

## SVORI Project Director Interview—2005

Completed by: \_\_\_\_\_

### Screening and Enrollment

The first questions have to do with how SVORI participants are currently identified and enrolled.		
<p>1. According to the information that was provided or confirmed for the National Portrait, your program eligibility criteria are:</p> <p>Population Type: Male and female juveniles AND Inclusion Criteria: Repeat offenders AND Exclusion Criteria: Severely mentally ill AND Pre-release Facilities: Males exiting AL DYS Mt.Meigs facility and females exiting AL DYS Chalkville facility AND Post-release Geographic Locations: Mobile County.</p> <p>Is this correct?</p>	Y	N
<p>a. <i>[If no]</i> What are the eligibility criteria you are currently using to determine an offender's eligibility for your SVORI program?</p>		
<p>2. Does your agency (DOC or DJJ) maintain an electronic management information system (MIS) or other type of database containing information on offenders under the jurisdiction of the agency?</p>	Y	N
<p>a. <i>[If yes]</i> Do you use the MIS to generate a list of eligible SVORI participants?</p>	Y	N
<p>b. <i>[If yes]</i> Does the MIS contain a "flag" for SVORI participants or otherwise identify offenders who are participating in SVORI?</p>	Y	N
<p>(1) <i>[If no]</i> Does your program maintain a complete electronic list of all individuals who are enrolled in SVORI?</p>	Y	N
<p>3. Do you receive referrals for potential SVORI participants?</p>	Y	N
<p>a. <i>[If yes]</i> Who makes these referrals? Please check <i>all</i> that apply.</p>	<input type="checkbox"/> Facility staff <input type="checkbox"/> Community corrections staff <input type="checkbox"/> Offenders (self-referral) <input type="checkbox"/> Other (specify at left)	

<p>4. Are <b>all</b> offenders who meet the eligibility criteria accepted into the SVORI program (or, if your program is voluntary, invited to participate in the program)?</p>	<p style="text-align: center;">Y                      N</p>
<p>a. <i>[If no]</i> What are some reasons for rejecting an offender who meets all of the eligibility criteria? Please check <i>all</i> that apply.</p>	<p><input type="checkbox"/> Insufficient capacity  <input type="checkbox"/> Offender has highly specialized needs  <input type="checkbox"/> Offender is too much of a risk (likely to fail)  <input type="checkbox"/> Offender’s crime is too notorious  <input type="checkbox"/> Offender will likely not be released by parole board  <input type="checkbox"/> Other (specify at left)</p>
<p>b. <i>[If no]</i> Approximately what proportion of eligible offenders are NOT accepted into the program (or, if your program is voluntary, invited to participate)?</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>
<p>5. Is program participation voluntary?</p>	<p style="text-align: center;">Y                      N</p>
<p>a. <i>[If yes]</i> Approximately what proportion of eligible offenders decide NOT to participate?</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>
<p>b. <i>[If yes]</i> Has this changed during the course of the program, and, if so, how?</p>	<p><input type="checkbox"/> The percentage has not changed  <input type="checkbox"/> The percentage has decreased  <input type="checkbox"/> The percentage has increased</p>
<p>c. <i>[If yes]</i> What do you think is the <b>main</b> reason that offenders decline to participate? Please check <i>only one</i>.</p>	<p><input type="checkbox"/> SVORI requires too much time or effort  <input type="checkbox"/> SVORI interferes with their ability to participate in other programs (e.g., work release)  <input type="checkbox"/> SVORI involves too much oversight post-release  <input type="checkbox"/> They don’t think they need the services  <input type="checkbox"/> Other (specify at left)</p>
<p>6. What are the consequences of dropping out during the pre-release phase? Please check <i>all</i> that apply.</p>	<p><input type="checkbox"/> None  <input type="checkbox"/> Institutional infraction lodged  <input type="checkbox"/> Lose privileges  <input type="checkbox"/> Not be permitted in other programs  <input type="checkbox"/> Lengthen time until release date  <input type="checkbox"/> Other (specify at left)</p>
<p>7. Approximately what proportion of <b>enrolled</b> participants end up dropping out prior to release?</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>



## Assessment Tools

Now we'd like to know about the current assessment practices in your state.

### Pre-Release Assessment Tools

First we'd like to know about any assessments that are currently administered **prior to release**.

Throughout this survey, when we refer to "comparable non-SVORI" offenders, we mean individuals comparable to SVORI participants in terms of age, needs, and risk criteria but who are not actually enrolled in the program.

