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The James M. Jeffords Center
for
Policy Research

**Windsor County Sparrow Project
PROGRAM EVALUATION**

Final Report of Year One Findings
June 1, 2009 – June 30, 2010

September 15, 2010

by:
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Introduction

This is a first year report of evaluation findings for the Windsor County Sparrow Project (aka “Sparrow”) for the period June 1, 2009 through June 30, 2010. A research team from the James M. Jeffords Center at the University of Vermont has been working with the Treatment Court Coordinator and Sparrow Team since the project’s inception in spring 2009. Sparrow’s evaluation, which will span two years, uses a mixed-method approach that includes a) observations of Sparrow Team meetings; b) analysis of Risk and Needs Triage™ (RANT) data; c) interviews with Sparrow case managers; d) interviews with Sparrow participants; e) interviews with Sparrow “disenrollees”; f) analysis of Sparrow referral, disenrollment and completion activity; g) analysis of Sparrow recidivism data; and h) estimation of incarceration cost avoidance. The primary research questions framing the evaluation are:

1. What are the components of the Sparrow model?
2. Is the Sparrow Project program achieving its intended outcomes?
3. What recommendations arise from the evaluation that may assist in the improvement of the Sparrow model’s design and implementation?

A description of the model is reviewed first, followed by the findings from each of the data collection methods utilized in year one of the evaluation. Also included is an incarceration cost avoidance analysis based upon sentencing data received from the Court Administrator’s Office. Finally, interim recommendations and a summary of key findings are offered.

The Sparrow Model

The Sparrow Project originated from an application by Health Care and Rehabilitation Services of Southeastern Vermont (HCRS) for a H.859 Justice Reinvestment Pilot Project grant from the Vermont’s Court Administrator’s Office. Bill H.859 was passed during the 2007/2008 Legislative session with the intent “to reduce recidivism, increase public safety, and reduce the cost to the state of incarcerating offenders by increasing substance abuse treatment services, vocational training, and transitional housing available to offenders, and by establishing processes for reducing incarceration time when appropriate.”¹ Sparrow is designed to bring criminal justice and social service providers together to develop an integrated approach to serving the needs of individuals with substance abuse and co-occurring mental health issues who come in contact with the criminal justice system.² The Project targets interventions at Sequential Intercept Model³ point two (i.e., post-arrest: initial detention and initial hearings) as referenced in the *Chief Justice Task Force Strategic Plan* dated July 2008.⁴

The Sparrow Team has been working since the spring of 2009 to devise a coordinated model to reduce the rate of recidivism for substance abusing offenders. Starting in March 2009, two full-

¹ Vermont H.859, <http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2008/acts/ACT179.HTM>.

² Health Care and Rehabilitation Services of Southeastern Vermont grant application letter, dated November 13, 2008.

³ http://gainscenter.samhsa.gov/pdfs/integrating/GAINS_Sequential_Intercept.pdf.

⁴ Chief Justice Task Force Strategic Plan, dated July 9, 2008.

time-equivalent case managers were introduced to act as the “point person” for offenders in accessing treatment and social service supports. One case manager also provides overall coordination for the project. Both case managers also serve as intermediaries and links between the criminal justice and social service sectors, which is described in the sections of this report concerning interviews with participants, disenrollees and case managers.

HCRS’ two-year grant application describes the project as intending to serve between 160 and 240 individuals with a completion rate of roughly 100 participants. Further, cost savings from anticipated reductions in bed days in the original proposal were estimated at roughly \$450,000 - \$750,000.⁵ Anticipated outcomes the Sparrow Project hoped to achieve include:

- Reductions in incarcerated time for individuals with substance abuse and/or mental health issues (as measured by pre/post program days of incarceration);
- Increasing public safety;
- Contributing to a person-centered, strengths-based, and trauma-informed system built on collaborative relationships between the participating agencies;
- Linking individuals with substance abuse treatment services, mental health services, vocational training, and housing options – all utilizing formal and informal supports; and
- Promoting cross-training and education of the courts/criminal justice system and treatment providers helping to move toward a more integrated, holistic criminal justice system.

According to the Sparrow Project Protocol⁶, referrals to the program can be made by the State, Defense Counsel, the Department of Corrections, Agency of Human Services, or Windsor District Court. Anyone who is facing incarceration and is charged with a felony and/or multiple misdemeanors can be referred to Sparrow. The types of criminal charges considered to meet the eligibility criteria for participation are: property and drug felonies; fraud offenses; multiple misdemeanors; violations of conditions of release; driving under the influence 2nd or subsequent offense; violations of probation. The defendant must be a resident of Windsor County or the Agency of Human Services Springfield or Hartford field service areas, and defendants under 18 years of age need written permission from a parent or guardian to participate. All referrals are screened by the Sparrow Project for eligibility and pre-engagement level of need and risk. Referrals are voluntary; if a defendant is referred and does not want to participate they cannot be compelled to do so.

