



ADULT REDEPLOY
ILLINOIS

State Fiscal Year 2017
Annual Report to the Governor and General Assembly
on the Implementation and Projected Impact of

Adult Redeploy Illinois

Submitted by: The Adult Redeploy Illinois Oversight Board

December 2018

ADULT REDEPLOY ILLINOIS
Annual Report on Implementation and Projected Impact

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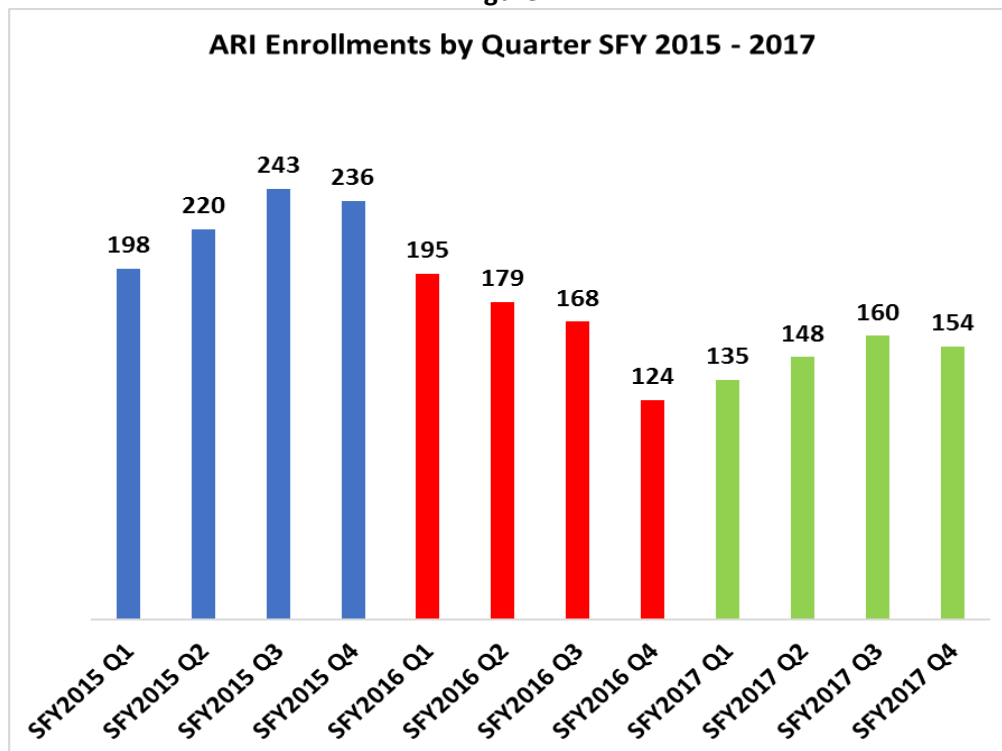
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EXECUTIVE SUMMARY

Adult Redeploy Illinois is a state grant program to incentivize local governments to expand less expensive and more effective community-based alternatives to incarceration. In state fiscal year (SFY) 2017, ARI awarded \$6.4 million in grants to 20 sites covering 39 counties.¹ These sites reported supervising and serving 1,689 people in community corrections programs, including nearly 600 newly diverted to avoid prison, over the course of the year.

SFY17 demonstrated the resilience of the ARI network and the resourcefulness of local sites in maintaining their commitment to ARI goals. Following the year-long budget impasse, the ARI staff and oversight board focused efforts on rebuilding and strengthening site programs that had scaled back services due to the lack of state funds. With the resumption of grant payments in SFY17, enrollments in local diversion programs started returning to past levels.

Figure 1



Source: ICJIA Research and Analysis Unit ARI SFY 2017 data

Reflecting this program renewal, the largest to-date All-Sites Summit was held in May 2017, attended by nearly 200 stakeholders from 53 counties. Sites and potential sites congregated to share successes, challenges, and innovations, as well as learn about gender-responsive programming, trauma-informed care, and effective community engagement. In addition, ARI invested in sites by sponsoring a number of stand-alone training opportunities on the topics of cognitive behavioral therapy and effective supervision practices. Finally, ARI reviewed feedback from sites concerning policy changes that could expand ARI eligibility to all probation-eligible offenses.

¹ 2nd Judicial Circuit (12 counties), 4th Judicial Circuit (Christian & Effingham), 9th Judicial Circuit (6 counties), 20th Judicial Circuit (Monroe, Randolph & St. Clair), Boone County, Cook County (ACT Court & HOPE), DeKalb County – *new*, DuPage County, Grundy County, Jersey County, Kendall County – *new*, Lake County, LaSalle County, Macon County, Madison County, McLean County, Peoria County, Sangamon County, Will County, Winnebago County (Drug Court & TIP Court).

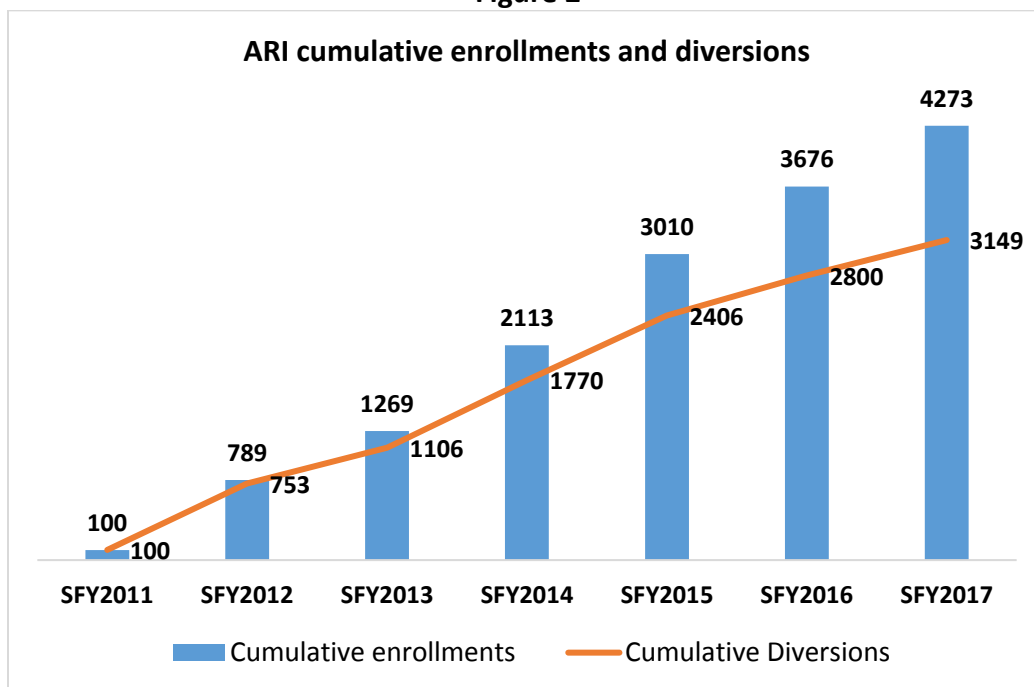
INTRODUCTION

“During his graduation in July 2017, CD shared that his only intention when enrolling in the program was to avoid prison, but in the end it saved his life.

