

**The Clermont County
Community Alternative Sentencing Center
(CASC)**

Year 1 Program Summary
(Operating Period: September 2015 – August 2016)



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Program Overview

The *Clermont County Community Alternative Sentencing Center* (CASC) is a voluntary treatment program funded by the Board of County Commissioners (Board) that provides innovative drug, alcohol and mental health services to non-violent misdemeanor offenders referred by the Clermont County Municipal Court. Ongoing meetings between the CASC Admissions Team and the Municipal Court Adult Probation Department coordinate referrals, admissions, and discharges.

The Board established the CASC in 2013 in accordance with Section 307.932 of the Ohio Revised Code. In June 2015, the Board revised the program by increasing the focus on drug treatment and mental health services primarily to address individuals suffering from Heroin addiction. In 2015, the Board contracted with Greater Cincinnati Behavioral Health (GCB) to operate the CASC in order to provide a holistic treatment approach.

The goals of the CASC program were as follows:

- Reduce the numbers of individuals being referred to jail;
- Ensure the program positively contributes to the community and is valued by the criminal justice system;
- Reduce recidivism by providing drug and alcohol treatment, cognitive therapy, life skills, employment programming and other related services;
- Encourage offenders to maintain employment; and
- Reduce costs related to jail operation.

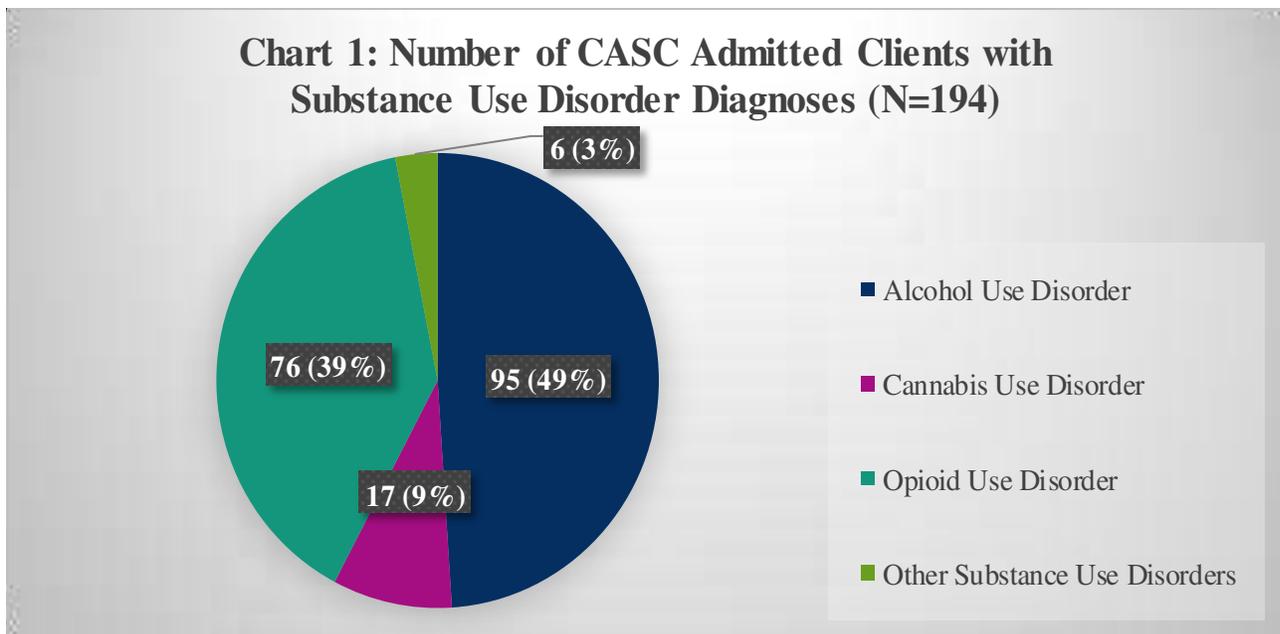
This Year 1 Program Summary presents an overview of the program's first year of operation under GCB (Operating Period September 1, 2015 to August 31, 2016), including:

- Client overview, referrals, admissions, and discharges;
- Client Feedback and Success Stories;
- CASC services;
- Assessment Data;
- Recidivism;
- Employment Services; and
- Program Costs.

Client Overview

CASC is a male only program and the vast majority of admitted clients were White (97%), which reflects the demographic make-up of Clermont County. The average client age was 35 (range 19-72) and approximately three-quarters (74%) completed 12th grade. Sixty-seven percent (67%), of admitted clients, met low to moderate income requirements, which are individuals or families whose household income does not generally exceed 80% of the area median income.

GCB staff completed a full diagnostic assessment on each CASC client. All 194 admitted clients had a substance use disorder diagnosis (Chart 1). Close to half (95 clients, 49%) had an alcohol use disorder, followed by opioid use (76 clients, 39%). Diagnostic data, obtained from CASC clients, mirrors the substance use disorders among the client population at the Clermont Recovery Center (CRC), the primary substance abuse treatment facility in Clermont County.



Fewer CASC clients had mental health diagnoses. Twenty-six clients had an identified mental health diagnosis at admission, with a majority of those having a diagnosis of post-traumatic stress disorder (9) or anxiety disorder (5). A new Clinical Supervisor, and an emphasis on a holistic approach, may lead to an increase in mental health diagnosis in Year 2.

