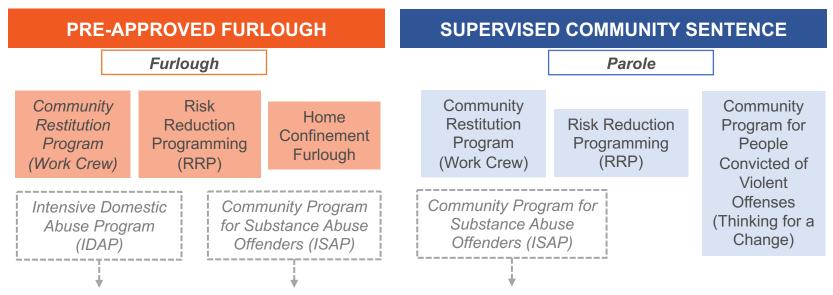
The number of community corrections legal statuses a person may be supervised under is highly complicated, and there are different administrative requirements for each status.



The complexities of this system result in a lot of staff supervision time focused on navigating the varied requirements and reports for different statuses and can lead to confusion for victims of crime about when a person may be released from or returned to prison.

Intermediate sanctions were meant to allow for an immediate community supervision sentence for people convicted of more serious offenses.

Under an intermediate sanction sentence, a person will receive a deferred incarceration sentence and community supervision that includes a higher degree of supervision than is typical under most types of probation. Two types of intermediate sanctions are:



When intermediate sanctions were enacted as a sentencing option, the community programming was based on offense rather than risk, and stakeholders indicate that these programs were a leading reason for sentencing people with more serious offenses to intermediate sanctions. However, as DOC evolved to adopt a risk-based approach to programming, these programs were replaced.

Sources: Vermont Department of Corrections, Sentencing Manual, (Waterbury: Vermont Department of Corrections, 2013).

Treatment dockets are available in some areas, but participant volume is low.

Voluntary, post-plea programs for adults that offer the chance for dismissal or reduced criminal charges. Programs typically last about 18 months.

ELIGIBILITY: High-risk, high-needs individuals who have substance addictions and/or mental health issues. Disqualifying offenses include sexual assault and arson crimes. Disqualifying offenses may include violent crimes.

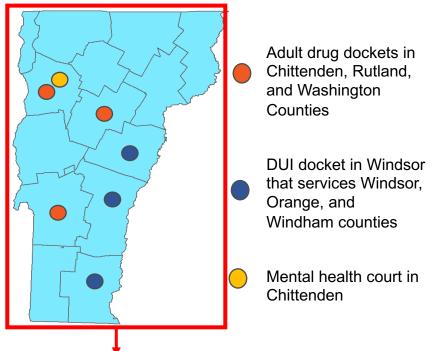
REFERRALS: Primarily from state's attorney or the defense, but can also come from treatment providers or law enforcement.

TREATMENT DOCKET TEAM: Includes attorneys, treatment providers, judicial officer, court coordinator, probation and parole officers, and law enforcement.

IMPACT & CASES: As of 4Q FY2019, there were 168 total people enrolled in treatment dockets: drug court (111); DUI; (34); and mental health (23). Independent evaluations of treatment dockets over the past decade have mostly indicated positive effects on reducing recidivism and costeffectiveness.

Most jurisdictions use treatment dockets to focus on more serious offenses.

For the DUI docket, participants are on probation as a condition of their sentence. For other dockets, it is common for people to be participating as a response to a probation violation.



Are there opportunities to expand treatment dockets to more counties and regions in the state?

Categories of probation sentences vary, from type to terms to conditions and standards of supervision.

Under **probation**, a person who is found guilty of a crime, by verdict or plea agreement, is released by the court to community supervision. Probation sentences often do not include incarceration, but under **split sentencing** a person may serve a period of confinement along with their community supervision as part of their probation sentence.

There are several categories of probation in Vermont:

- **Deferred probation:** If the person successfully meets the conditions of their probation without violations, their record will be expunged at the end of their probation term.
- Administrative probation: The court places a person on probation with minimal supervision and limited conditions. May include a sentence to restorative probation, which requires participation in a Restorative Justice Program through the community reparative boards.
- **Standard Probation:** Applies to three types of probation: (1) **term** (in which the length of probation is established at sentencing), (2) **indefinite** (in which probation will continue until further order by the court), and (3) **restorative** (which is similar to administrative restorative probation but with expanded conditions).
- Interstate Commission of Adult Offender Supervision (ICAOS): Applies to people on probation who have transferred their supervision from another state or territory of the United States.
- Youthful Offender: Administration of this probation is jointly provided by the Department for Children and Families (DCF) and the DOC and applies to the supervision of people under the age of 22 who are adjudicated as "youthful offenders" and receive conditions of juvenile probation.

The courts determine probation sentences and conditions, and DOC field staff carries out supervision.

Probation Conditions and Caseloads

The sentencing judge determines all conditions of probation supervision as well as the length of the sentence and ultimately whether a person may be discharged from probation.

Presentence Investigation (PSI) reports may inform sentencing and conditions decisions. They are required for sex offense cases, and other PSIs may be conducted by request.

People who commit more serious offenses and are higher risk are supervised under a **risk management** caseload, while lower-risk people who commit less serious offenses are assigned to a **response probation** caseload.

Sanctions and violations are the primary responses to noncompliant behavior by people on probation. A probation officer may use graduated sanctions to respond to clients and may recommend a violation of probation in response to more serious and/or new criminal charges.

Assessments, Treatments, and Programs

DOC assesses people for their **risks and needs**, which inform probation case planning and, when ordered, PSIs. People are also screened for any substance use and mental health needs.