- Excerpt from a success story shared by an ARI-funded program

In SFY17 (July 1, 2016-June 30, 2017), Adult Redeploy Illinois sites diverted individuals with non-violent offenses from prison to more cost-effective local programs combining intensive supervision with services to address their criminogenic needs, all with the goal to reduce recidivism. As *Figure 2* illustrates, the numbers served in the ARI network continued to grow albeit at a slower pace due to the effects of the state fiscal crisis and other operational developments (e.g., sites reaching capacity levels, staff turnover).

Figure 2



Source: ICJIA Research and Analysis Unit ARI SFY 2017 data

With “stopgap” funding in SFY17, ARI reimbursed sites for the prior year’s expenses and awarded continuation funding to the sites.² Overall, sites operated at around 80 percent of expected levels, based on spending, with several sites slowly ramping back up to pre-impasse levels. New enrollments began to rebound following a 30 percent drop in 2016, and sites served more than 1,700 people in the community, keeping them out of expensive prisons. As evidenced in *Appendix I*, local ARI programs continued to generate individual success stories demonstrating the value of this approach.

² Three sites in Kane, Kankakee, and McLean counties left the ARI network during the impasse. McLean resumed its program with ARI funding in November 2017.

PROGRAM DESCRIPTION

Adult Redeploy Illinois (ARI) is a state grant program designed to build and support more effective and less expensive community alternatives to incarceration for people charged with non-violent offenses. Established by the Crime Reduction Act (Public Act 96-0761) and housed at the Illinois Criminal Justice Information Authority (ICJIA), ARI provides grants to local jurisdictions (counties, groups of counties, judicial circuits) to fund problem-solving courts, enhanced probation supervision with services, and other evidence-based interventions responsive to the needs of their communities. As an accountability mechanism, ARI sites agree to reduce the number of people they send to the Illinois Department of Corrections (IDOC) from a locally defined target population by 25 percent, based on the past three years' average.

The goals of ARI are to:

- Reduce crime and recidivism in a way that is cost effective for taxpayers.
- Provide financial incentives to counties or judicial circuits to create effective local-level evidence-based services.
- Encourage the successful local supervision of eligible individuals and their reintegration into the locality.
- Perform rigorous data collection and analysis to assess the outcomes of the programs.

ARI was modeled after the successful juvenile Redeploy Illinois program operating since 2005. ARI was based on the “performance incentive funding” best practice, intended to align fiscal and operational responsibility for defendants charged with non-violent offenses at the local level to produce better public safety at a lower cost.

Adult Redeploy Illinois Oversight Board

The Crime Reduction Act established the Adult Redeploy Illinois Oversight Board (ARI OB) to guide the program and its funding decisions to make the greatest impact. The ARI Oversight Board is comprised of 17 leaders from across the criminal justice system in Illinois and the community at-large. It is co-chaired by the IDOC director and the secretary of the Illinois Department of Human Services (IDHS), representing the critical nature of both supervision and services in reducing crime. *Figure 3* lists the members of the Oversight Board and their affiliations during SFY17.

Figure 3
SFY17 Adult Redeploy Illinois Oversight Board Members

Membership	Appointee
Director of Illinois Department of Corrections, Co-Chair	John Baldwin, Acting Director
Secretary of Illinois Department of Human Services, Co-Chair	Khari Hunt, Chief Operating Officer (designee of James Dimas)
Prisoner Review Board	Craig Findley, Chairman
Office of Attorney General	Brent Stratton, Chief Deputy Attorney General, Criminal Justice
Illinois Criminal Justice Information Authority	John Maki, Executive Director
Sentencing Policy Advisory Council	Kathryn Saltmarsh, Executive Director
Cook County State's Attorney	Emily Cole, Deputy Supervisor, Alternative Prosecution and Sentencing Courts (designee of Kim Foxx)
State's Attorney selected by the President of the Illinois State's Attorneys Association	Jason Chambers, McLean County State's Attorney
State Appellate Defender	Michael Pelletier
Cook County Public Defender	Amy Campanelli (Lori Roper, designee)
Representative of Cook County Adult Probation	Lavone Haywood, Chief Probation Officer, Adult Probation Department, Circuit Court of Cook County
Representative of DuPage County Adult Probation	Kathy Starkovich, Deputy Director, Probation, 18 th Judicial Circuit, DuPage County
Representative of Sangamon County Probation	Michael Torchia, Director, Sangamon County Court Services Department
Representative from non-governmental organization	Mark Ishaug, Chief Executive Officer, Thresholds
Representative from non-governmental organization	Walter Boyd, community representative
Representative from non-governmental organization	Angelique Orr, Director, Phoenix Star, Inc.
Representative from non-governmental organization	Hon. James M. Radcliffe (Ret.), Associate Director, Lawyers Assistance Program