12. Please indicate which of the following assessments are used with offenders while they are incarcerated prior to release. For each type of assessment, please indicate whether the assessment is used with SVORI offenders only (**S**), comparable non-SVORI offenders only (**C**), both SVORI and comparable non-SVORI offenders (**B**), or none (**N**).

a. Risk assessment	S	C	B	N
b. Needs assessment	S	C	B	N
c. Classification assessment (supervision level)	S	C	B	N
d. Substance abuse assessment	S	C	B	N
e. Medical/dental screening	S	C	B	N
f. Psychology/mental health assessment	S	C	B	N
g. IQ test	S	C	B	N
h. Literacy/educational assessment	S	C	B	N
i. Employment/vocational assessment	S	C	B	N
j. Sex offender assessment	S	C	B	N
k. Other (specify: _____)	S	C	B	N
13. Does your state use the Level of Service Inventory (LSI) or a variation on it (LSI-R, Y-LSI, YLS/CMI, YO-LSI) as part of the <b>pre-release</b> assessment process (during incarceration)?	Y			N

### Post-Release Assessment Tools

14. Please indicate which of the following assessments are used with offenders **after release**. For each type of assessment, please indicate whether the assessment is used with SVORI offenders only (**S**), comparable non-SVORI offenders only (**C**), both SVORI and comparable non-SVORI offenders (**B**), or none (**N**).

a. Risk assessment	S	C	B	N
b. Needs assessment	S	C	B	N
c. Classification assessment (supervision level)	S	C	B	N
d. Substance abuse assessment	S	C	B	N
e. Medical/dental screening	S	C	B	N
f. Psychology/mental health assessment	S	C	B	N
g. IQ test	S	C	B	N
h. Literacy/educational assessment	S	C	B	N

i. Employment/vocational assessment	S	C	B	N
j. Sex offender assessment	S	C	B	N
k. Other (specify: _____)	S	C	B	N
15. Does your state use the Level of Service Inventory (LSI) or a variation on it (LSI-R, Y-LSI, YLS/CMI, YO-LSI) as part of the <b>post-release</b> assessment process (following incarceration)?	Y			N

### Program Focus

The next questions ask about your program's focus, in terms of target population and programming priorities.	
16. Would you say that your program <b>primarily</b> focuses its resources and efforts on working with the offender prior to release (Pre), after release (Post), or emphasizes pre- and post-release equally (Both)? Please check <i>only one</i> .	<input type="checkbox"/> Pre <input type="checkbox"/> Post <input type="checkbox"/> Both
17. For your pre-release programming, is your SVORI program serving all facilities in the state or targeting select facilities only? Please check <i>only one</i> .	<input type="checkbox"/> All facilities <input type="checkbox"/> Select facilities only
18. For your post-release programming, is your SVORI program <b>primarily</b> serving individuals who are returning to all communities within the state or targeting select communities within the state? Please check <i>only one</i> .	<input type="checkbox"/> All communities <input type="checkbox"/> Select communities
19. Is your program <b>primarily</b> serving the general "serious and violent" offender population or targeting a subset of offenders with specific service needs? Please check <i>only one</i> .	<input type="checkbox"/> General "serious and violent" offender population <input type="checkbox"/> Subset of offenders with specific service needs <input type="checkbox"/> Other (specify at left)
20. Would you classify your program's service provision as <b>general</b> , in that you attempt to provide <i>all</i> needed services for participants, or <b>targeted</b> , in that you focus on a <i>specific</i> service or small set of <i>specific</i> services? Please check <i>only one</i> .	<input type="checkbox"/> General service provision <input type="checkbox"/> Targeted service provision (specify at left)
21. Is the post-release phase of your program run <b>primarily</b> by a government agency or a private agency? Please check <i>only one</i> .	<input type="checkbox"/> Government agency <input type="checkbox"/> Private agency
22. Would you say your program is using SVORI funds <b>primarily</b> to fill service gaps, expand existing services, or start a new program? Please check <i>only one</i> .	<input type="checkbox"/> Fill service gaps <input type="checkbox"/> Expand existing services <input type="checkbox"/> Start a new program

<p>23. When thinking about providing programming or services to offenders, what are the top three areas on which your program focuses its resources and efforts? Please rank the three areas by putting a "1" next to most important area, "2" next to second most, and "3" next to the third most. (Rank <i>only three</i>.)</p>	<p><i>Rank</i></p> <p>___ Employment and vocational training</p> <p>___ Physical health</p> <p>___ Mental health</p> <p>___ Substance abuse</p> <p>___ Family support/unification</p> <p>___ Community integration</p> <p>___ Education and skills building</p> <p>___ Other (specify at left)</p>
<p>24. Besides recidivism, what <b>outcomes</b> does your program hope to affect? Please list your program's top three outcomes.</p>	<p>1.</p> <p>2.</p> <p>3.</p>
<p>25. If you were to be given more federal funding for reentry programming, would you use the funds <b>primarily</b> to fill service gaps, expand existing services, start a new program, or serve a population not eligible for SVORI under the current funding guidelines? Please check <i>only one</i>.</p>	<p><input type="checkbox"/> Fill service gaps</p> <p><input type="checkbox"/> Expand existing services</p> <p><input type="checkbox"/> Start a new program</p> <p><input type="checkbox"/> Serve a population not eligible for SVORI under the current funding guidelines</p>
<p>26. If you were to be given more federal funding for reentry programming, which three programming areas would you consider the three most important? Please rank the three areas by putting a "1" next to most important area, "2" next to second most, and "3" next to the third most. (Rank <i>only three</i>.)</p>	<p><i>Rank</i></p> <p>___ Employment and vocational training</p> <p>___ Physical health</p> <p>___ Mental health</p> <p>___ Substance abuse</p> <p>___ Family support/unification</p> <p>___ Community integration</p> <p>___ Education and skills building</p> <p>___ Other (specify at left)</p>