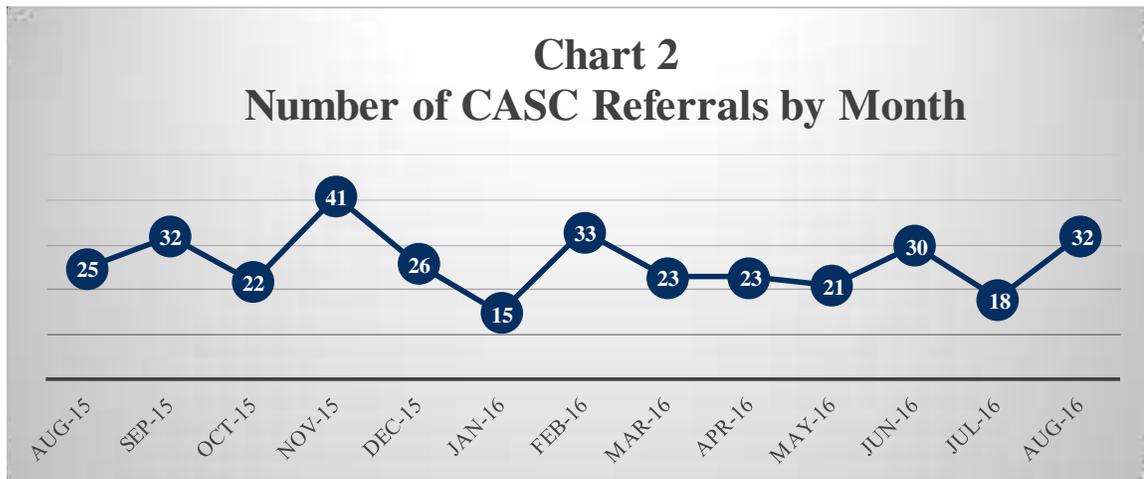
GOAL 1 - Reduce the numbers of individuals being referred to jail.

- ✓ 194 individuals were admitted to CASC between September 1, 2015 and August 31, 2016. Had they not been admitted to CASC, they would have been incarcerated.

CASC Referrals & Placement

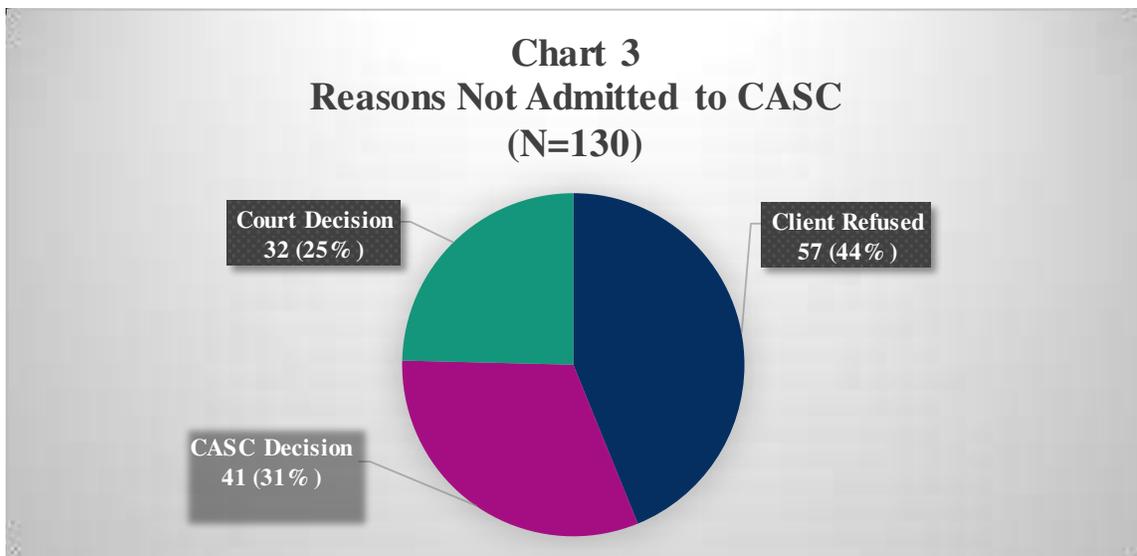
CASC began accepting referrals from the Clermont County Municipal Court Judges in August 2015. CASC is a voluntary program; therefore, individuals had the option to decline participation.

- 327 individuals were referred to the program. 14 of these individuals were referred twice, resulting in 341 total program referrals.



* January referrals slowed down due to the holiday season and the transition of a new Judge.

- From the 341 program referrals received, 211 (62%) were offered the opportunity to participate in CASC. The remaining 130 (38%) were not admitted for a variety of reasons, with the primary reason being refusal to participate (Chart 3).