Program Resources

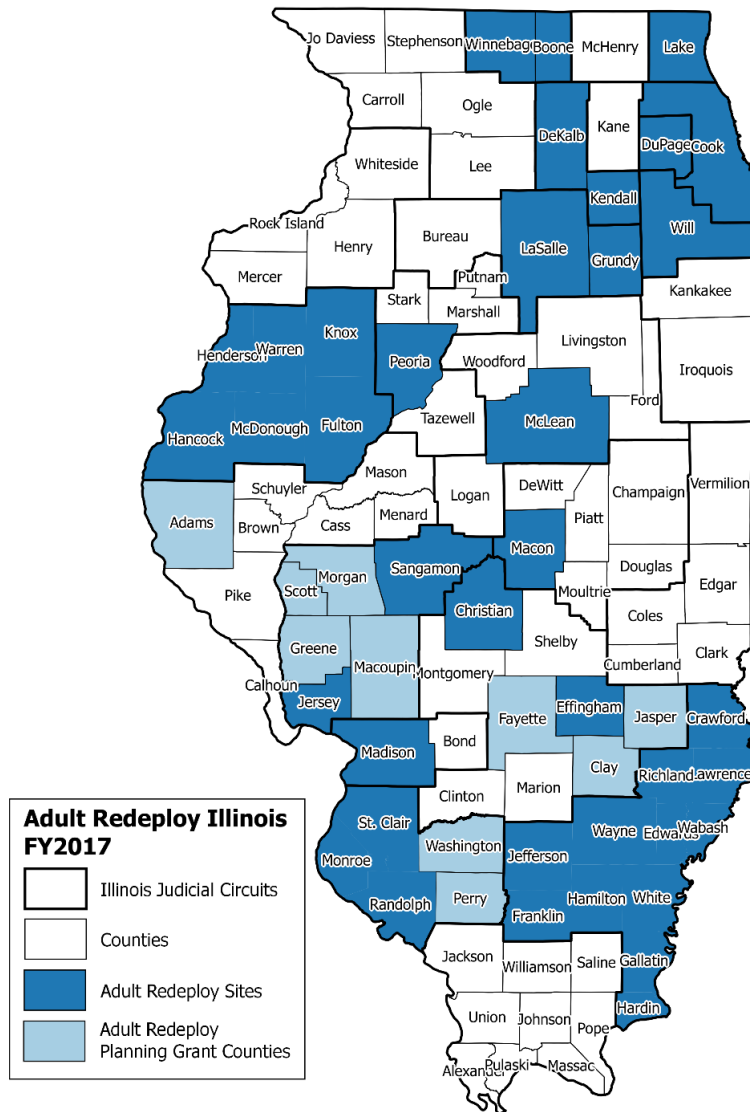
Following a year-long state budget impasse, funding for ARI was included in the stopgap budget signed into law by Gov. Bruce Rauner on June 30, 2016 (Public Act 099-0524: <http://www.ilga.gov/legislation/publicacts/99/PDF/099-0524.pdf>). ARI received nearly \$12.5 million, an amount sufficient to reimburse site expenses incurred in SFY16 and cover SFY17 site budgets as submitted at pre-impasse maintenance levels. The SFY17 grant chart is included as *Appendix C*.

In SFY17 staffing news, ARI hired its first full-time research manager, who began a review of all data elements collected since the start of the program with the goal of assessing the quality and completeness of the data for internal and external evaluation purposes and to offer feedback to sites on their programming.

IMPLEMENTATION UPDATE

In SFY17, the number of counties served by ARI remained steady, despite losing three sites initially due to the impasse, with the return of one site and the addition of two more. ARI awarded \$6.4 million in grants to 20 sites serving 39 counties. These sites reported supervising and serving 1,689 people in community corrections programs during the year.

Figure 4
SFY17 Site Map



January, 2017

Site Descriptions

Each Adult Redeploy Illinois (ARI) site is unique, designed and controlled by local stakeholders. In SFY17, ARI funded 39 diversion programs at 20 sites serving 39 counties. These programs include problem-solving courts (drug courts, mental health courts, and veterans' courts) and intensive supervision probation with services programs for locally defined target populations. Programs funded in SFY17 are described below.

2nd Judicial Circuit

The 2nd Judicial Circuit has been an ARI site since 2013, using funds to develop a drug court program spanning the vast 12-county circuit. Counties served are Crawford, Edwards, Franklin, Gallatin, Hamilton, Hardin, Jefferson, Lawrence, Richland, Wabash, Wayne, and White. Administered by a specialty courts program coordinator and operating out of the 2nd Judicial Circuit Court Services Department, the drug court program integrates risk assessments, clinical assessments, efficient drug testing, a mental health court planning initiative, and a circuit-wide evaluation component. This program is a partnership of the 2nd Judicial Circuit Specialty Courts Committee, University of Illinois Center for Prevention Research and Development, local treatment providers, and other community organizations.

4th Judicial Circuit

The 4th Judicial Circuit joined ARI in 2013 to fund the development of mental health courts in Effingham and Christian counties. The 4th Judicial Circuit ARI program consists of mental health treatment services, such as psychiatric evaluations, medication stabilization, and individual and group counseling. Specialized veterans' treatment tracks are operated in partnership with Veterans Justice Outreach specialists. In addition, Effingham County implements the Communities Restoring Wellness program with a local treatment provider, The Wellness Loft. Partners include Effingham County Probation Department, Christian County Probation Department, Effingham County State's Attorney's Office, Effingham County Public Defender's Office, Christian County Sheriff's Office, Effingham County and Christian County judges, and community providers.

9th Judicial Circuit

The 9th Judicial Circuit received ARI funding in 2013 to expand its drug court model to cover the six counties in the circuit, including Knox (an ARI site since 2011), Fulton (an ARI site since 2011) and McDonough (an ARI site since 2013). Serving Fulton, Hancock, Henderson, Knox, McDonough, and Warren counties, the ARI-funded 9th Judicial Circuit drug court model offers dedicated probation officers with the ability to work non-traditional hours, increased access to substance abuse treatment, and cognitive behavioral therapy (*Thinking for a Change*). The circuit-wide model, administered by a coordinator, is a partnership between the 9th Judicial Circuit Court Services, presiding drug court judges, state's attorneys, public defenders, and treatment providers. The 9th Judicial Circuit drug courts offer participants individualized treatment plans that incorporate cognitive behavioral therapy, incentives and sanctions, and ongoing case management.

20th Judicial Circuit

St. Clair County

St. Clair County joined ARI in 2011 to develop an intensive probation supervision with services program for mentally ill non-violent offenders. The program provides reduced caseloads, cognitive behavioral therapy, trauma therapy, dual-disorder treatment, counseling, drug treatment, medication assistance, and transitional housing. Operating out of the probation department, a jail crisis worker identifies potential participants whose serious mental illnesses may be underlying their criminal behavior. Partners include the 20th Judicial Circuit judiciary, 20th Judicial Circuit Court Services and Probation Department, St. Clair County Mental Health Board, and community providers.