**Services**

Next we'd like to know about services that offenders in your state are currently receiving during incarceration and after release. For both **SVORI** enrollees and comparable **non-SVORI** offenders (individuals comparable to SVORI enrollees in terms of age, needs, and risk criteria but who are not actually in the program), please circle the letter corresponding to (1) the *proportion* who receive or are referred to the service while they are still incarcerated (**pre-release**), (2) whether the **pre-release** service is provided by *faith-based organizations* (yes or no), (3) whether the **pre-release** service is provided by other *community-based organizations* (yes or no), (4) the *proportion* who receive or are referred to the service after they have been released (**post-release**), (5) whether the **post-release** service is provided by *faith-based organizations* (yes or no), and (6) whether the post-release service is provided by other *community-based organizations* (yes or no).

Service Type	Pre-Release				Post-Release																
	Proportion Receiving?		Provided by faith-based organization?	Provided by other community-based organization?	Proportion Receiving?		Provided by faith-based organization?	Provided by other community-based organization?													
	N (None)	F (A few, 1–25%)	U (Just under half, 26–50%)	O (Just over half, 51–75%)	M (Most, 76–99%)	A (All)	Y	N	Y	N	N (None)	F (A few, 1–25%)	U (Just under half, 26–50%)	O (Just over half, 51–75%)	M (Most, 76–99%)	A (All)	Y	N	Y	N	
<b>27. Risk assessment</b>																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
<b>28. Needs assessment</b>																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
<b>29. Treatment/release plan</b>																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
<b>30. AA/NA</b>																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
<b>31. Counseling sessions</b> (e.g., individual or group; please do not include drug education classes)																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
<b>32. Comprehensive drug treatment programs</b> (e.g., residential, therapeutic communities, etc.)																					
a. SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	
b. Non-SVORI	N	F	U	O	M	A	Y	N	Y	N	N	F	U	O	M	A	Y	N	Y	N	

Service Type	Pre-Release				Post-Release			
	Proportion Receiving? N (None) F (A few, 1–25%) U (Just under half, 26–50%) O (Just over half, 51–75%) M (Most, 76–99%) A (All)	Provided by faith-based organization?	Provided by other community-based organization?		Proportion Receiving? N (None) F (A few, 1–25%) U (Just under half, 26–50%) O (Just over half, 51–75%) M (Most, 76–99%) A (All)	Provided by faith-based organization?	Provided by other community-based organization?	
<b>33. Mental health services</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>34. Medical services</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>35. Dental services</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>36. Education/GED/tutoring/literacy</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>37. Vocational training</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>38. Employment referrals/job placement</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>39. Resume and interviewing skills development</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>40. Work release program</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>41. Cognitive skills development/behavioral programming</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>42. Life skills training</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>43. Legal assistance</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	

Service Type	Pre-Release				Post-Release			
	Proportion Receiving? N (None) F (A few, 1–25%) U (Just under half, 26–50%) O (Just over half, 51–75%) M (Most, 76–99%) A (All)	Provided by faith-based organization?	Provided by other community-based organization?	Provided by faith-based organization?	Provided by other community-based organization?			
<b>44. Assistance obtaining identification</b> (e.g., driver’s license, social security card)								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>45. Assistance obtaining benefits and completing applications</b> (e.g., Medicaid, disability benefits)								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>46. Financial support/emergency assistance</b> (e.g., housing, clothing)								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>47. Domestic violence services</b> (e.g., victim and/or perpetrator)								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>48. Parenting skills development</b>								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>49. Family reunification</b>								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>50. Family counseling</b>								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>51. Anger management/violence counseling</b>								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
<b>52. Peer support groups</b>								
a. SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N	N F U O M A	Y N	Y N	Y N	