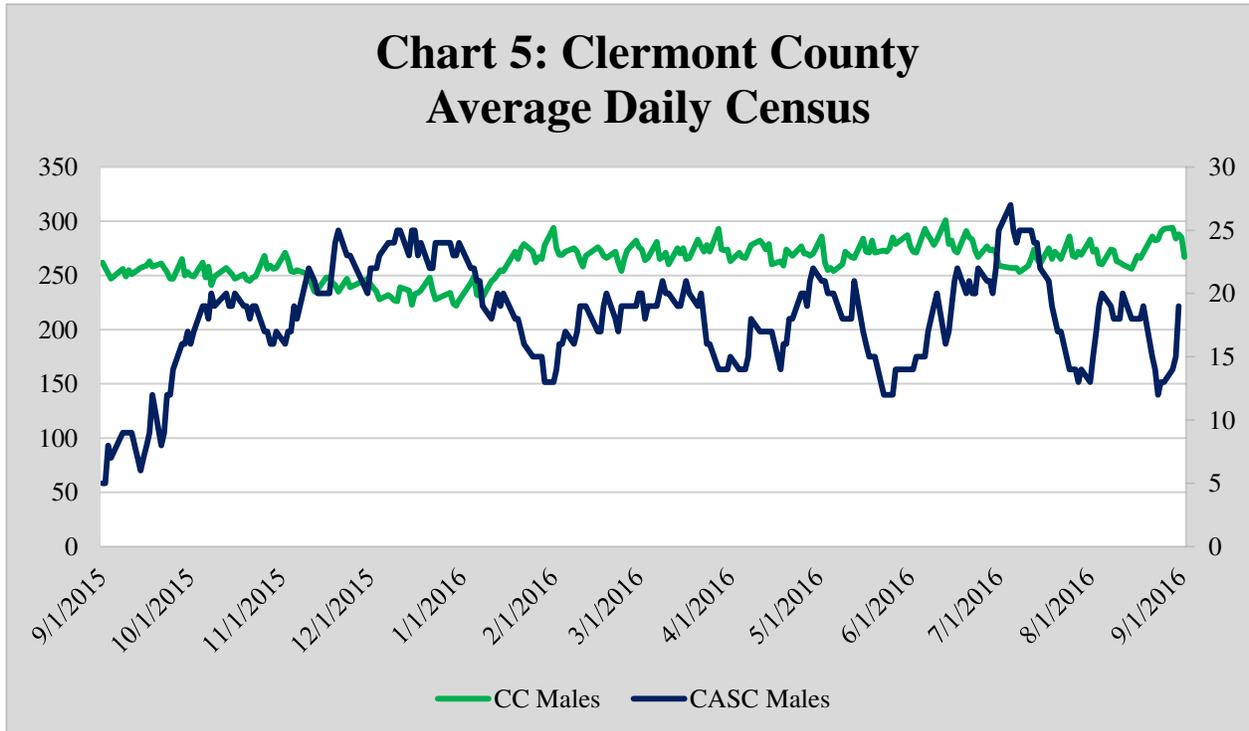


CASC Admissions and Jail & CASC Census

194 individuals were admitted to CASC between September 1, 2015 and August 31, 2016. Four of these individuals were admitted to the program twice, resulting in 198 total program admissions. The average number of admissions per month was 16.5 (Chart 4).



The average daily census over the same time period for CASC was 18 clients, and for the jail the average daily census for males was 263 (Chart 5).



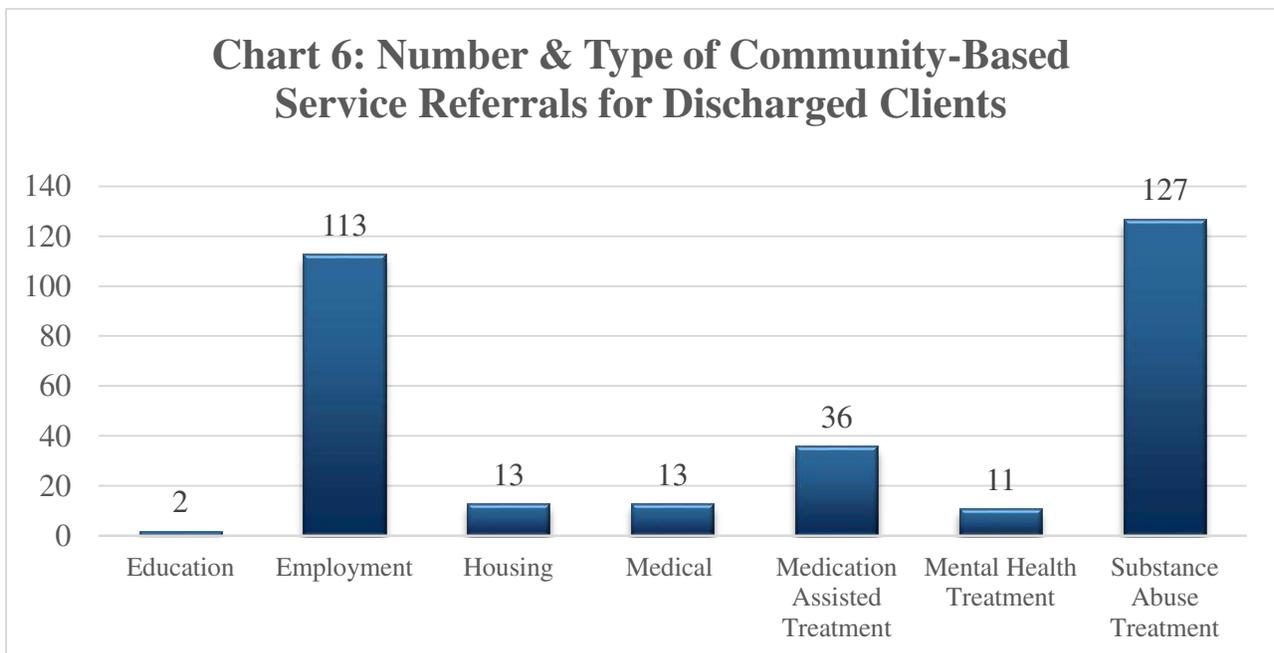
CASC Discharges

CASC discharges fall into three categories:

- Successful – the client met his plan goals or was released prior to a successful program completion.
- Unsuccessful – the client refused ongoing services or engaged in major program rule violations.
- Neutral – the client was removed for reasons beyond the control of the client or the program.

147 clients (82%) were successfully discharged from the program. The reasons for a neutral or unsuccessful discharge included rules violation/non-compliance (17 clients), client choice (11 clients), medical issues (4 clients) or unspecified (1 client).

CASC clients were referred to community-based services upon discharge. The discharge process specifically included scheduling a substance abuse treatment counseling appointment with the Clermont Recovery Center (CRC). 144 clients received post-discharge referrals. Referrals to community-based vocational services (113) and substance use disorder treatment (127) were the most frequent referrals (Chart 6).



Overall, linkage and engagement rates were high. Linkage and engagement data were available for 113 of the substance abuse and treatment referrals and 33 of the medication assisted treatment referrals. 93 of the 113 clients (82%) linked to CRC for substance use disorder treatment, with 86 (92%) engaging in services. Similarly, 24 of 33 clients (73%) linked to medication assisted treatment and all 24 engaged in services.

GOAL 2 - Ensure the program positively contributes to the community and is valued by the criminal justice system.