Monroe County

The Monroe County ARI Intensive Probation Program started in 2015 and features a high-risk behavioral health docket with behavioral health services through a partnership with Human Support Services. The program focuses on substance use disorders, including those with co-occurring mental health disorders. It consists of treatment, cognitive behavioral therapy, case management, and ancillary services. Operating out of the 20th Judicial Circuit Court Services Department, the program is a partnership between Monroe County Probation Department, Monroe County State's Attorney's Office, Human Support Services, and other community partners.

Randolph County

Randolph County's Second Chance Citizen Reentry Program consists of a four-phase, 12-month employment program, cognitive behavioral therapy, and community service. Operating out of the 20th Judicial Circuit Court Services Department, the program is a partnership between Randolph County Probation, Human Support Services, and other community partners.

Boone County

Boone County joined ARI in 2013 with the creation of a drug court. The Boone County Drug Court uses evidence-based practices to create an individualized case management plan addressing the risk, needs, and assets of the participant. The partnership includes the drug court judge, drug court coordinator/probation officer, assistant state's attorney, public defender, deputy director of probation, Treatment Alternatives for Safe Communities (TASC), Remedies Renewing Lives, and Rosecrance. The drug court was certified by the Administrative Office of Illinois Courts in 2017.

Cook County

Cook County HOPE Program

The Cook County HOPE probation violation program was initiated in 2011 based on Hawaii's evidence-based Honest Opportunity Probation with Enforcement (HOPE) program. A partnership among the Circuit Court of Cook County, Cook County Adult Probation Department, state's attorney's office, public defender's office, and sheriff's office, and coordinated by the Office of the Chief Judge, this program was designed with a focus on swift, certain, and predictable sanctions for probation violations and increasing access to supportive services, including cognitive behavioral and trauma therapy.

Cook County Access to Community Treatment Court

The Cook County Access to Community Treatment (ACT) Court was planned and executed with ARI funds starting in 2013 to serve people with identified substance abuse treatment needs who are prison-bound. In lieu of prison, participants are sentenced to 18 months of probation with the potential to successfully complete it in 12 months. The ACT Court links participants with community-based behavioral health treatment, housing, case management, and vocational and educational services through individualized case plans. The ACT Court leverages expansion of Medicaid through the Affordable Care Act by enrolling eligible individuals. The ACT Court provides intensive judicial supervision and case management through a team approach and development of a personal relationship with each participant. Compliance is closely monitored, randomized drug testing is given, and program rules and objectives are enforced with evidence-based practices and a range of sanctions and incentives which are fair, proportional, clearly defined, and consistently employed.

DeKalb County

DeKalb County used ARI funds in 2016 to create a mental health court to complement its National Drug Court Institute-recognized mentor drug/DUI court. The treatment courts team includes the DeKalb County Presiding Judge, the DeKalb County State's Attorney, a public defender, a coordinator, research and evaluation team members, a probation officer, a clinical counselor, the DeKalb County Jail Sergeant and a Community Recovery member. Using a four-phase program with a minimum of 24 months' monitoring, the mental health court offers cognitive behavioral therapy within evidence-based treatment modalities including Moral Reconciliation Therapy (MRT). The DeKalb County Mental Health Court was certified by the Administrative Office of Illinois Courts in 2017.

DuPage County

Initiated in 2011, the 18th Judicial Circuit Court's Department of Probation & Court Services (serving DuPage County) operates an ARI-supported probation violator caseload program that provides intensive supervision and support services to rehabilitate offenders with violative behavior. The program incorporates individualized service plans featuring cognitive behavioral therapy, graduated sanctions and incentives, and job skills training. The program engages the 18th Judicial Circuit Court, DuPage County State's Attorney's Office, DuPage County Public Defender's Office, and a range of community service providers.

Grundy County

The Grundy County Treatment Alternative Court (TAC) was initiated with ARI funds in 2015. Operating out of the Grundy County Circuit Court, TAC provides increased judicial supervision and accountability of participants while providing them with expedited access to mental health treatment and increased services. The mental health court program is a partnership between the judiciary, Grundy County State's Attorney's Office, Grundy County Public Defender's Office, Grundy County Probation Department, Grundy County Health Department, Grundy County Sheriff's Office, National Alliance on Mental Illness, and a contracted counselor/administrator.

Jersey County

Jersey County joined ARI in 2011 to develop a rural drug court program. Operating out of the Jersey County Probation Department, the program incorporates a drug court-dedicated treatment track; cognitive behavioral therapy, including *Thinking for a Change* and MRT, and a community restorative justice component. Partners include the Jersey County drug court judge, Jersey County State's Attorney Office, Jersey County Public Defender's Office, and local treatment providers.

Kendall County

Established in 2016 with ARI funds, the Kendall County Drug Court incorporates evidence-based practices to create an individualized case management plan built around the risks, needs, and assets of the participating defendant. The team includes a drug court judge, a drug court coordinator, a sheriff's department representative, a Kendall County Health Department clinician, a state's attorney, a public defender, and a probation officer. The program partners with the Kendall County Health Department to provide substance abuse treatment using evidence-based practices, such as cognitive behavioral therapy. The Kendall County Drug Court was certified by the Administrative Office of Illinois Courts in 2016.

Lake County

Lake County began utilizing ARI funds in 2013 to expand the continuum of care and support relapse prevention in its problem-solving courts. Services included recovery coaching, residential substance abuse treatment, cognitive behavioral therapy (MRT), recovery home placements, and a peer recovery specialist. The enhancements target high-risk, prison-bound participants of the Lake County drug, mental health and veterans' courts. The program is a partnership between the 19th Judicial Circuit Court Division of Adult Probation, Lake County State's Attorney's Office, Lake County Public Defender's Office, Lake County Health Department, Lake County Jail, and other community partners.

LaSalle County

Initiated in 2013, LaSalle County ARI offers an intensive probation supervision program for participants who violate the conditions of their probation and need additional services. Operating out of the 13th Judicial Circuit Probation and Court Services Department, the program includes reduced probation caseloads, cognitive behavioral therapy (MRT), swift sanctions and incentives, increased access to substance use disorder treatment, and employment training. The program is a partnership between the 13th Judicial Circuit Probation and Court Services Department, LaSalle County State's Attorney's Office, and other community partners.

Macon County

Initiated in 2011, the Macon County intensive probation supervision with services program is led by the Macon County State's Attorney's Office. This program is operated by a multi-disciplinary team including probation, the state's attorney, the public defender, and local service providers Behavioral Interventions and Heritage Behavioral Health Center, Inc. A community restorative board and cognitive behavioral therapy (MRT) are vital aspects of this model.