Service Type	Pre-Release				Post-Release			
	Proportion Receiving? N (None) F (A few, 1–25%) U (Just under half, 26–50%) O (Just over half, 51–75%) M (Most, 76–99%) A (All)	Provided by faith-based organization?	Provided by other community-based organization?		Proportion Receiving? N (None) F (A few, 1–25%) U (Just under half, 26–50%) O (Just over half, 51–75%) M (Most, 76–99%) A (All)	Provided by faith-based organization?	Provided by other community-based organization?	
<b>53. 1-on-1 mentoring</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>54. Housing placements or referrals</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>55. Transportation</b>								
a. SVORI	n/a	n/a	n/a		N F U O M A	Y N	Y N	
b. Non-SVORI	n/a	n/a	n/a		N F U O M A	Y N	Y N	
<b>56. Other service (specify):</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>57. Other service (specify):</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
<b>58. Other service (specify):</b>								
a. SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	
b. Non-SVORI	N F U O M A	Y N	Y N		N F U O M A	Y N	Y N	

<p>59. Of all of the services you indicated (in questions 27–58) are offered in your state, which three have been enhanced the most as a result of SVORI funding?</p>	<p>1.</p> <p>2.</p> <p>3.</p>
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## Program Components

<p>The next set of questions pertains to other components of your program. For each component, we'd like to know how it currently applies to both SVORI participants and comparable non-SVORI offenders. Once again, when we refer to "comparable non-SVORI" offenders, we mean individuals comparable to SVORI participants in terms of age, needs, and risk criteria but who are not actually enrolled in the program.</p>		
60. For any offenders in your state, does a representative from the post-release supervision agency begin working with them <b>while</b> they are still incarcerated?	Y	N
a. <i>[If yes]</i> Does this happen for none, a few (1-25%), just under half (26-50%), just over half (51-75%), most (76-99%), or all of the SVORI enrollees?	<input type="checkbox"/> <b>N</b> (None) <input type="checkbox"/> <b>F</b> (A few, 1-25% ) <input type="checkbox"/> <b>U</b> (Just under half, 26-50% ) <input type="checkbox"/> <b>O</b> (Just over half, 51-75%) <input type="checkbox"/> <b>M</b> (Most, 76-99%) <input type="checkbox"/> <b>A</b> (All)	
b. <i>[If yes]</i> Does this happen for none, a few (1-25%), just under half (26-50%), just over half (51-75%), most (76-99%), or all of comparable non-SVORI offenders?	<input type="checkbox"/> <b>N</b> (None) <input type="checkbox"/> <b>F</b> (A few, 1-25% ) <input type="checkbox"/> <b>U</b> (Just under half, 26-50% ) <input type="checkbox"/> <b>O</b> (Just over half, 51-75%) <input type="checkbox"/> <b>M</b> (Most, 76-99%) <input type="checkbox"/> <b>A</b> (All)	
61. Are any offenders in your state placed on post-release supervision?	Y	N
a. <i>[If yes]</i> How many SVORI participants are on some type of post-release supervision: none, a few (1-25%), just under half (26-50%), just over half (51-75%), most (76-99%), or all?	<input type="checkbox"/> <b>N</b> (None) <input type="checkbox"/> <b>F</b> (A few, 1-25% ) <input type="checkbox"/> <b>U</b> (Just under half, 26-50% ) <input type="checkbox"/> <b>O</b> (Just over half, 51-75%) <input type="checkbox"/> <b>M</b> (Most, 76-99%) <input type="checkbox"/> <b>A</b> (All)	
b. <i>[If yes]</i> How many of the comparable non-SVORI offenders are on some type of post-release supervision: none, a few (1-25%), just under half (26-50%), just over half (51-75%), most (76-99%), or all?	<input type="checkbox"/> <b>N</b> (None) <input type="checkbox"/> <b>F</b> (A few, 1-25% ) <input type="checkbox"/> <b>U</b> (Just under half, 26-50% ) <input type="checkbox"/> <b>O</b> (Just over half, 51-75%) <input type="checkbox"/> <b>M</b> (Most, 76-99%) <input type="checkbox"/> <b>A</b> (All)	
c. <i>[If yes]</i> For the SVORI participants, is the <b>pre-release</b> supervision agent the same person who supervises them <b>post-release</b> ?	Y	N
62. Does your state use any reentry courts to manage returning prisoners?	Y	N
a. <i>[If yes]</i> Are reentry courts used for SVORI offenders (S), comparable non-SVORI offenders (C), or both (B)?	S	C B
b. <i>[If yes]</i> Is the reentry plan imposed by the court as a condition of the offender's release?	Y	N
63. Has your SVORI program created a set of graduated sanctions specifically for SVORI?	Y	N
64. Has your SVORI program created a set of rewards specifically for SVORI?	Y	N