The Sparrow Team includes two full-time equivalent case managers (employed by HCRS), the Windsor District Court Judge and representation from the following entities: HCRS, Public Defender’s office, Windsor County State’s Attorneys office, Windsor District Court staff, Department of Corrections (DOC) Probation and Parole staff, and Field Service Director(s) of the Agency of Human Services (AHS). Team meetings occur on a near-monthly basis. Sparrow Project administrative protocols and procedures continue to evolve as the program ends its first year of operation.

⁵ Using in-state dollar savings as the basis of cost savings estimates.

⁶ “Sparrow Project Protocol” document dated March 29, 2010

Data Collection and Findings to Date

Sparrow Team Meeting Observations

During the past year the UVM research team attended several Sparrow Team meetings and several key themes emerged from their observations. First, it was evident that the team is committed to the Project and its success. Meeting notes throughout this period indicate that inherent tensions between service systems and potentially competing roles among team members were positively addressed by members of the team. As indicated earlier, the team includes the Judge, State's Attorney, Defense Attorney, AHS Field Director, DOC representative, case managers, HCRS Director, and Court staff. For example, specific discussions held during Team meetings were indicative of offender situations where protecting the legal rights of clients was balanced with the need for public safety. As the year progressed, an increased level of trust and the Team's ability to more openly discuss the challenges associated with developing a case management model of intervention for substance abusing and dependent offenders was observed.

Second, the Sparrow Team appeared to maintain collaborative approaches to serving clients in spite of competing roles. For example, the research team observed a continuing tension between implementation of a therapeutic model designed to provide support in the context of a system that emphasizes punitive penalties. Subsequently, additional tensions between Defense Attorneys and State's Attorneys concerning the protection of participants' constitutional rights seemed to arise from time to time.

Third, the team was (and remains) committed to creating positive outcomes in terms of bed days saved and reduced overall costs to the criminal justice system. Several instances indicated a concern that the program needed to meet these objectives. The Judge, in particular, stressed the importance of saving bed days and underscored this as the foundation for receipt of funding. At times it appeared that members of the Team were not certain whether client outcomes of well-being were improved as a result of Sparrow intervention since participant progress during their engagement is shared just prior to sentencing to impact the plea agreement and/or sentencing decision.

Finally, lengthy discussion at several team meetings centered on procedural practices and the protection of offenders from self-incrimination. Development of an integrated model for criminal justice and social service provider response to substance abusing and dependent offenders is complicated, as demonstrated by the continuing evolution and refinement of the Sparrow Project's protocols and procedures. In the absence of utilizing existing treatment court models and methods, such as those employed by drug courts, the team has relied on a formative process of program design and implementation. In late spring 2010, the Team began to consider adoption of a more transparent and open process that might include a greater level of judicial oversight and involvement. An adjustment of the model, such as this, could also serve to inform Team members of participant progress during client engagement with Sparrow.

Analysis of Risk and Needs Triage™ Data

The Risk and Needs Triage™ (RANT) assessment instrument developed by Treatment Research Institute (TRI) in Philadelphia, Pennsylvania has been administered by Sparrow case managers to all new referrals at their initial eligibility screening since November 2009. According to TRI's website, "RANT is a *triage* tool, evaluating a client's criminogenic risks and clinical needs to determine the optimal level and type of criminal justice supervision and behavioral health treatment. This information is intended to assist in disposition or assignment of offenders to the amount of supervision and kind of treatment that may offer them the greatest likelihood of success. RANT is not intended to be a substitute for a formal diagnostic assessment of drug or alcohol problem severity."⁷

The RANT instrument assigns offenders into one of four quadrants based on their criminogenic risks and clinical needs (see chart below)⁸.

		Criminogenic Risks	
		High	Low
Clinical Needs	High	<ul style="list-style-type: none"> • Court supervision • Status calendar • Intensive drug treatment • Rewards & sanctions • UA monitoring 	<ul style="list-style-type: none"> • Probation supervision • Non-compliance calendar • Intensive drug treatment • Rewards & sanctions • UA monitoring
	Low	<ul style="list-style-type: none"> • Probation supervision • Status calendar • Pro-social rehabilitation • Rewards & sanctions • Intermediate punishment for non-compliance 	<ul style="list-style-type: none"> • Pretrial services supervision • Non-compliance calendar • Prevention / education

The Court Administrator's Office initiated RANT screening for Sparrow Project referrals primarily to assist with future evaluation efforts related to program design and effectiveness. It was also implemented to match participant risks and needs to recommended intensity of treatment and supervision.