Madison County

Initiated in 2011, Madison County offers comprehensive assessments and services to participants of the Madison County drug, mental health and veterans courts. Operating out of the Madison County Probation Department, the program works with the judiciary, state's attorney's office, public defender's office, Veterans Assistance Commission, and local providers to expand services and provide interdisciplinary team training. Services include recovery coaching, employment/education services, and trauma-informed group and individual treatment interventions.

McLean County

Initiated in 2011, McLean County ARI supports a continuum of local, community-based sanctions and treatment alternatives through the McLean County Intensive Probation Services Unit for non-violent offenders who would otherwise be incarcerated. Funding supports treatment, ancillary services, and enhanced supervision to moderate to high risk/need offenders eligible under the Crime Reduction Act that are not being served in other McLean County probation programs. The program utilizes an intensive probation supervision with services model and employs a spectrum of intermediate sanctions and responses to support probationer success, such as random drug testing, validated risk/need assessment, case planning to match risk/need, motivational interviewing, cognitive behavioral therapy, clinical and trauma evaluation/services, graduated sanctions and incentives, MRT, medication-assisted treatment (MAT), and Carey Guides.

Peoria County

Established in 2013, the Peoria County Probation and Court Services Department operates an ARI-funded intensive supervision probation with services program. The program includes reduced probation caseloads, efficient and rapid drug monitoring, cognitive behavioral therapy (*Thinking for a Change*), substance abuse treatment, education and job training, and community service projects. Partners include the Chief Judge of the 10th Judicial Circuit, Peoria County State's Attorney's Office, Peoria County Office of the Public Defender, Peoria County Office of Probation and Court Services, and local community agencies.

Sangamon County

Operated out of the Sangamon County Court Services Department and initiated in 2013, the Sangamon County ARI drug court program incorporates assessment practices to target high-risk and high-need offenders, cognitive behavioral therapy, substance use disorder treatment, and community partnerships to provide housing and employment services. Partners include the drug court judge, Sangamon County State's Attorney's Office, Sangamon County Public Defender's Office, defense bar, Adult Services – Sangamon County Court Services Department, and local community agencies.

Will County

Will County began receiving ARI funds in 2015 to support its problem-solving courts (drug, mental health, and veterans' courts) and create a specialized court docket for individuals with significant identified risk and needs outside of the problem-solving courts. Operating out of the Will County State's Attorney's Office, the program consists drug and mental health treatment, cognitive behavioral therapy (MRT), medication-assisted treatment (MAT), case management, employment support, and supervision. The program is a partnership between the Will County State's Attorney's Office, Will County Public Defender's Office, Will County Adult Probation Office, Will County Health Department, 12th Judicial Circuit judiciary, Joliet Police Department, and local treatment providers.

Winnebago County

Starting in 2011, Winnebago County used ARI funds to support its drug court and mental health court, known as the Therapeutic Intervention Program (TIP) Court. The court programs engage in a team approach spanning the judiciary, state's attorney's office, public defender's office, probation department, and service providers. The program utilizes evidence-based practices in its problem-solving courts, such as increased drug testing, specialized probation officers, motivational interviewing, recovery coaching, trauma services, cognitive behavioral therapy, family psycho-education, and increased access to residential substance use disorder and behavioral health treatment.

Planning grants

In SFY17, planning grants were awarded to:

- 4th Judicial Circuit
- 7th Judicial Circuit
- 20th Judicial Circuit
- Adams County
- Cook County
- LaSalle County

Many of the planning grants reflected ARI's strategic goal of continuing development of circuit-wide models, focusing on rural expansion.

Site Visits

Three programmatic site visits were conducted during the fiscal year to examine program implementation and ensure the use of evidence-based practices. Visited were:

- Boone County's drug court program (December 2016).
- Lake County's drug and veterans' treatment alternative courts (January 2017).
- Peoria County's intensive supervision program with services (January 2017).

In addition, ICJIA grant monitors conducted 13 ARI site visits during the year to examine grant spending and record-keeping. Visited were the 2nd, 4th, 9th, and 20th Judicial Circuits; Boone, Cook, DeKalb, Lake, Macon, Madison, Peoria, Sangamon, and Will counties.

All-Sites Summit

The 6th Annual All-Sites Summit was held May 17 and 18, 2017, in Bloomington with more than 200 attendees from 53 counties around the state. With a general theme of restoration and reintegration, the summit featured a presentation on sentencing and prison utilization trends, a plenary session with Cabrini Green Legal Aid about records relief, training on emerging issues in the field, such as restorative justice, gender-responsive programming, and veterans' courts, and release of the community involvement toolkit. In addition, participants heard from a policy and practice panel featuring an ARI program graduate who emphasized the need for ARI programming.

Staff facilitated round-table discussions on performance measurement and data collection with site representatives operating drug courts, mental health courts, and intensive supervision probation with services programs. Site representatives reviewed draft logic models and provided input on data that are most critical for management and ongoing service improvement. Feedback was gathered for incorporation in ARI's overall performance measurement and evaluation plan.

Other Projects

Community Involvement Toolkit

In recognition of ARI sites that integrate effective community-oriented elements to enhance programming, staff produced a compilation of examples from the field that became "Bridges to Justice: A Community Engagement Toolkit for Adult Diversion Programs." The aim of the project was to create a roadmap for sites to develop similar efforts, customized to the needs and strengths of their communities.

Information was collected through 21 interviews and six site visits around the state from July 2016 to October 2016. The key questions posed were:

1. What are existing models for community involvement in adult diversion programs?
2. What tools are available for communities seeking to become involved with local adult diversion programs?
3. What are some challenges faced by adult diversion programs to involve the community? How were these challenges overcome?
4. What are the benefits of community involvement in adult diversion programs?

The toolkit features 13 program spotlights demonstrating restorative justice, community support and buy-in, employment supports, involvement of family and loved ones, peer supports, and community celebrations. The toolkit also includes best practices for engaging the community. Download the toolkit from the ARI website at www.icjia.state.il.us/redeploy.

Trainings

Nearly 100 site representatives benefitted from ARI-sponsored regional trainings and webinars to increase competencies in cognitive behavioral therapy interventions, evidence-based community supervision, and remedies for people with criminal records. Notably, the Boone County ARI program arranged for Doug Marlowe, Ph.D., Chief of Science, Law and Policy for the National Association of Drug Court Professionals (NADCP), to give a full-day presentation on problem-solving court best practices. Held in Rockford, the Spring 2017 event was attended by 39 ARI site representatives from seven sites.