<p>65. Which of the following activities are available to SVORI participants in your state? Please check <i>all</i> that apply.</p>	<input type="checkbox"/> Animal training/care <input type="checkbox"/> Habitat for Humanity <input type="checkbox"/> Community beautification/landscaping <input type="checkbox"/> Community service <input type="checkbox"/> Weed & Seed <input type="checkbox"/> Restitution <input type="checkbox"/> Victim mediation <input type="checkbox"/> Victim awareness/education			
<p>66. Do any offenders in your state participate in “restorative justice” activities?</p>	Y	N		
<p>a. <i>[If yes]</i> <b>Prior to release</b>, are these activities used for SVORI offenders (S), comparable non-SVORI offenders (C), both (B), or none (N)?</p>	S	C	B	N
<p>b. <i>[If yes]</i> <b>After release</b>, are these activities used for SVORI offenders (S), comparable non-SVORI offenders (C), both (B), or none (N)?</p>	S	C	B	N
<p>Items 67 and 68 ask about <b>Community Accountability Panels</b> and <b>Offender-Specific Reentry Teams</b>, respectively. <b>Community Accountability Panels</b> are a group of agency and/or community members who meet regularly to review the status of returning offenders. The offender appears before this board to have his or her case reviewed, and the panel makes recommendations. The members of this panel are the same (for the most part) for all offenders who appear before it. <b>Offender-Specific Reentry Teams</b> are groups consisting of agency representatives (i.e., supervision, service providers) and/or community members. The team composition is unique to each individual offender. The team meets to review the offender’s progress and make recommendations.</p>				
<p>67. For any offenders in your state, are Community Accountability Panels or Boards utilized in the reentry process?</p>	Y	N		
<p>a. <i>[If yes]</i> <b>Prior to release</b>, are Community Accountability Panels used for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?</p>	S	C	B	N
<p>b. <i>[If yes]</i> <b>After release</b>, are Community Accountability Panels used for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?</p>	S	C	B	N
<p>c. <i>[If yes]</i> Which of the following are represented on/members of the Community Accountability Panel? Please check <i>all</i> that apply.</p>	<input type="checkbox"/> Faith-based organization <input type="checkbox"/> Other community service providers <input type="checkbox"/> Law enforcement <input type="checkbox"/> Community Corrections/Supervision <input type="checkbox"/> Corrections agency <input type="checkbox"/> Former prisoner representative <input type="checkbox"/> Victim <input type="checkbox"/> Family members or other community members <input type="checkbox"/> Other (specify at left)			
<p>d. <i>[If yes]</i> Is the composition of the Community Accountability Panel different during the pre- and post-release phases? (Please select “n/a” if a Community Accountability is not used both prior to and after release.)</p>	Y	N	n/a	

68. For any offenders in your state, are offender-specific reentry teams used? (See definition on previous page.)	Y	N
a. <i>[If yes]</i> <b>Prior to release</b> , are Offender-Specific Reentry Teams used for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
b. <i>[If yes]</i> <b>After release</b> , are Offender-Specific Reentry Teams used for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
c. <i>[If yes]</i> What agencies or organizations have representatives on the Team? Please check <i>all</i> that apply.	<input type="checkbox"/> Faith-based organization <input type="checkbox"/> Other community service providers <input type="checkbox"/> Law enforcement <input type="checkbox"/> Community Corrections/Supervision <input type="checkbox"/> Corrections agency <input type="checkbox"/> Former prisoner representative <input type="checkbox"/> Victim <input type="checkbox"/> Family members or other community members <input type="checkbox"/> Other (specify at left)	
d. <i>[If yes]</i> Is the composition of the Offender-Specific Reentry Team different during the pre- and post-release phases? (Please select "n/a" if offender-specific reentry teams are not used both prior to and after release.)	Y	N n/a
69. Does your state use video-conferencing technology to facilitate the involvement of individuals and organizations in the reentry process?	Y	N
a. <i>[If yes]</i> <b>Prior to release</b> , is video-conferencing used to facilitate communication across SVORI partnering agencies, with individual offenders, or for some other reason? Please check <i>all</i> that apply. (If video-conferencing is not used pre-release, please check "n/a.")	<input type="checkbox"/> Across SVORI partnering agencies <input type="checkbox"/> With individual offenders <input type="checkbox"/> Other (specify at left) <input type="checkbox"/> n/a	
b. <i>[If yes]</i> <b>After release</b> , is video-conferencing used to facilitate communication across SVORI partnering agencies, with individual offenders, or for some other reason? Please check <i>all</i> that apply. (If video-conferencing is not used post-release, please check "n/a.")	<input type="checkbox"/> Across SVORI partnering agencies <input type="checkbox"/> With individual offenders <input type="checkbox"/> Other (specify at left) <input type="checkbox"/> n/a	
c. <i>[If yes]</i> Is video-conferencing used for SVORI enrollees (S), comparable non-SVORI offenders (C), or both (B)?	S	C B
70. For prisoners in your state, do any individuals in pre-release facilities attend curriculum-based classroom programs <b>prior to release</b> ?	Y	N
a. <i>[If yes]</i> Is this curriculum completed by SVORI offenders (S), comparable non-SVORI offenders (C), or both (B)?	S	C B