- ✓ *The combination of CASC programming and shared resources, with the Clermont County Municipal Court Adult Probation Department, has offered offenders with the opportunity they typically would not be offered if incarcerated, which is to recover from alcohol and drug addiction in a pro-social environment designed for improving lives.*

The Clermont County Community Alternative Sentencing Center (CASC), operated by Greater Cincinnati Behavioral Health, has positively impacted the Clermont Municipal Court and the community with an innovative residential sanction as an alternative to incarceration. The CASC program has been a significant sanction for the court in assisting with the opiate addiction that plagues our community through behavioral and cognitive-based treatment for misdemeanor offenders in a residential setting.

Individuals convicted of OVI (operating a vehicle impaired), and OVI traffic-related offenses, can be directly sentenced to CASC and receive credit toward a mandatory jail sentence thereby freeing up needed space in the local jail. Individuals convicted of other misdemeanor offenses can be given credit per judicial discretion and the program is considered to be an important sanction as part of the court's continuum of sanctions to address non-compliance with terms and conditions of community control. The sanction is heavily utilized by probation officers, prosecutors, members of the law enforcement, therapists and attorneys.

 *The CASC program is an effective condition of community control that allows offenders to have the needed treatment, employment and medical services to increase the likelihood of successful transition back into the community.*

The majority of offenders referred to CASC are placed on reporting community control to assist with rehabilitation from alcohol and drugs. The Clermont County Municipal Court Adult Probation Department partners with the CASC program to improve outcomes and assures linkage with needed outpatient and aftercare services.

A qualified CASC employee provides the court with a diagnostic assessment of the offender before acceptance into the program, which provides needed recommendations for sentencing. Additionally, the CASC program performs the Ohio Risk Assessment System on offenders sentenced to 30 days or more in the program to better identify areas of need in order to manage offenders in the program to reduce recidivism.

CASC Client Feedback

CASC clients were surveyed in several different areas to ensure they were receiving treatment at the levels necessary to help them reach their goals. Eighty-five percent (85%) of clients surveyed “Agreed Completely” or “Agreed Somewhat” that they participated in their treatment planning. Seventy-seven percent (77%) believed treatment was helping them reach their goals.

The Clermont County Municipal Court Adult Probation Department also surveyed clients following discharge from CASC. Over ninety percent (90%) of clients surveyed “Strongly Agreed” or “Agreed” that their participation in CASC would help them avoid alcohol and/or drug use in the future (94%) and, in general, they were better off for participating in CASC as opposed to serving their sentence in jail (92%). Ninety-five percent (95%) of survey respondents rated their overall CASC experience as excellent (27%) or good (68%). In terms of specific program benefits, the vast majority thought the substance abuse treatment programming (92%), corrective thinking treatment (89%), and sober support, like AA/NA, (97%) were beneficial.

CASC Client Success Stories

BJ

BJ began using alcohol and marijuana at age 12. His drug use expanded to using a variety of narcotics and eventually daily use of alcohol and methamphetamine by the time he was 26. His engagement in criminal activity also began to escalate, leading him to felony charges, including obtaining a dangerous drug, aggravated vehicular assault, robbery, physical assault on a police officer, and several OVI's.

BJ engaged in multiple drug treatment programs, but repeatedly relapsed. He experienced frequent job changes and periods of homelessness. In February 2016, his probation officer referred him to the CASC Program, and he began a 60-day treatment program on February 15, 2016.

While at CASC, BJ participated in AOD (alcohol and other drugs) counseling, *Thinking for Change*, and vocational/job readiness groups. He did extremely well in treatment and voiced a true commitment to obtaining and maintaining his sobriety. He successfully graduated from CASC on April 14, 2016, but still had to deal with being homeless and unemployed. He worked with his counselor to secure temporary housing at the James Sauls Homeless Shelter. His treatment team connected him with various wrap-around services, including case management, the medication assisted treatment (MAT) program, AOD groups and a Benefits Counselor at CRC, and the ASPIRE program for employment assistance. BJ completed his ASPIRE intake, while at CASC, prior to discharge to help with linking to CRC.

Since CASC, BJ has been working two jobs and is receiving retention services through ASPIRE, obtained his own apartment, and continues to attend AOD counseling/MAT services at CRC. BJ received several donations from CRC staff to assist with clothing needs. He received additional clothing from ASPIRE to help him with maintaining his employment. BJ continues to stay connected with CASC, ASPIRE, MAT, and CRC. BJ reached 90 days of continued employment in July of 2016.

John

John came to CASC on October 26, 2015, following conviction of his 4th OVI. He reported difficulty maintaining employment and positive relationships due to his use of alcohol. His problems began back in high school when he was terminated from his first job at Burger King due to alcohol. John reported drinking as a way to cope with stress. He commented, during his CASC assessment, that he recognized that he has a problem with alcohol and wanted to participate in CASC in order to meet his goals of completing AOD treatment, focus on becoming employed, and to be surrounded by positive people who would be supportive of him.

While at CASC, John participated in AOD (alcohol and other drugs) counseling, *Thinking for Change*, and vocational groups. He worked with counselors in understanding how AOD use impacted his life, his relationships, employment, and his ability to deal with day-to-day stressors. He stated that he recognized drinking was becoming self-medicating to numb his feelings of depression and feeling overwhelmed. He was able to develop a personalized relapse prevention plan and successfully graduated from CASC on November 9, 2015. He was then referred for support services through CRC and the ASPIRE program for ongoing AOD counseling and specialized employment services.

John was referred to ASPIRE (post CASC) on November 15, 2015 for additional community supports, and was opened on December 16, 2015. John was then connected to community employment services within 31 days after his CASC discharge. He gained employment February 1, 2016, 47 days after being opened with ASPIRE. John graduated from CRC groups in April 2016 and has continued to maintain his sobriety. He is working two jobs, including full-time employment and contract work. He continues to meet with his probation officer on a monthly basis and has since regained access to his driver's license, with modifications required to his vehicle. John has continued to maintain his employment and reached 6 months of continued employment in August 2016.

GOAL 3 - Reduce recidivism by providing drug and alcohol treatment, cognitive therapy, life skills, and other related services.