Presentation at the American Probation and Parole Association National Training Institute

ARI staff and ARI Oversight Board member Mike Torchia, Director of Sangamon County Probation, presented at the American Probation and Parole Association national training institute in Cleveland, Ohio in Summer 2016. The presentation focused on how Adult Redeploy Illinois programs can be replicated in other jurisdictions, highlighting the importance of a relationship-building approach.

National Criminal Justice Reform Project

ARI joined the steering committee for the National Criminal Justice Reform Project in Illinois. The project supports implementation of Governor's Commission on Criminal Justice and Sentencing Reform recommendations to develop local criminal justice coordinating councils (CJCCs) statewide. CJCCs work to improve strategic planning and delivery of justice and to reduce the inappropriate and inefficient reliance on incarceration.

STRATEGIC PLAN PROGRESS

In SFY17, the ARI Oversight Board and staff continued to work toward the goals outlined in ARI's five-year (2015-2020) strategic plan:



ARI will reduce recidivism for program participants.



ARI programs will be data-driven, evidence-based, and results-oriented.



ARI will foster a strong community corrections system through access to human services that target criminogenic needs.



ARI will support community-led justice efforts consistent with ARI principles.



ARI will develop and maintain adequate resources for optimum program operation and performance.

To date, ARI staff has documented site best practices, expanded technical assistance tools, developed additional circuit-wide models in rural areas, and completed a series of process evaluations. The Oversight Board established new priorities, including building staff, strengthening strategic partnerships within and outside of ICJIA, reviewing eligibility for ARI, aligning with the state's new problem-solving court standards, conducting an outcome evaluation, and supporting the development of criminal justice coordinating councils.

PROJECTED IMPACT

The table in *Figure 5* shows sites' input and output measures for SFY17. Overall, programs experienced a decline in service numbers including new enrollments, as a result of the state's fiscal crisis. Despite the fiscal instability, all but one site achieved their service goals.

Figure 5
ARI enrollments, program outcomes, and diversions by site, SFY17

ARI Site	New Enrollments	Program Outcomes							Reduction Goal
		Active	Exits				Total Served	Total Diverted	
			Successful	Unsuccessful non-IDOC	Unsuccessful IDOC	Other			
2nd Circuit	29	49	9	10	2	0	70	68	19
4th Circuit	7	26	0	0	0	0	26	26	17
9th Circuit	37	53	11	1	8	0	73	65	37
20 th Circuit	10	33	11	10	7	5	66	59	56
Boone	13	17	3	1	3	1	25	22	7
Cook ACT	37	54	5	18	10	0	87	77	43
Cook HOPE	54	114	41	17	10	5	187	177	67
DuPage	60	134	24	8	17	6	189	172	62
Grundy	7	14	0	1	0	0	15	15	9
Jersey	7	9	2	0	9	0	20	11	7
Kendall	9	9	0	0	0	0	9	9	7
Lake	23	37	10	5	12	1	65	53	36
LaSalle	9	33	5	2	5	1	46	41	34
Macon	42	99	22	11	12	2	146	134	60
Madison	22	20	6	3	18	0	47	29	22
McLean	16	8	5	0	0	1	14	14	23
Peoria	47	77	47	0	26	0	150	124	26
Sangamon	42	49	14	3	20	1	87	67	31
Will	64	110	30	2	20	2	164	144	64
Winnebago Drug	44	69	11	31	20	5	136	116	108
Winnebago TIP	18	30	6	21	9	1	67	58	
Total*	597	1044	262	144	208	31	1689	1481	735

*The above numbers were submitted via the ARI database. Additionally, the DeKalb County Mental Health Court, a new ARI site, separately reported enrolling and serving 8 people towards its pro-rated reduction goal of 4.

ARI assesses its impact in terms of numbers of people diverted from prison and the taxpayer savings this represents. In SFY17, sites reported serving 1,689 individuals, of which 208 were sent to prison during the year. The number diverted, who stayed out of IDOC (1,481), includes individuals who were actively supervised and served in ARI programs (1,044), as well as those discharged from the program successfully or given non-prison dispositions (437).

Each diversion to an ARI program represents significant savings and a powerful story of rehabilitation. The average cost of an ARI intervention in the community in SFY17 was approximately \$3,500. In comparison, the SFY17 per capita cost of incarceration in IDOC was \$26,365 and the marginal cost was \$7,776. A sampling of participant success stories is included in *Appendix I*.

EVALUATION

ICJIA released two reports during the fiscal year from a series of evaluations of the 2011-2012 pilot phase of the program.

One report, “*Fidelity to the Intensive Supervision Probation with Services Programs: An Examination of Adult Redeploy Illinois Programs*,” assessed how well four pilot sites with intensive supervision probation with services (ISP-S) programs operated in accordance with national best practices. After reviewing available evaluation literature,³ ICJIA researchers developed a list of nine key components for an ISP-S program. Pilot sites were measured on each component with information collected from staff and stakeholder interviews, client interviews, and program data. Key components include:

- **Key Component #1:** Goals are established for the program overall and for individual probationers.
- **Key Component #2:** The program has a defined, higher-risk, target population.
- **Key Component #3:** The ISP-S program has consistent selection criteria using a standard program acceptance procedure. Uniform selection of participants ensures that probation officer’s skills and resources will be well-utilized and that conclusions drawn about services will be generalizable to the target population.
- **Key Component #4:** Length of treatment conforms to evidence based-practice recommendations on dosage for high-risk offenders.
- **Key Component #5:** The program operates in phases which decrease officer-probationer contact gradually.
- **Key Component #6:** The program has smaller caseloads than standard probation.
- **Key Component #7:** Enhanced surveillance and control mechanisms (electronic monitoring, curfew, community service, drug testing, and financial obligations) are balanced with rehabilitative services (employment, education, and treatment).
- **Key Component #8:** The program can link probationers with appropriate resources and providers, including substance abuse treatment, health care, support in finding employment and housing, and education assistance, if needed.
- **Key Component #9:** Programs keep thorough documentation of relevant data, performing regular reviews and providing feedback to providers on what has been shown to effectively reduce recidivism.

³ Key components drew from Petersilia and Turner’s ISP literature and National Institute for Corrections recommendations for evidence-based practices, based on Andrews and Bonta’s Risk-Need-Responsivity model.