74. For any offenders in your state, are former prisoners routinely involved in the reentry process?	Y	N
a. <i>[If yes]</i> <b>Prior to release</b> , are former prisoners routinely involved for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
b. <i>[If yes]</i> <b>After release</b> , are former prisoners routinely involved for SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
75. Are any offenders in your state offered the option of having a mentor during the reentry process?	Y	N
a. <i>[If yes]</i> <b>Prior to release</b> , are mentors offered to SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
b. <i>[If yes]</i> <b>After release</b> , are mentors offered to SVORI enrollees (S), comparable non-SVORI offenders (C), both (B), or none (N)?	S	C B N
76. Of all the program components covered in this section (questions 60–74), which three have been enhanced the most as a result of SVORI funding?	1.	2. 3.

## Coordination

### Service Coordination

The next set of questions pertains to different methods of service coordination. For each type of service coordination strategy, we'd like to know whether you offer it and the extent to which the strategy has been affected by SVORI.		
77. Does your program provide case management to offenders prior to release?	Y	N
a. <i>[If yes]</i> Please indicate the proportion of SVORI offenders who receive case management during the <b>pre-release</b> period.	<input type="checkbox"/> <b>N</b> (None) <input type="checkbox"/> <b>F</b> (A few, 1-25% ) <input type="checkbox"/> <b>U</b> (Just under half, 26-50% ) <input type="checkbox"/> <b>O</b> (Just over half, 51-75%) <input type="checkbox"/> <b>M</b> (Most, 76-99%) <input type="checkbox"/> <b>A</b> (All)	
b. <i>[If yes]</i> Who provides the pre-release case management for SVORI participants? Please check <i>all</i> that apply.	<input type="checkbox"/> Facility staff <input type="checkbox"/> Grantee agency staff (other than facility staff) <input type="checkbox"/> Faith-based organization <input type="checkbox"/> Other community organization or service provider <input type="checkbox"/> Other (specify at left)	

<p>c. <i>[If yes]</i> Please indicate the proportion of comparable, non-SVORI offenders who receive case management during the <b>pre-release</b> period.</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>
<p>78. Does your program provide case management to offenders after release?</p>	<p>Y N</p>
<p>a. <i>[If yes]</i> Please indicate the proportion of SVORI offenders who receive case management during the <b>post-release</b> period.</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>
<p>b. <i>[If yes]</i> For SVORI participants, is the <b>pre-release</b> case manager the same person who will work with them <b>post-release</b>?</p>	<p>Y N</p>
<p>c. <i>[If yes]</i> Who provides the post-release case management for SVORI participants? Please check <i>all</i> that apply.</p>	<p><input type="checkbox"/> Supervision agency  <input type="checkbox"/> Grantee agency staff (other than supervision agent)  <input type="checkbox"/> Other community organization or service provider  <input type="checkbox"/> Faith-based organization  <input type="checkbox"/> Other (specify at left)</p>
<p>d. <i>[If yes]</i> Please indicate the proportion of comparable, non-SVORI offenders who receive case management during the <b>post-release</b> period.</p>	<p><input type="checkbox"/> <b>N</b> (None)  <input type="checkbox"/> <b>F</b> (A few, 1-25% )  <input type="checkbox"/> <b>U</b> (Just under half, 26-50% )  <input type="checkbox"/> <b>O</b> (Just over half, 51-75%)  <input type="checkbox"/> <b>M</b> (Most, 76-99%)  <input type="checkbox"/> <b>A</b> (All)</p>
<p>79. Does your program use a “continuity of care” model in which a case manager, supervision officer, or service provider is involved with an individual from the pre-release facility to the community?</p>	<p>Y N</p>
<p>a. <i>[If yes]</i> Who provides the continuity of care? Please check <i>all</i> that apply.</p>	<p><input type="checkbox"/> Supervision officer  <input type="checkbox"/> Case manager  <input type="checkbox"/> Service provider  <input type="checkbox"/> Other (specify at left)</p>
<p>b. <i>[If yes]</i> How has the use of this practice changed as a result of SVORI funding? Is there no change (NC) as a result of SVORI, is it a new practice (N), or has the use of the practice been expanded or enhanced (E)?</p>	<p>NC N E</p>
<p>80. Does your program have an individual or set of individuals who work to develop or build service provider networks (sometimes termed a boundary-spanner)?</p>	<p>Y N</p>