Due to the delay in implementing usage of the RANT, there is a gap in time between when participants were referred to the program and when actual screenings began to occur. In several instances, the RANT was administered to participants who had already completed Sparrow. In others, participants who had been referred to the program were never screened due to a number of confounding factors (e.g. inability to locate nonparticipants, refusal to complete screening). It is not known what effect the time delay in the instrument's administration might have had on the results.

Analysis of the RANT data for Sparrow referrals (n=51; 10 female, 41 male) assessed by the project's case managers for the period November 20, 2009 through April 8, 2010 reveals that 100% were classified "high risk", with most clients (88%) also classified as "high needs". The majority of referrals to Sparrow (46) for this period originated from the Public Defender's Office.

⁷ http://www.tresearch.org/solutions/RANT_FAQs.pdf, accessed August 26, 2010

⁸ <http://www.trirant.org/development.htm>, accessed August 30, 2010

Interventions such as court supervision, adherence to a status calendar, and utilization of incentives (e.g. positive reinforcement for attendance at support group meetings, completion of GED, or offering a “chip” for months of program adherence, etc.) are suggested as key evidence-based practice⁹ (see chart above) components for high risk / high needs offenders, but have not been included in the Sparrow model to date. Of the other recommended components, intensive drug treatment is offered in the current model and in some instances, participants are subject to urinary analysis (UA) testing, but only as required by their Intensive Outpatient Program (IOP) clinicians. In the absence of additional supervision and adherence to imposed supports it is likely that Sparrow’s ability to engage and retain participants in treatment may be limited (see retention issues as described on pages 11 & 12).

Interviews with Sparrow Case Managers

Individual interviews with each of the Sparrow Project case managers were held in 2010. Questions pertained to program outcomes, the treatment model, population served, challenges and opportunities for success, and collaborative relationships with internal and external stakeholders (see Appendix A for a list of questions). Primary themes that emerged from the two discussions include key features related to the Sparrow model of case management, case manager’s role as the central interface between social service and criminal justice sectors and suggestions for program improvement. To maintain confidentiality of reporting, findings are presented in the aggregate and as such, may not actually represent the opinions of both case managers.

Key Features of the Sparrow Model of Case Management **Description of the Operating Model**

Case managers spoke of the holistic, client-centered approach utilized by Sparrow. They clearly indicated their clinical backgrounds were beneficial in working with the population served. Also important was the collegial, mentoring relationship among the case managers. One indicated that he/she would not want to do the work on his/her own; the legal implications were too complex. Being field based and capable of responding to client’s immediate needs with flexibility and “reality based” interventions were deemed vital to supporting clients and “meeting them where they are at”. The population served by Sparrow requires significant assistance with managing schedules, breaking down aspects of the treatment plan and implementing positive lifestyle changes. Case management responsibilities are time consuming and demanding, as indicated by the “high risk / high need” clientele it aims to serve (see Analysis of RANT data section).

Case managers spoke of a client’s voluntary progression through Sparrow and the difference between engagement and retention in treatment. Observations indicate that those clients who complete, in rather quick succession, an initial screening, assessment and case plan are more likely to be engaged *and* retained in the program. Periods of involvement with Sparrow case

⁹ Marlowe, D.B. (2009), Evidence-based sentencing for drug offenders: an analysis of prognostic risks and criminogenic needs. *Chapman Journal of Criminal Justice*, Vol.1, pp. 167-201.

mangers vary by participant and appear to often be driven by legal sentencing timelines rather than treatment needs.

Anticipated Outcomes and Impact

Outcomes and impact of the program were described in terms such as bed days saved, but also included such measures as improvements in a client's quality of life, hope for the future and ability to build life skills. For instance, a client's change in probation officers meant that this long and involved relationship would now be with someone the client felt he/she could work with. Case managers also spoke of the impact that sentencing decisions have on community providers. An example provided include Vocational Rehabilitation (Voc Rehab) staff that, based on reductions in sentencing, would be more likely to assist clients in next steps toward finding employment.

Population Served

Case managers also talked of the characteristics of Sparrow clients. Most were described as high need and having significant functional impairments. A majority, however, did not meet eligibility criteria for other services and were thought to be a "gap" population with limited access to supports. For instance, participant IQ's were just above 70, which placed them beyond the reach of disability benefits. Yet, sustained substance abuse often resulted in cognitive and functional impairments such that expectation for sustainable employment at a livable wage seemed unlikely. Similarly, clients' ability to manage organization skills, scheduling of appointments and completion of some activities of daily living were often limited. Social Security Disability Income (SSDI) was often not an option for clients served by Sparrow. One case manager indicated that some clients were "like children living in the bodies of adults".

Additionally, client existing beliefs and attitudes about service providers sometimes impaired the case manager's ability to quickly build trust and motivate client readiness to complete Sparrow. The timeline for meeting sentencing requirements often reduced client engagement in treatment planning and commitments to changes in behavior and lifestyle. Again, the case management array of supports requires intensive time and creativity to deliver.