Report findings indicated the pilot sites maintained some fidelity to most of the key components of ISP-S. Researchers concluded each site conducted a program with clear and relevant goals for probationers, used consistent selection criteria, conformed to evidence-based dosage recommendations, and participated in measurement that allowed feedback. Three of four counties also met robust standards for treatment and service provision, according to the report.

The second report, “*Learning about probation from client perspectives: Feedback from probationers served by Adult Redeploy Illinois-funded program models*,” provided insight into the participant experience. Information was gleaned from interviews of 108 ARI participants who were enrolled in 10 drug court, intensive supervision probation with services, and Hawaii Opportunity Probation with Enforcement (HOPE) programs.

Researchers used client feedback on the clarity and fairness of their probation conditions and the effectiveness of sanctions and incentives on compliance. Findings indicated clients agreed with positive statements about probation programs—that the programs helped them, positively impacted their future, and made them better off than other court sanctions. All clients interviewed said the probation program was a better alternative to prison. Most said the programs offered a better lifestyle than prison (99 percent) and two-thirds said the programs were easier to complete than a prison term (66 percent).

These findings were incorporated into a forthcoming evaluation plan intended to assess by program type (ISP-S, drug court, mental health court) how well programs continue to operate according to evidence-based practices and what positive individual outcomes are the result.

Both evaluation reports are available online at www.icjia.state.il.us/redeploy.

CONCLUSION

ARI continued to have a positive impact in SFY17, supporting local efforts to reduce reliance on expensive incarceration and enhance community-based supervision strategies and rehabilitation opportunities. In a challenging fiscal environment, the resilience of the ARI network demonstrated how vital a function the program plays in the state’s criminal justice system. Upcoming efforts will focus on fully utilizing data to inform ongoing improvement to be able to increase impact.

APPENDIX A: Illinois Crime Reduction Act of 2009
730 ILCS 190/20 - Adult Redeploy Illinois

CORRECTIONS

(730 ILCS 190/) Illinois Crime Reduction Act of 2009.

(730 ILCS 190/20)

Sec. 20. Adult Redeploy Illinois.

(a) Purpose. When offenders are accurately assessed for risk, assets, and needs, it is possible to identify which people should be sent to prison and which people can be effectively supervised in the locality. By providing financial incentives to counties or judicial circuits to create effective local-level evidence-based services, it is possible to reduce crime and recidivism at a lower cost to taxpayers. Based on this model, this Act hereby creates the Adult Redeploy Illinois program for offenders who do not fall under the definition of violent offenders in order to increase public safety and encourage the successful local supervision of eligible offenders and their reintegration into the locality.

(b) The Adult Redeploy Illinois program shall reallocate State funds to local jurisdictions that successfully establish a process to assess offenders and provide a continuum of locally based sanctions and treatment alternatives for offenders who would be incarcerated in a State facility if those local services and sanctions did not exist. The allotment of funds shall be based on a formula that rewards local jurisdictions for the establishment or expansion of local supervision programs and requires them to pay the amount determined in subsection (e) if incarceration targets as defined in subsection (e) are not met.

(c) Each county or circuit participating in the Adult Redeploy Illinois program shall create a local plan describing how it will protect public safety and reduce the county or circuit's utilization of incarceration in State facilities or local county jails by the creation or expansion of individualized services or programs.

(d) Based on the local plan, a county or circuit shall enter into an agreement with the Adult Redeploy Oversight Board described in subsection (e) to reduce the number of commitments to State correctional facilities from that county or circuit, excluding violent offenders. The agreement shall include a pledge from the county or circuit to reduce their commitments by 25% of the level of commitments from the average number of commitments for the past 3 years of eligible non-violent offenders. In return, the county or circuit shall receive, based upon a formula described in subsection (e), funds to redeploy for local programming for offenders who would otherwise be incarcerated such as management and supervision, electronic monitoring, and drug testing. The county or circuit shall also be penalized, as described in subsection (e), for failure to reach the goal of reduced commitments stipulated in the agreement.

(e) Adult Redeploy Illinois Oversight Board; members; responsibilities.

(1) The Secretary of Human Services and the Director of Corrections shall within 3 months after the effective date of this Act convene and act as co-chairs of an oversight board to

oversee the Adult Redeploy Program. The Board shall include, but not be limited to, designees from the Prisoner Review Board, Office of the Attorney General, Illinois Criminal Justice Information Authority, and Sentencing Policy Advisory Council; the Cook County State's Attorney; a State's Attorney selected by the President of the Illinois State's Attorneys Association; the State Appellate Defender; the Cook County Public Defender; a representative of Cook County Adult Probation, a representative of DuPage County Adult Probation; a representative of Sangamon County Adult Probation; and 4 representatives from non-governmental organizations, including service providers.

(2) The Oversight Board shall within one year after the effective date of this Act:

(A) Develop a process to solicit applications from and identify jurisdictions to be included in the Adult Redeploy Illinois program.

(B) Define categories of membership for local entities to participate in the creation and oversight of the local Adult Redeploy Illinois program.

(C) Develop a formula for the allotment of funds to local jurisdictions for local and community-based services in lieu of commitment to the Department of Corrections and a penalty amount for failure to reach the goal of reduced commitments stipulated in the plans.

(D) Develop a standard format for the local plan to be submitted by the local entity created in each county or circuit.

(E) Identify and secure resources sufficient to support the administration and evaluation of Adult Redeploy Illinois.

(F) Develop a process to support ongoing monitoring and evaluation of Adult Redeploy Illinois.

(G) Review local plans and proposed agreements and approve the distribution of resources.

(H) Develop a performance measurement system that includes but is not limited to the following key performance indicators: recidivism, rate of revocations, employment rates, education achievement, successful completion of substance abuse treatment programs, and payment of victim restitution. Each county or circuit shall include the performance measurement system in its local plan and provide data annually to evaluate its success.