### Program Coordination

Think of the primary agencies you work with to serve SVORI offenders	
83. How often does phone or e-mail contact occur between SVORI program staff and the primary agencies?	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Not at all
84. Since SVORI funding began, has the frequency of phone or e-mail contact among the agencies increased, decreased, or stayed the same?	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same
85. How often are meetings held between SVORI program staff and the primary agencies <b>to discuss the quality and content of the overall services provided?</b>	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Not at all
86. Since SVORI funding began, has the frequency of meetings among the agencies discussing the quality and content of the overall services increased, decreased, or stayed the same?	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same
87. How often are meetings held between SVORI program staff and the primary agencies <b>to discuss services to individual SVORI offenders?</b>	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Not at all
88. Since SVORI funding began, has the frequency of meetings among the agencies to discuss services to individual offenders increased, decreased, or stayed the same?	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same
89. How often are meetings held between SVORI program staff and the primary agencies <b>to strategize about the implementation of approaches to serve SVORI offenders?</b> (For example, shared decision-making about offender accountability and how the system will address it.)	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Not at all
90. Since SVORI funding began, has the frequency of meetings to strategize about the implementation of approaches to serve offenders increased, decreased, or stayed the same?	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same
91. How often do SVORI program staff and the primary agencies contact one another to facilitate referrals for SVORI participants?	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input type="checkbox"/> Not at all
92. Since SVORI funding began, has the frequency of agency contact with one another to facilitate referrals for offenders increased, decreased, or stayed the same?	<input type="checkbox"/> Increased <input type="checkbox"/> Decreased <input type="checkbox"/> Stayed the same
93. Please indicate whether you strongly agree (SA), agree (A), neither agree nor disagree (N), disagree (D), or strongly disagree (SD) with each of the following statements about your SVORI program:	
a. A core group of SVORI staff is responsible for handling the day-to-day implementation of program (grant) activities.	SA A N D SD

b. Information sharing about <b>specific offenders</b> across partnering agencies has improved as a result of SVORI.	SA A N D SD
c. Communication across partnering agencies has improved as a result of SVORI.	SA A N D SD
d. Partnering agencies have developed a common vision of reentry as a result of SVORI.	SA A N D SD
e. Partnering agencies have created common goals related to reentry as a result of SVORI.	SA A N D SD
f. SVORI is a collaborative effort among different agencies.	SA A N D SD

### Current Program Status

94. Would you say your SVORI program is fully operational? By “fully operational” we mean that the program is up and running and, although the program may evolve, all of the program components are currently being implemented.	Y N <i>[If no, skip to 94d]</i>
a. <i>[If yes]</i> When would you say your program became fully operational? (month/year)	____/____
b. <i>[If yes]</i> When did you enroll your first participant? (month/year)	____/____
c. <i>[If yes]</i> How long did it take to get your program up and running once <b>all</b> of the federal funds were released?	<input type="checkbox"/> < 3 months <input type="checkbox"/> 3–5 months <input type="checkbox"/> 6–8 months <input type="checkbox"/> 9–11 months <input type="checkbox"/> 12+ months
d. <i>[If no]</i> Please describe what part(s) of your program still need(s) to be implemented and explain the reasons for the delay.	
e. <i>[If no]</i> Provide an estimate of the earliest date by which your program will be fully operational.	Estimate: ____/____
95. How many <b>total</b> SVORI participants had you enrolled by 12/31/04?	Number:
96. How does this number compare with your original projections?	<input type="checkbox"/> Fewer than originally projected <input type="checkbox"/> About the same as originally projected <input type="checkbox"/> More than originally projected
97. How many SVORI participants are currently enrolled in the <b>pre-release</b> phase of your program?	Number:
a. As of what date?	(month/year): ____/____
98. How many SVORI participants are currently enrolled in the <b>post-release</b> phase of your program?	Number:
a. As of what date?	(month/year): ____/____