Promising Practices

Case managers were impressed by the Judge's ability to take chances on clients and suggest their enrollment in Sparrow. Equally notable was the broad endorsement for the project by all members of the Sparrow Team. DOC staff were found to be flexible in working with case managers in instances where open communication was allowed by the client's defense. Support from a core part of the social service system (Voc Rehab, Economic Services, Department of Labor, Housing Authority and AHS) was deemed effective and appreciated by other providers.

An ability to design treatment plans based on client desires and wants was viewed as favorable in gaining adherence rather than compliance to goals. Case manager support in breaking down the various parts and steps of treatment plans was important and helped to build clients' organizational skills. In addition, the help of a neutral party meant that clients could access

needed services and maintain relationships with service providers. The ability to meet with clients in their homes and observe family situations was also helpful, as was having multiple meetings between clients and case managers during the week.

Case Manager Role as Interface between Social Service Provider Network and Criminal Justice System

Case managers described an interesting aspect of Sparrow, which involved the competing tensions inherent in providing social services within the context of the criminal justice system. Whereas case management supports are focused on the clients' treatment needs, self-efficacy and harm reduction, defense counsel's priorities are to maintain client liberties and freedoms. At times, these perspectives are at odds with one another. For instance, in certain situations case managers believed that brief incarceration periods were a suitable alternative for clients, especially in terms of personal safety and avoidance of risky behaviors. Limitations on open communication among Sparrow Team members, however, precluded such interventions or intermediate sanctions. It may be argued that without judicial involvement during offender participation in Sparrow, alternative sanctions are not available options in the current operating model. A case manager described the tension as one where Sparrow attempts to be holistic, yet the system responds in a less than holistic manner.

As employees of HCRS, case managers indicated positive intra-agency collaborations. Referral to treatment counseling services, IOP programs and additional supports was easily facilitated and coordinated for Sparrow participants. Confusion was reported, however, by some HCRS colleagues who did not understand case managers' inability to provide clinically based, treatment counseling to clients. Case managers countered that their focus needed to remain on the provision of case management services.

Coordination efforts with inter-agency providers were positive in most instances, although a challenge with detention facilities due to turnover and/or reductions in staff. Once incarcerated, gaining access to Sparrow clients was difficult as the correctional point person within the facilities was no longer available. Provider fatigue after prolonged involvement with several Sparrow participants meant some providers were less inclined to work with these clients without case management intervention. Cultural differences in some AHS office practices were also indicated. For instance, in one area Voc Rehab will not work with clients until they have maintained six months sobriety. In another area, this stipulation was not generally an issue. Finally, discharge planning communication with residential facilities was noted as a challenge.

Recommendations for Program Improvement

Case managers suggested several recommendations for program improvement. These included longer term case management interventions for those with significant functional impairments, further collaboration with DOC probation officers, and in certain instances, provision of brief treatment sessions to clients who are not involved with an IOP. Longer treatment alternatives would be required for those with Axis II mental health diagnoses (e.g. Anti-social Personality Disorder or developmental disabilities).

Interviews with Sparrow Participants

Interviews with four Sparrow participants, recruited by case managers and defense counsel were completed in March 2010. Participants' defense counsel was present for the hour long discussions. Questions pertained to experiences with the Sparrow Project and overall impressions of the program (see Appendix A for a list of questions). Themes identified during these interviews include: a) case management and access to informal and formal services; b) role of the case manager; c) role of the participant; d) positive influences resulting from Sparrow involvement; e) barriers to success; and f) recommendations for program improvement.

Role of Case Management in Facilitating Access to Informal and Formal Services

All participants spoke of how the case managers had supported access to social supports and services. Most spoke of improved access to health and mental health services because of their involvement with Sparrow. They talked about having health insurance coverage, which had not been available in the past. Others discussed mental health counseling assistance that previously had either not been accessed, or had not been successful. A majority also spoke of their case manager's ability to either provide or link them with the necessary transportation resources to meet the multiple appointments and commitments called for in their treatment plans. Linkages to social service supports were consistently discussed by participants as a primary component of the Sparrow program.

Also discussed was the case manager's assistance in locating suitable housing for several of the participants. Still other participants spoke about living with family members and the fact that they now contributed to home chores and experienced improved relations with their parents and grandparents. Job placement and educational opportunities, and work with Voc Rehab offices had been facilitated through the participants' involvement with Sparrow case managers. Most talked about the importance and value of support groups, such as Alcoholics Anonymous. One participant spoke of having adopted recreational/athletic activities and the positive impact this was having on his/her ability to channel frustrations and avoid the use of substances.