- ✓ 89% of clients with an unsuccessful CASC discharge spent time in jail in the 6-month period following CASC discharge compared to only 20% of clients with a successful CASC discharge.

Treatment Services

All clients had a substance use disorder with alcohol (49%) and opioid (39%) use the most prevalent within this population, mirroring substance use disorder trends within the County.

➤ **Substance use disorder treatment:**

Substance abuse counseling and education is provided at the group and individual levels. For group structure, CASC implements *Thinking for Change: An Integrated Approach to Changing Offender Behavior* curriculum that integrates cognitive restructuring, social skills, and problem solving. This group-based program has clients participate in guided discussions and activities designed to build skills to recognize thinking patterns, identify risks associated with thoughts, and learn how to make better decisions. Each CASC participant also receives weekly counseling sessions from their assigned Counselor.

➤ **Medication assisted treatment (MAT):**

Medication assisted treatment (MAT) is addiction medicine provided for opiate and alcohol-based addictions, including Buprenorphine and Vivitrol. Eleven clients were admitted to the MAT program.

➤ **Case management:**

Case management included support services to link clients to community resources such as benefits, housing, and treatment services.

➤ **Medical/somatic services:**

Medical/somatic services included psychiatry, addiction medicine, basic medical care, and nursing services. Eight CASC clients were referred to a psychiatrist during CASC participation.

➤ **RN services**

CASC provides 20 hours of nursing services on-site weekly. Nursing principally coordinates medical care with CASC participants' Primary Care and with GCB's MAT program.

➤ **Community support services:**

Community support services, offered by the CASC Program, included Alcoholics Anonymous, SMART Recovery (addiction recovery support group), and Celebrate Recovery (faith-based recovery program). The average number of community support sessions attended during CASC participation was 13 (range, 0-42).

Assessment Data

Clients admitted to CASC completed the following:

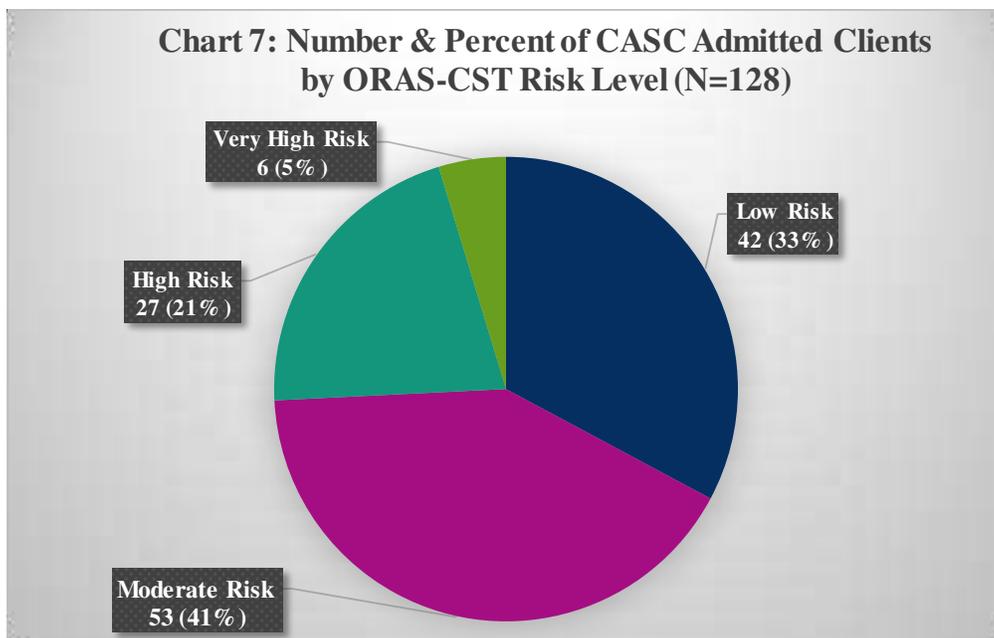
- Ohio Risk Assessment System: Community Supervision Tool (ORAS-CST); and
- Treatment Motivation Scale from the Texas Christian University Institute of Behavioral Research.

Ohio Risk Assessment System (ORAS-CST):

The ORAS-CST was administered to CASC clients sentenced to the program for 30 days or more (128 clients). It gathers information that: 1) separates offenders into risk groups based on their likelihood to recidivate, 2) identifies risk factors that can be used to prioritize programmatic needs, and 3) identifies potential barriers to treatment.

Scores	Ratings	Recommendations
0-14	Low	Minimum supervision or non-reporting supervision
15-23	Moderate	Regular supervision; programming should be provided for moderate and high need domains
24-33	High	Enhanced supervision or residential placement; programming should be provided for moderate and high need domains
34+	Very High	Residential placement preferred or enhanced supervision at highest level; programming should be provided for moderate and high need domains

The average ORAS-CST score was 18.74, which is considered to be Moderate Risk. Nearly three-quarters of clients (74%) scored in the Moderate or Low Risk categories (Chart 7).



Texas Christian University (TCU) Treatment Motivation Scale

The TCU Treatment Motivation Scale includes short scales that assess *Problem Recognition*, *Desire for Help*, *Treatment Readiness*, and *Pressures for Treatment*. Scores range from 10-50 (mid-point = 30), with higher scores indicating a greater degree of motivation. 119 clients completed the Treatment Motivation Scale at program admission and discharge.