The next set of questions pertains to issues that you may have encountered regarding recruiting or enrolling SVORI participants.	
99. Please indicate the extent to which you agree or disagree that the following issues have limited the number of offenders you were able to enroll. Please indicate whether you strongly agree (SA), agree (A), neither agree nor disagree (N), disagree (D), or strongly disagree (SD) with each of the following statements:	
a. Not enough offenders are being screened for potential eligibility. (Select "n/a" if your program does not have a screening process.)	SA A N D SD n/a
b. The agency's management information system (MIS) or electronic database does not include the data we need to determine if someone is eligible. (Select "n/a" if your agency does not have an MIS.)	SA A N D SD n/a
c. The agency's MIS is difficult to use or is hard to access. (Select "n/a" if your agency does not have an MIS.)	SA A N D SD n/a
d. We have had difficulty obtaining information on eligible offenders from the facilities. (Select "n/a" if facilities are not involved with the identification of eligible participants.)	SA A N D SD n/a
e. Accurate current information about release dates for potential participants has not routinely been available.	SA A N D SD
f. Accurate current information about post-release plans (e.g., post-release area of residence) has not routinely been available.	SA A N D SD
g. Our program's eligibility criteria have been too stringent.	SA A N D SD
h. Inadequate referrals have been made by staff at the facilities. (Select "n/a" if facility staff are not responsible for making referrals in your program.)	SA A N D SD n/a
i. Facility or agency policies have made it difficult to transfer eligible offenders to other facilities for SVORI programming or to prevent the transfer of SVORI participants to facilities that do not offer SVORI programming. (Select "n/a" if participants are not transferred for programming or if SVORI is offered at all facilities.)	SA A N D SD n/a
j. Offenders have been identified but decline to participate. (Select "n/a" if your program is not voluntary.)	SA A N D SD n/a
k. Offenders have been identified too late to complete pre-release programming (i.e., too close to release date). (Select "n/a" if your program does not provide pre-release programming.)	SA A N D SD n/a
l. We have not had the resources to serve the number of offenders that are identified.	SA A N D SD

m. Please describe any other obstacles to recruitment or enrollment that you have encountered in your program.

### Issues Surrounding SVORI Implementation

100. Please indicate the extent to which you agree or disagree with the following statements about issues that might have arisen regarding SVORI program implementation. Please indicate whether you strongly agree (SA), agree (A), neither agree nor disagree (N), disagree (D), or strongly disagree (SD) with each of the following statements:					
a. We have encountered resistance from...					
(1) top administrators at the facilities.	SA	A	N	D	SD
(2) supervisors at the facilities.	SA	A	N	D	SD
(3) line staff at the facilities.	SA	A	N	D	SD
(4) top administrators at the post-release supervision agency.	SA	A	N	D	SD n/a
(5) supervisors at the post-release supervision agency.	SA	A	N	D	SD n/a
(6) line officers of the post-release supervision agency.	SA	A	N	D	SD n/a
(7) some of the SVORI partner agencies in the community.	SA	A	N	D	SD
(8) members of the community to which SVORI offenders return (the 'not in my backyard' syndrome).	SA	A	N	D	SD
b. Existing agency regulations or policies have made it difficult to implement SVORI.	SA	A	N	D	SD
c. There has been poor communication <i>within</i> agencies.	SA	A	N	D	SD
d. There has been poor communication <i>between</i> agencies.	SA	A	N	D	SD
e. We have experienced turf battles.	SA	A	N	D	SD
f. Funding for reentry is inadequate.	SA	A	N	D	SD
g. The available funding has been poorly allocated.	SA	A	N	D	SD
h. We have had insufficient staff available.	SA	A	N	D	SD
i. Staff training has been inadequate.	SA	A	N	D	SD
j. Staff turnover has been high.	SA	A	N	D	SD
k. There has been inadequate availability of services for referrals we have made.	SA	A	N	D	SD

**Sustainability**

101. Do you consider the current political climate in your community to be favorable to your reentry programming?	Y	N
102. Are there other reentry initiatives under way in your state?	Y	N
103. What are your plans for your reentry program once SVORI funds are no longer available? Please check <i>all</i> that apply.	<input type="checkbox"/> Discontinue the program <input type="checkbox"/> Continue the program <input type="checkbox"/> Expand the program <input type="checkbox"/> Replace the program	
a. <i>[If you plan to continue or expand the program]</i> Do you think that you have sufficient resources to continue the initiative at the current level?	Y	N
b. <i>[If you plan to continue or expand the program]</i> Will your initiative continue beyond the grant period without additional funds from the federal government?	Y	N
c. <i>[If you plan to continue or expand the program]</i> Are you currently working on ways to sustain the initiative beyond the grant period?	Y	N
d. <i>[If you plan to continue or expand the program]</i> For each of the following strategies, please indicate whether (1) you have used or are currently using the strategy (Y/N), and (2) whether you are planning to use (or continue to use) the strategy in the future (Y/N).	Have used/ currently using	Planning to use/ continue using
(1) Pursue additional federal funding	Y N	Y N
(2) Pursue additional state funding	Y N	Y N
(3) Pursue additional funding from local sources	Y N	Y N
(4) Pursue additional funding from other sources (Specify: _____)	Y N	Y N
(5) Reallocate resources within the current agency	Y N	Y N
(6) Reallocate resources across the partnering agencies	Y N	Y N
(7) Communicate with policy makers about the program	Y N	Y N
(8) Conduct a local evaluation	Y N	Y N
(9) Develop a Web site to convey information about the program	Y N	Y N
(continued)	Have used/ currently using	Planning to use/ continue using
(10) Develop printed materials to convey information about the program	Y N	Y N
(11) Work with the media (e.g., press releases, conferences, interviews, newspaper articles)	Y N	Y N