Role of the Case Manager

In addition to being a connector and link to social services and supports, the role of case managers was also described as providing an important personal connection whereby participants could strive to make positive behavioral changes. Many spoke of the open communication the case managers engendered. Several talked about the case manager's ability to assist with organizational skills, goal development and balanced decision making. For example, one participant mentioned how the case manager had helped him/her think through the potential benefits and drawbacks associated with changing jobs.

Frequently mentioned, too, was the ability of the case manager to act as a mediator between the social service and criminal justice sectors. Several talked about the case manager's ability to aid in communication between the participant and his/her probation officer, which resulted in a participant's ability to stay clear of further criminal justice involvement. Also discussed was the case manager's intervention in working to adjust a participant's treatment requirement so that he/she could access another positive group meeting that was scheduled at the same time. The

case manager worked with the treatment providers and probation officials to find an alternative meeting time so the participant could meet both needs and requirements.

Role of the Participant

Overwhelmingly, all participants talked about a readiness and propensity for change as being a requirement for choosing to participate in the Sparrow program. Every interviewee spoke of being at a point where the alternative seemed worse than what his/her participation in Sparrow might involve. Most talked about how the program was not an easy path to pursue and required a good deal of effort to complete. All said that the program would not be helpful to anyone who was not ready to make a change in his/her life.

Participants spoke of a level of self-responsibility that case managers encouraged in their interactions with community and social supports. Many mentioned the fact that while case managers assisted with linkages, they also expected that participants would learn the skills necessary to for instance, positively engage with an ex-spouse or family member in the future. They talked of the program as providing an opportunity to set and met goals and gain a sense of self-worth for having completed them. Several talked about the importance of maintaining his/her sobriety as a way to manage the impulsivity that often resulted from alcohol and other substance misuse.

Positive Changes and Influences Due to Sparrow Involvement

Most participants clearly articulated that their relationships with family and friends had improved. “We [participant and family members] don’t argue anymore, we actually talk now” was a comment, which illustrated a sense of positive relations that had resulted from sobriety and commitment to his/her treatment plan. One spoke of the on-going difficulty in relating to a past spouse and how talking about this with his/her case manager had been helpful. Several indicated they were moving towards economic stability and viability as a result of their involvement with Sparrow. Most were gainfully employed or going to school to pursue technical skills. One mentioned that Sparrow offered an option whereby he/she didn’t feel like he/she was being treated like a criminal.

Roadblocks and Barriers to Success

Participant involvement with Sparrow was met with several roadblocks and barriers to success. These primarily had to do with transportation needs and attempts to locate suitable housing. The multiple appointments required of a treatment program often interfered with work schedules and given that most had no license, transportation to Intensive Outpatient Program (IOP) meetings and other appointments were difficult to negotiate. In the absence of case management support, it would be difficult for participants to successfully meet all of their probationary or treatment plan obligations.

Several talked of challenges with communication between stakeholders, especially probation officers (PO) and some treatment providers. In one instance, a participant spoke about not feeling safe interacting with his/her PO and how the case manager had acted as a “buffer” between the parties. Another discussed the challenges in working with the local mental health provider. This client felt that an IOP counselor was not supportive, and experienced scheduling conflicts that nearly precipitated his/her withdrawal from Sparrow. The case manager was able

to intervene and develop a win-win situation so that the IOP conditions and client needs were met.

Recommendations for Program Improvement

Participants recommended Sparrow to offenders who had a motivation to change, and offered several suggestions for program improvement. One participant talked of wanting access to the Sparrow case manager after sentencing and program completion. Continued counseling services with another treatment provider would necessitate the building of a new relationship, and was viewed as problematic. Still another called for more open communication between Sparrow and the Court. This participant believed that the Judge should be made aware of how a participant was doing during his/her participation in Sparrow. Further, recognition of progress made during enrollment would be helpful in maintaining the necessary momentum required of changes in behavior and lifestyle. Finally, this participant also recommended on-going contact and support from the case manager following completion of the Sparrow program.

Interviews with Participants Disenrolled from Sparrow

The research team was interested in gaining a preliminary understanding of what the difference between a successful and “unsuccessful” Sparrow participant might be linked to and thus, elected to interview participants that had been disenrolled from the program. The research team, in coordination with the defense attorney, conducted interviews with three prior participants or “disenrollees” (e.g. participants who were unsuccessful in completing the program) in early May 2010¹⁰. Interviews were held in detention facilities in the Windsor County region. In all cases, termination from the Sparrow project had occurred at the time of incarceration.

Questions asked of disenrollees pertained to services provided since arraignment, their disenrollment from Sparrow, and their goals and needs for the future (see Appendix A for a list of questions). General themes that emerged from discussions with past participants include: a) factors that influenced their disenrollment; b) general strengths of the program; and c) recommendations for project improvement.