TCU Treatment Motivation Scores at CASC Program Admission and Discharge

Table 1: TCU Treatment Motivation Scores at CASC Program Admission and Discharge		
Treatment Motivation Sub-scale	Average Admission Score	Average Discharge Score
Problem Recognition	34.53	33.97
Desire for Help	38.29	38.02
Treatment Readiness	39.13	36.78
External Pressures for Treatment	37.62	34.99
Overall Score	37.15	35.99

Average motivation scores were above the scale mid-point of 30, indicating higher levels of motivation. There was a decrease in treatment motivation between admission (37.15) and discharge (35.99). Multiple factors likely contributed to these preliminary findings:

- Short average lengths of stay (41.28 days), coupled with group-based clinical programming that does not specifically address individual-level motivation could prevent motivation scores from increasing during CASC program participation.
- Despite the voluntary nature of CASC, clients may have answered questions at admission in a manner that over-reported their level of motivation.
- The sub-scale, *External Pressures for Treatment*, taps into items that may influence treatment participation: 1) You are concerned about legal problems, 2) You could be sent to jail or prison if you are not in treatment, and 3) You have legal problems that require you to be in treatment. Because individuals choose to participate in CASC, in lieu of jail time, it is likely clients would agree with these items at program admission. Answers to the same questions, at discharge, may reflect their compliance with the treatment requirements of their sentence and could lower scores.

CASC & Jail Recidivism

To assess recidivism within the CASC client population, the following criminal justice data was obtained for each client: 1) new jail admissions, and 2) new convictions that occur in the 6 and 12-month periods following CASC discharge. Criminal justice data will only include convictions and jail admissions in Clermont County. The following presents preliminary recidivism data for 127 CASC clients for the 6-month period after their discharge from the CASC program:

Jail Data:

- 40 CASC clients were booked in the Clermont County Jail in the 6-month period after program discharge.
- The majority (31) had one new jail admission.
- Six clients had two admissions; two had three admissions; and one had four admissions.
- The average number of days to the first jail admission, after CASC discharge, was 56.
- Across these 40 clients, the average length of stay at the Clermont County Jail was 72 days.

Jail and discharge status were compared to see if there was a relationship between the two variables. Across the 127 clients:

- 106 (83%) were successfully discharged.
- 19 (15%) were unsuccessfully discharged.
- 2 (2%) were neutrally discharged.



89% of clients with an unsuccessful CASC discharge spent time in jail in the 6-month period following CASC discharge compared to only 20% of clients with a successful CASC discharge (Table 2).

Table 2: Discharge Status by Post-CASC Jail Status				
Discharge Status	Jail Time in the 6-Month Period After CASC Discharge			
	Yes		No	
	# participants	% participants	# participants	% participants
Successful	21	20%	85	80%
Unsuccessful	17	89%	2	11%
Neutral	2	100%	0	0%

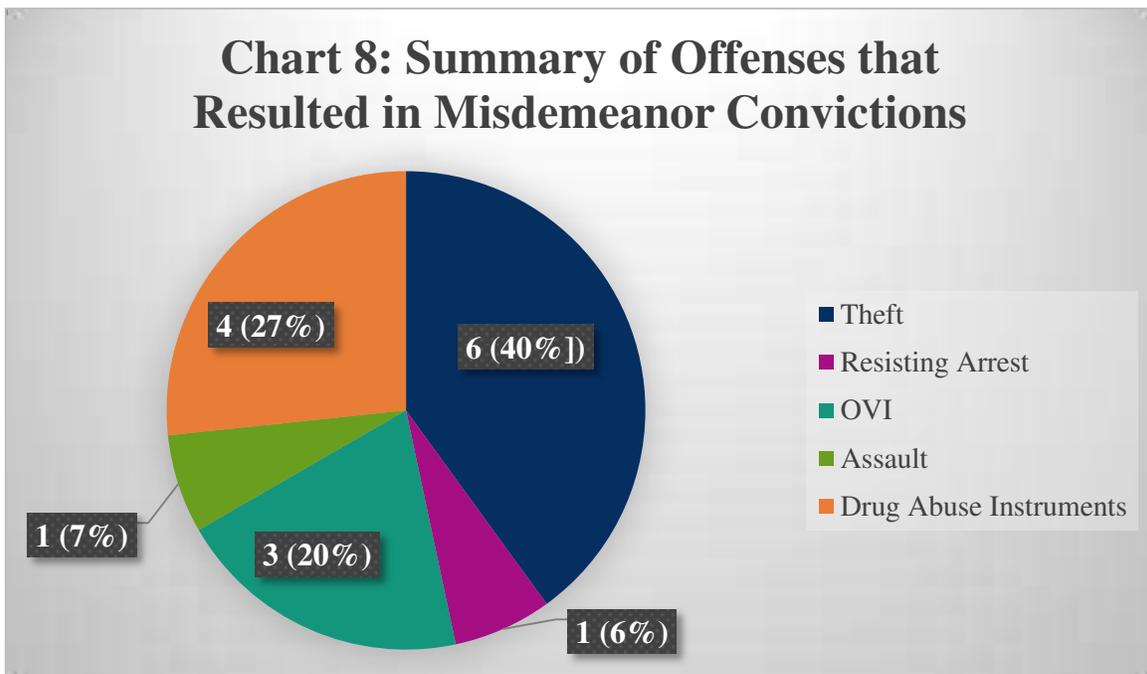
Jail status and ORAS-CST score (for clients sentenced to 30+ days) were also compared. Clients who spent time in jail following CASC discharge came into the program with higher average ORAS-CST scores (25.15 – high risk category) compared to clients who did not go to jail (17.14 – moderate risk category). Higher ORAS-CST scores indicate a greater likelihood to recidivate.

Misdemeanor & Felony Conviction Data:

11 CASC clients had 15 new misdemeanor convictions in the 6-month period following program discharge, as follows:

- Eight had one new misdemeanor conviction.
- Two had two misdemeanor convictions.
- One client had a bench warrant for failure to appear on a third misdemeanor offense.

Chart 8 provides an overview of the offenses that led to misdemeanor convictions. The majority (67%) was for theft (40%) and drug abuse instruments (27%). One client had a felony theft conviction during this time period.



GOAL 4 - Encourage offenders to maintain employment.