People on probation may have access to or be ordered to complete a variety of treatments, depending on availability, sentenced conditions, and their consent:

- Risk-reduction programming (RRP)
- Domestic violence treatment
- Sex offender treatment
- Medication-assisted treatment (MAT)
- Intensive outpatient (IOP) treatment

Reentry furlough provides mechanisms for people to be released prior to or at their minimum sentence for a period of community supervision before they may be approved for parole.

Furlough is a status under which the DOC may release a person from their sentenced period of incarceration for reintegration into the community. There are several categories and sub-categories of furlough. Some are approved absences from incarceration under specific circumstances, while others are structured as reentry and preparation for parole release.

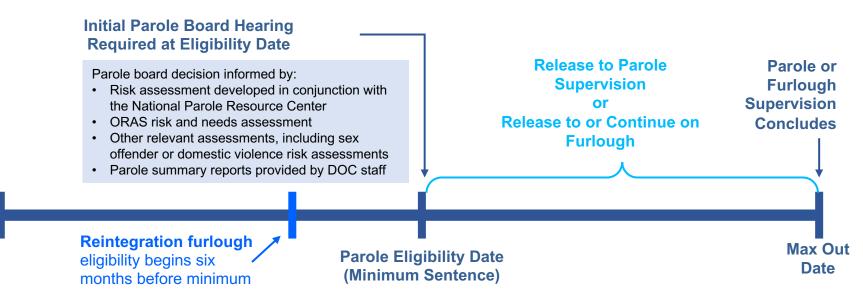
There are seven major **categories of furlough** and various subcategories. In all cases except pre-approved furlough, the type of furlough a person is released to is determined by the DOC. Each furlough type carries its own specific considerations as to its appropriateness for people based on their sentenced offense, their behavior inside DOC facilities, and their risks and needs.

Conditions and standards for supervision vary according to the furlough status a person is released under.

Release may be granted prior to a person reaching their minimum sentence for some types of furlough, while other types may not allow for release until a person has reached or passed their minimum sentence. People convicted of listed sex offenses are not eligible for furlough until they have served 70 percent of their maximum sentence.



The Vermont Parole Board considers and grants parole for people who are incarcerated or already furloughed in the community.



Conditions of parole release are determined by the parole board, and **contact standards** of supervision are determined by DOC.

Sanctions are determined by DOC field supervision staff, who may respond to noncompliant behavior with graduated sanctions or a request for a **reprimand hearing**, during which the parole board reviews the person's behavior and may decide to issue a formal reprimand. The board may also move to hear the reprimand as a formal violation and proceed with the violation of parole the next month.

Violations of parole are determined by the board following a hearing at which the person on parole must be represented by counsel or a prisoner's rights representative, if she or he so decides. If the board determines a violation occurred, it may continue the person on parole or revoke, and the person will be reincarcerated. DOC determines whether to release to furlough or bring the person back before the board for consideration.

Presentation Outline

- 1. Analysis and Assessment Updates
- 2. Criminal Justice System Design and Programs



Key Considerations and Questions

Initial conclusions highlight the extent of Vermont's efforts to provide programming and services across the state and the need for continued analysis to determine the public safety impacts of these efforts.

- Vermont has a long history of establishing various programs and policies intended to divert people from the criminal justice system and to promote recidivism reduction and better community outcomes.
- Many of these programs are designed for people charged or convicted of lower-level offenses or with more limited criminal histories, which means many higher-risk people will move on to some form of sentenced community supervision or incarceration or both.
- Community supervision remains the primary mechanism by which people with higher risks and needs who are convicted of more serious offenses are connected to services and programs.
- DOC offers programming aimed at reducing a person's risk of recidivism upon their reentry, but timely access to these programs can be limited, and people remain on wait lists.
- Even with large DOC investments, people leaving incarceration still face significant barriers in finding and maintaining stable housing, which may contribute to their return to prison.
- Vermont's community supervision system is complicated by the many and varied legal statuses, particularly for furlough, on which a person may be released and supervised.
- The lack of consistent data analysis and reporting leaves DOC, policymakers, field staff, and others blind to the impacts of this complicated system design, especially the programs and components that may or may not contribute to recidivism reduction effectively.

Key questions for further analysis, assessment, and engagement

- What are possible opportunities to strengthen front-end programs and services to continue expanding connections to services and programs for people with higher risks and complex needs?
- How can these services become more consistent in quality, outcomes, and access across the state?
- Are sentenced incarcerated people receiving the dosage and types of programming they need to best prepare them for successful reentry and lower recidivism?
- How impactful are the programs and treatments people on supervision access, and are conditions of supervision consistently and effectively aligned with risk and needs to ensure strong outcomes?
- How do DOC field staff perceive and implement departmental policy to advance evidence-based practices in probation, parole, and furlough supervision?
- What do other key stakeholders, including state's attorneys, defense counsel, judges, law enforcement, parole board members, victim advocates and service providers, and people on supervision, perceive as long-term benefits or pitfalls of Vermont's community supervision system?

Next Steps

Continued qualitative analysis and stakeholder outreach

- Meeting with state's attorneys, defense counselors, people on community supervision, victim advocates, and service providers
- Gender-responsive analysis of DOC and community-based programming and supervision
- Ongoing discussion related to racial disparities throughout the system
- Ongoing assessment of the broader behavioral health system and services and treatment for people with criminal histories and involvement

Analysis of criminal justice data

- Court data: sentencing and dispositions
- NBIRS data: crime and arrest
- DOC data: admissions, length of stay, releases, and revocations to prison

Working Group meetings:

- o Friday, November 15 in Montpelier
- December meeting
- Potential for another meeting in early 2020?

Thank You

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