Factors Related to Disenrollment from Sparrow

Two of the three disenrollees acknowledged they did not choose to stop participating in Sparrow, but rather that their actions led to arrest and incarceration and ultimately, termination from the program. The third disenrollee talked about his/her rural location, a lack of transportation and a sense that the program was not helping. All indicated that demands of their release, multiple meeting requirements such as IOP, counseling and Sparrow, and conflicting appointment schedules impeded their ability to work and made it difficult to meet the requirements of enrollment.

The disenrollees expressed stress regarding scheduling difficulties, as well as frustration that their efforts to succeed were not acknowledged. One person spoke of completing a series of clean urinary analyses, but having no recognition of this progress. Two disenrollees further elaborated, sharing that a focus on negative behaviors by their probation officers fostered decreased motivation to remain in recovery and follow their conditions of release. In their view,

¹⁰ Note sample size limited to three disenrollees.

the lack of acknowledgment contributed to a feeling of resignation and their subsequent resumption of drug and alcohol consumption.

The three disenrollees spoke of challenging relationships with his/her probation officer and the perception that DOC officials were “out to get them”. In one instance, the perception was that imposed curfew requirements impeded the flexibility to meet work demands. In another, there was a sense that he/she could get away with using substances, when in fact the individual could not. Still another apparently presented as though he/she could communicate effectively, when in fact, underlying mental health issues hindered development of a positive relationship with his/her PO. Ultimately, the interviewees had a violation of probation or arrest that led to incarceration and thus, disenrollment from Sparrow.

The most clearly identified reason for disenrollees’ incarceration was the perceived result of probation officers “drawing the line” and detaining them for violation of probation infractions. Disenrollees may have experienced the “line drawing” as a surprise event. That is, perceptions about rules and relationships that were not accurate to the situations that they experienced may have contributed to behavior that forced probation officers to react with incarceration. The research team did not have access to these individuals’ actual sentencing data.

Strengths of the Sparrow Project

Despite termination from Sparrow, disenrollees indicated that the program had numerous strengths. All three spoke of the case management services provided by the model as being helpful, especially coordinating services with other agencies or organizations. Interviewees described the case manager’s advocacy and role in facilitating communication and acting as an intermediary between social service providers and probation officers.

The structure of the program as a treatment focused model that included intensive outpatient programming provided information regarding addiction and recovery that most disenrollees had not been exposed to previously. Several talked about the positive utility of being introduced to treatment modalities. Case managers were seen as positive motivators and helpful contacts. However, one disenrollee felt that he/she would have been able to connect with social services and treatment providers without case management intervention.

Disenrollee Recommendations for Program Improvement

Several recommendations surfaced through the interviews with disenrollees. Despite their termination from Sparrow they generally spoke positively about the project and suggested that the program worked well. Interviewees acknowledged that more guidance would have been helpful. For instance, more information about the legal consequences of one’s behavior might have averted further involvement with the criminal justice system. By the same token, however, one disenrollee noted that at some point it was his/her responsibility to be held accountable and put effort into meeting program requirements. Interviewees had earlier noted difficulty in scheduling and attending multiple appointments and support group meetings, going to work, and meeting with their probation officers. Most recommended greater ease in accessing resources so that meeting one’s conditions of release and attending to the program requirements would reach a point where the motivation to engage in treatment might outweigh the barriers imposed by increased supervision and constraints on one’s freedom.

Year One Participant Referral, Disenrollment, & Completion Activity

Referral, disenrollment and program completion activity for the period March 16, 2009 through March 30, 2010 is listed below.

	N	Percent
Referrals		
Enrolled	59	77%
Ineligible	18	23%
Total	77	100%
Clients Served by Sparrow		
Disenrolled (~5 due to incarceration)	29	49%
Completed program	17	29%
Still enrolled as of March 30, 2010	13	22%
Total	59	100%

Hiring of staff, negotiating roles and procedures with the Sparrow Team and establishing close communication among partners was time consuming and may have cost the project as much as four months of full operating time. In spite of the lag time involved in getting the Sparrow Project up and running, the program is close to being on track for referrals received in year one (77 out of anticipated 80 – 120).

Potential participants found ineligible for the program were 23% of all referrals, which may indicate assurances of public safety were properly addressed by the eligibility criteria. Of the 59 clients who entered the program, 49% were disenrolled (were unsuccessful in the program), 29% had completed, and 22% were still enrolled. Year one completion rates (n=17) appear to lag significantly behind estimates of 100 completers during a two-year period of time.

The disparity in estimates versus actual completion rates may be attributable to: a) underestimating the time required to provide case management services; b) underestimating the severity of needs for the population served; and c) not fully anticipating the confounding factors related to the interface between criminal justice (guilty versus not-guilty and presumption of innocence), treatment (client-focused, based on needs not necessarily protection of individual freedoms and liberties) and social service (eligibility for services based on criteria that participants often do not meet) sectors. Additionally, Sparrow appears to have significant issues with retaining participants found eligible for the program. Evidence-based practice suggests that completion rates are comparable to similar programs that operate without court imposed sanctions and incentives.¹¹ The rates also suggest adoption of alternative strategies, such as those recommended by the National Association of Drug Court Professionals, could lead to an increase in retention and therefore, completion rates.