✓ *All of the 86 clients (100%) who were employed when admitted to CASC, self-reported that they maintained their employment.*

Employment Services

CASC clients had employment-related needs, with 105 clients unemployed at CASC admission. Initially, the program dedicated one, part-time, employment specialist to address these needs. By March 2016, the program transitioned the CASC employment specialist to full-time, with funding from the Clermont County Mental Health & Recovery Board, to better meet the needs of clients by tailoring services to employment status and expected length of stay in the program.

➔ *184 clients received some type of evidence-based employment service during CASC participation, 86 of these clients (47%) self-reported that they were employed when they began receiving CASC employment services.*

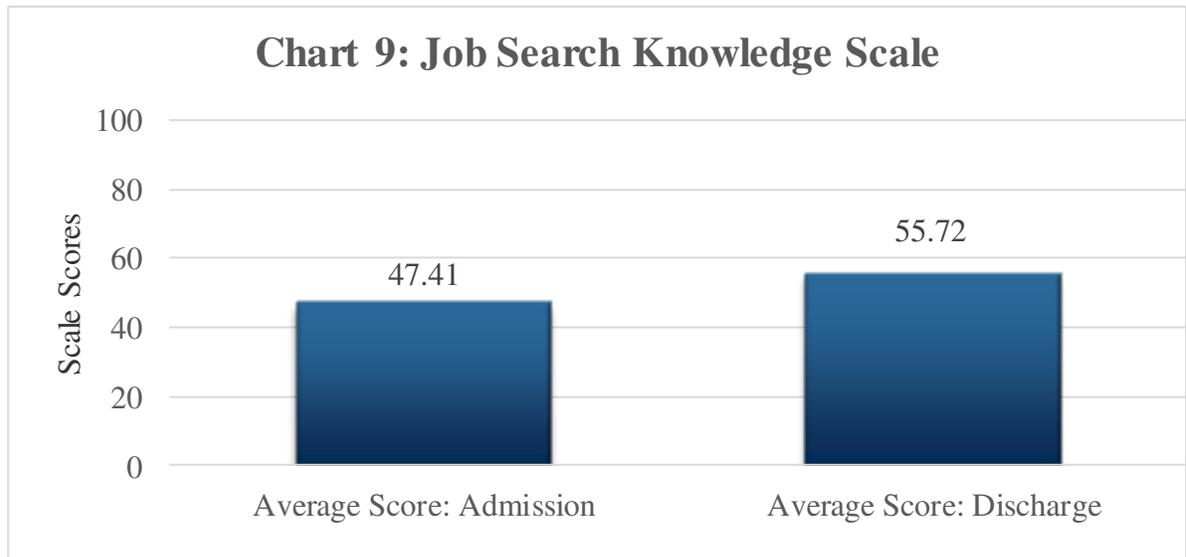
- 146 clients participated in a **Mini Employment Profile** – A snapshot of an individual’s work history, barriers, supports, substance/mental health concerns, and education.
- 45 clients participated in **Resume Writing** – Clients who expressed interest in creating or revising their resume were given the opportunity to meet individually with the CASC employment specialist to do this.
- 184 clients participated in a least one **Job Readiness Module** – The CASC Employment Specialist facilitated group-based job readiness modules for clients tailored to the unique needs of each group. Topics for these modules included:

Job Readiness Modules	
• Resume development	• Thank you letters/letters of explanation
• Job search methods	• Skills/Strengths
• Elevator speeches	• Attitude
• First impressions	• Social media
• Budgeting/Financial, including credit repair	• Interviewing
• Access to community resources/GED	• Communications at work
• Maintaining employment	• Meeting employer expectations
• Mental/physical wellness	• Developing job satisfaction

Job Search Knowledge Scale

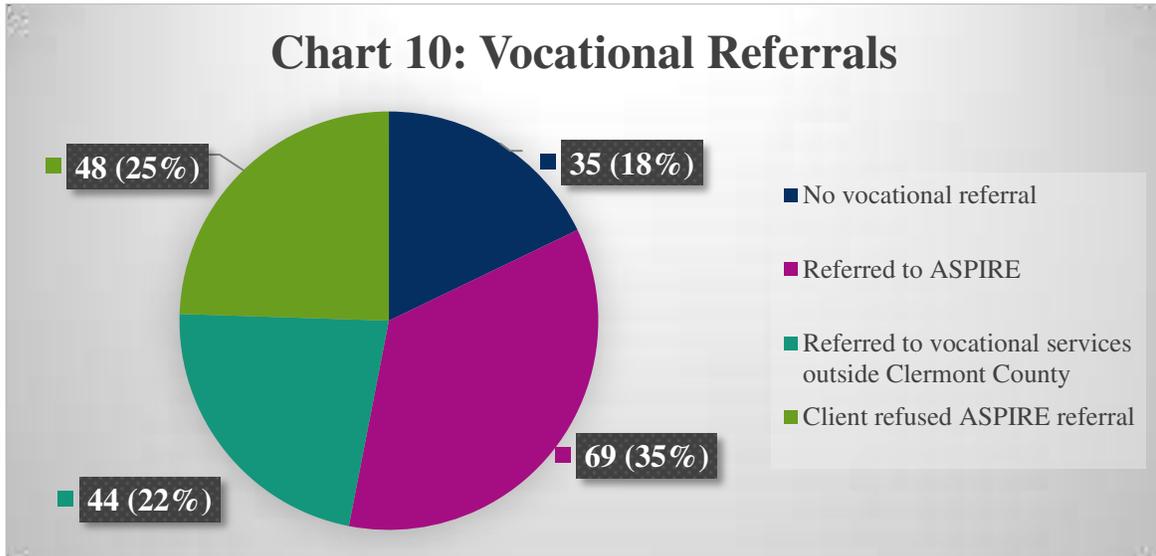
Clients completed the Job Search Knowledge Scale (JSKS) at program admission and discharge. The JSKS helps determine how much clients know about looking for work, offers guidance on the job search methods that work best, and informs job search plans. It includes the following sections: 1) identifying job leads, 2) applying directly to employers, 3) writing resumes and cover letters, 4) interviewing, and 5) following-up. Scores range from 0-60, with higher scores indicating a greater level of job search knowledge.