¹¹ See Marlowe, D.B. (2009), Evidence-based sentencing for drug offenders: an analysis of prognostic risks and criminogenic needs. *Chapman Journal of Criminal Justice*, Vol.1, p. 178.

Quantitative Analysis of Participant Recidivism Rates – 6 Months after Completion

Records for 17 Sparrow Project participants, who had completed the program within the previous six months, were analyzed for subsequent criminal justice system involvement and recidivism rates. The analysis was completed August 5, 2010 using court docket and DOC databases.

Participants who completed Sparrow were quite variable in terms of age; the youngest was 20 years old when starting the program and the oldest was 59 ($M = 36.0$, $SD = 12.3$). Of those who had successfully completed the program as of March 30, 2010, participants had spent an average of 3.9 months in the program ($SD = 1.8$), with individual program time ranging from one month to eight months. All participant/completers had extensive prior involvement with the justice system. One had a 36-year history of involvement, and only two had been involved for as little as three years. During the years of involvement with the criminal justice system, the 17 participants brought 133 cases before the court. *Three of the 17, or 18%, were arrested in the follow-up period (e.g. six months after completion of the Sparrow program).* Comparison data with eligible, but either not enrolled or disenrolled referrals had not been collected or analyzed at the time of this report.

The table below indicates years of involvement, numbers of cases, and arrest and charge histories for the 17 participants who had successfully completed the Sparrow program through March 30, 2010.

Participant #	Yrs Previous Involve	# Cases Brought to Court	Completion Date	Date of Arrest	Charge 1*	Charge 2*	Disposition	Convictions	Incarcerated Bed Days
1	10	11	9/09	9/25/09	vcr m	false info m		2	3
2	21	12	1/10						
3	13	8	11/09						
4	11	6	11/09						
5	8	9	12/09						
6	17	7	8/09	2/2/10	dls m	pom m		2	
7	15	9	11/09						
8	5	6	11/09						
9	4	4	10/09	11/6/09	vapo m		dismissed	0	3
				1/4/10	vapo m	vcr m	dismissed	1	
10	17	17	9/09						
11	9	7	9/09						
12	3	4	11/09						
13	17	8	11/09						
14	3	3	2/10						
15	7	5	2/10						
16	24	12	3/10						
17	36	5	3/10						

* vcr = violation of conditions of release
dls = driving while license suspended
vapo = violation of abuse prevention order
pom = possession of marijuana

Incarceration Cost Avoidance

A review of sentencing data¹² provided by the Court Administrator's Office, Defense Attorneys and State's Attorney for the first 17 participants sentenced upon completing the Sparrow program during year one's evaluation period indicate that approximately \$211,640.00 has been avoided with respect to the costs of incarceration. The basis for this claim includes the following assumptions:

- \$65.00 per day (DOC out-of-state incarceration rate) may be allocated to cost avoidance when a Sparrow client is not sentenced to the minimum allowable sentence for the offense as charged;
- Since few incarcerated people serve their entire sentence, the minimum expected sentence is a conservative estimate of the costs avoided;
- The number of days contained within the minimum sentence was used to estimate the number of days avoided;
- Since not all clients had minimum sentences stipulated in the record, the average minimum sentence for all other clients was taken as a baseline and then, estimates from the standard error of the total distribution were used to calculate missing bed day calculations for three of the 17 participants. This provides a conservative estimate of the number of bed days that were saved as a result of clients being enrolled in the Sparrow program; and
- Costs avoided do not include a correction for costs incurred for treatment services or supervision.

Using the above assumptions as the basis for analysis, it is estimated that 17 participants would have been incarcerated for a total of 3,256 days. When multiplied by the \$65.00 per day standard identified by DOC, the result in cost avoidance is \$211,640.00. The average cost avoided is \$12,449.00 per participant.

Interim Recommendations Based on Findings to Date

A significant issue for the research team in the initial phase of year one's evaluation was the definition and sorting of issues related to offender protections from self-incrimination. This appears to have been successfully negotiated for this project period, but should be discussed in the future as evaluation efforts continue into year two.

The research questions addressed in year one of the evaluation include: 1) What are the components of the Sparrow model?; 2) Is the Sparrow Project program achieving its intended outcomes?; and 3) What recommendations arise from the evaluation that may assist in the improvement of the Sparrow model's design and implementation?