- 81 clients completed the JSKS at program admission and discharge. The average JSKS score at admission was 47.41 compared to 55.72 at discharge, indicating increased job search knowledge (Chart 9).



Community Referrals

Linkage to and engagement with community-based treatment and employment services is critical to achieving reductions in substance use and increasing employment. While treatment and employment services are provided during CASC participation, many clients need continued support when they transition back to the community upon discharge. Upon completion of the CASC employment services, referrals were made, as needed, to community-based employment programs (Chart 10).



The majority of clients (58%) received some type of referral. Sixty-nine (69) clients were referred to Clermont Recovery Center’s ASPIRE program. Forty-four (44) clients were provided a letter offering employment resources in a surrounding county.

Across the 69 clients referred to ASPIRE:

- 25 were opened from referral status after CASC discharge. 12 of the 25 clients (48%) obtained employment.
- The average wage for these individuals was \$10.74/hour (range \$8.10-\$18.00). Jobs represented a variety of employers including: manufacturing, management, carpentry, food service, maintenance, and other skills.
- CASC clients accepted positions in which they have the opportunity to network, build a resume, and move into a career, if they stay connected.

The remaining 44 ASPIRE referrals were not opened for the following reasons: client already employed (23); unable to locate (13); client declined services (5); incarcerated (1); resided outside of Clermont County (1); and client referred to substance abuse treatment for higher level of care (1).

GOAL 5 - Reduce costs related to jail operation.

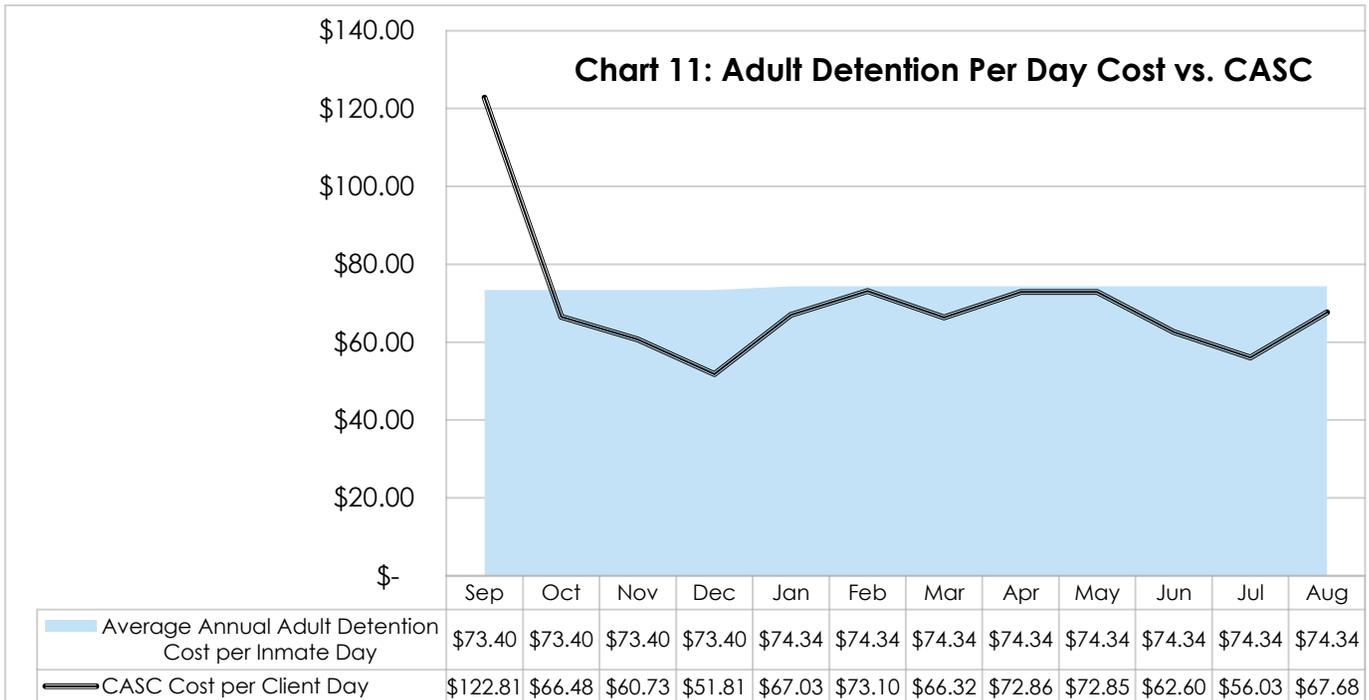
- ✓ *Housing an individual in CASC cost the County 9% less than housing them in jail during the September 1, 2015 to August 31, 2016 operating period.*

Cost - Inmate Housing

The daily cost to house an inmate in the jail fluctuates based on the population levels. The County's average cost to house an inmate for one day in the Clermont County jail during the operating period was \$74. The cost per staffed bed in 2016 was \$78, higher than the per inmate cost due to over-population.

Cost – CASC Client Housing

The operating agreement between Greater Cincinnati Behavioral Health (GCB) and the County required the County to pay GCB a flat, annual fee of \$433,426 to operate the CASC for a maximum of 25 clients. The first three months of the agreement (June 1, 2015 to August 31, 2015) included one-time start-up costs of \$108,356. *The first twelve months (September 1, 2015 to August 31, 2016) operating with clients cost the County \$444,190 (including meals), resulting in an average cost of \$67 to house a client for one-day in CASC during the operating period.*



The County benefits more on a cost per client per day basis if the CASC operates at or nearer to capacity (25 clients). It was encouraging that the CASC daily census continued to increase during the latter months of the operating period. *For example, if the CASC operated at capacity every day for the entire year, the cost per client per day would equal \$49, which is 34% less than housing the individual in the jail.*