Data collected indicate the planned components of the model are being implemented. Sparrow appears to focus on voluntary participation in obtaining case management services that are designed to facilitate access to additional social service supports such as vocational training, counseling, addiction and treatment services, and economic supports (e.g. housing, health insurance and living maintenance supports). The operating model requires flexibility and

¹² Sentencing data includes pre-arraignment offers compared with the case resolution post Sparrow completion based upon defense attorney's best estimates.

creativity in approach and sufficient time to support the needs of a functionally impaired population.

To the question of whether Sparrow is achieving its intended outcomes may be answered yes and no. The answer is “yes”, for those who are engaged and retained in treatment, as documented by case manager and participant responses. However, the answer may be “no”, for those who could benefit from treatment alternatives but for whom access is not granted, and for those who are not retained and do not complete the program. Retention and completion rates are low. Initial indicators suggest that recidivism rates for program completers, six months post Sparrow involvement are fairly positive. Case manager and participant data suggest that the program is improving outcomes for clients, not only in terms of bed days saved, but also in lifestyle and behavioral changes that support on-going employment and/or positive family interactions.

Our primary recommendation for program improvement is that the Sparrow Team considers the potential of evidence-based approaches such as those supported by the National Association of Drug Court Professionals to improve the fit between client needs and the specific services and interventions that are adopted. Utilization of screening and triage instruments such as the RANT™ would be followed with targeted interventions as suggested by the criminogenic risk and clinical needs quadrant (see page 4). Judicial oversight of high risk / high needs program participants may be warranted as Vermont aims to build a criminal justice capable system of care for substance abusing and dependent offenders, and reduce the costs associated with incarceration of this population.

Summary of Key Findings and Recommendations

- The Sparrow project was implemented largely as planned, and the team has collaborated successfully to improve outcomes for a number of its clients. Case managers received high marks for their service and dedication.
- Sparrow clients to date are characterized as having high needs and exhibiting high criminogenic risk, according to the RANT™ triage instrument.
- Some clients have faced challenges in appointment scheduling, communication with POs, and maintaining sobriety.
- After its first year of operation, the Sparrow project served 59 offenders, 17 of whom completed the program (29%).
- The Sparrow project is on target with the number of referrals anticipated (N=77).
- Of the 17 participants who completed the program, only three (18%) were rearrested and convicted within six months of completion.
- Project Team members and stakeholders may benefit from training and information about alternative, intermediate sanctions and incentives for offenders for the purpose of effecting behavior change.
- Retention in the Sparrow project is low and could be improved. The Project might consider and adopt evidence-based strategies to address program retention issues. This would provide the project with a wider range of alternative strategies with which to confront the complex array of needs that are often present in this population.

Appendix A – List of Sparrow Case Manager, Participant, and Disenrollee Research Questions

Sparrow Case Manger Research Questions

1. In your opinion, have the outcomes that you expected, been achieved? Please speak to how and why they have or have not.
2. What are the most promising practices that you have observed in working with Sparrow clients in the criminal justice system? What are the most promising practices that you have observed in working with women in the criminal justice system; what practices are missing?
3. What are the biggest challenges in working with this population?
4. What do you think the clients would say about what has worked for them??
5. What are the key components of the treatment model/approaches utilized in your projects?
6. What is the definition of success for Sparrow participants?
7. How do you define engagement in treatment?
8. How do you define retention in treatment?
9. How would you describe the case management approach used by the Sparrow project?
10. How would you describe the intra/inter - agency collaboration utilized in your project?
11. What changes would you recommend to enhance collaboration with community supports?
12. What community supports and wrap-around services are available to clients in each of the projects?
13. What community supports and wrap-around services are needed for clients that are not currently available?
14. What barriers to implementation and positive outcomes still exist, if any?
15. In your opinion, were you to design a program for offenders, what aspects of this model would you replicate or change?

Sparrow Participant Research Questions

1. Please describe the services you have received through the Sparrow Pilot Project?
2. How long have you been a participant?
3. How would you describe the problems you came to the program for help with?
4. In what ways would you say that your needs have been addressed and met through your participation in this project?
5. What are your goals?
6. In what ways has your life changed since you became involved with Sparrow?
7. What challenges or problems have you experienced within the program?
8. What has been most useful to you and why?
9. What has been least helpful and why?
10. What might your closest friends/family members say about the changes you have made since entering and completing the project?
11. Why would you or wouldn't you recommend this program to others with similar issues and needs?

12. If you could make changes to this project, what recommendations would you make to improve the services?
13. Is there anything else that you would want us to know about your experience since becoming involved with Sparrow?

Sparrow Disenrolled Participant Research Questions

1. Please describe any services you have received since you were arraigned?
2. Why did you decide not to participate in the Sparrow Project?
3. What are your goals during the next 6 months? What do you want to happen?
4. In what ways has your life changed since you were arraigned?
5. What challenges or problems have you experienced since you were arraigned?
6. What would be most helpful to you from this point on in helping you to avoid further contact with the criminal justice system?