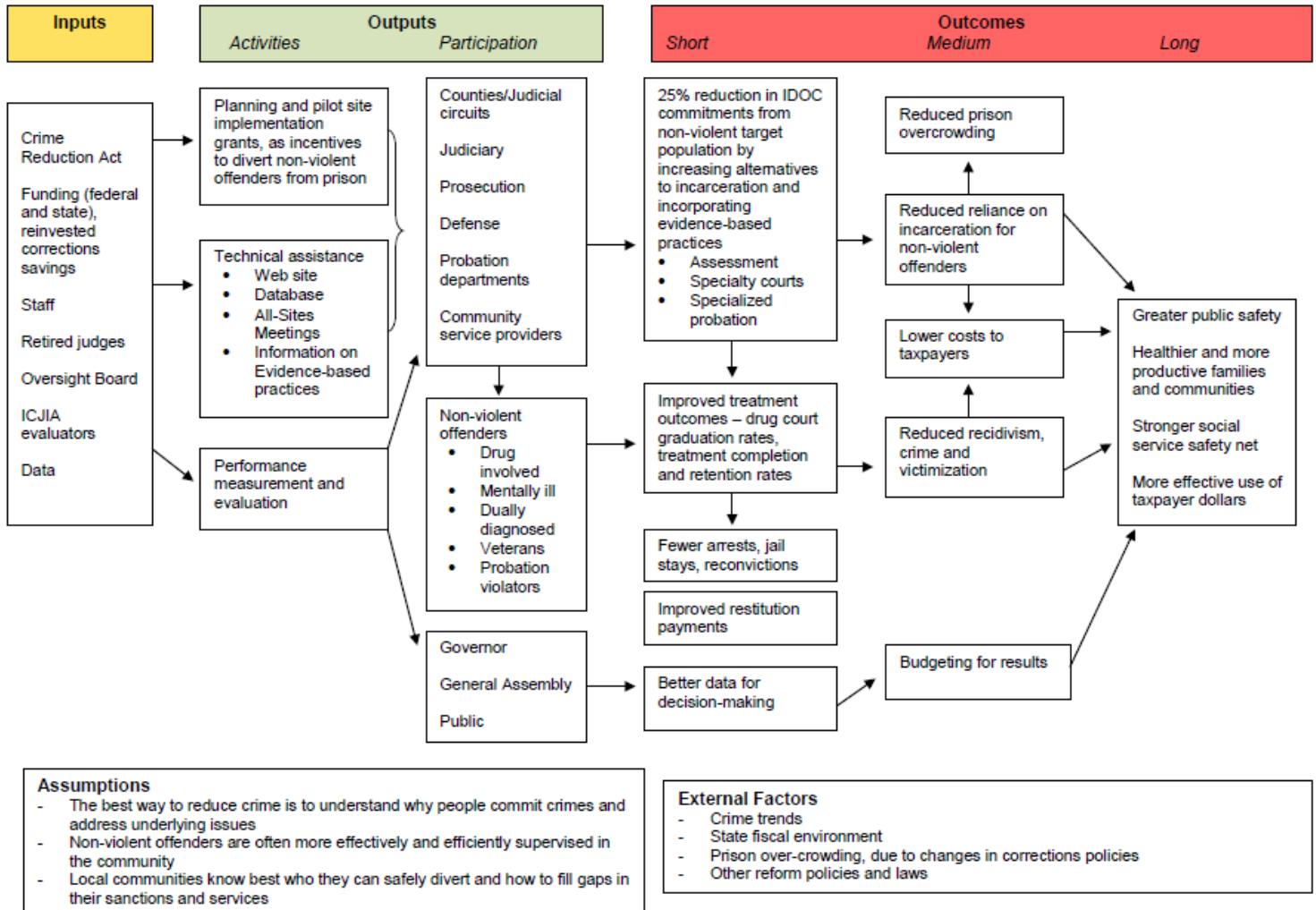
(I) Report annually the results of the performance measurements on a timely basis to the Governor and General Assembly.

(Source: P.A. 96-761, eff. 1-1-10.)

APPENDIX B: ARI Logic Model

Program: Adult Redeploy Illinois Logic Model

Situation: Non-violent offenders cycling through the prison system at great cost but questionable benefit to taxpayers.



APPENDIX C: ARI Grants Chart

SFY17 stopgap budget: \$12,473,300				
	SFY16		SFY17	
	Grant amount*	Grant period	Grant amount	Grant period
2nd Judicial Circuit	\$149,561.23	7/1/15-6/30/16 (I)	\$332,310.80	7/1/16-6/30/17 (I)
4th Judicial Circuit	\$175,724.85	7/1/15-6/30/16 (I)	\$233,900.10	7/1/16-6/30/17 (I/P)
9th Judicial Circuit	\$385,824.58	7/1/15-6/30/16 (I)	\$422,214.00	7/1/16-6/30/17 (I)
20th Judicial Circuit	\$384,547.65	7/1/15-6/30/16 (I)	\$502,355.31	7/1/16-6/30/17 (I)
Adams			\$29,136.00	1/1/17-6/30/17 (P)
Boone	\$28,931.74	7/1/15-6/30/16 (I)	\$114,815.71	7/1/16-6/30/17 (I)
Cook ACT Court	\$629,467.16	7/1/15-6/30/16 (I)	\$1,404,800.01	7/1/16-6/30/17 (I)
Cook HOPE	\$738,592.31	7/1/15-6/30/16 (I)		
DeKalb			\$155,547.33	1/1/17-6/30/17 (I)
DuPage	\$261,968.06	7/1/15-6/30/16 (I)	\$278,843.00	7/1/16-6/30/17 (I)
Grundy	\$61,765.15	7/1/15-6/30/16 (I)	\$95,046.26	7/1/16-6/30/17 (I)
Jersey	\$104,470.74	7/1/15-6/30/16 (I)	\$110,612.00	7/1/16-6/30/17 (I)
Kane	\$138,564.66	7/1/15-12/31/15 (I)		
Kankakee	\$ -	7/1/15-6/30/16 (I)		
Kendall			\$192,228.18	1/1/17-6/30/17 (I)
Lake	\$153,116.92	7/1/15-6/30/16 (I)	\$228,961.00	7/1/16-6/30/17 (I)
LaSalle	\$121,545.80	7/1/15-6/30/16 (I)	\$178,107.00	7/1/16-6/30/17 (I)
LaSalle			\$29,136.00	1/1/17-6/30/17 (P)
Macon	\$321,013.26	7/1/15-6/30/16 (I)	\$365,872.07	7/1/16-6/30/17 (I)
Madison	\$134,094.39	7/1/15-6/30/16 (I)	\$192,347.00	7/1/16-6/30/17 (I)
McLean	\$26,123.30	7/1/15-6/30/16 (I)	\$59,270.00	11/1/16-6/30/17 (I)
Peoria	\$190,927.38	7/1/15-6/30/16 (I)	\$225,275.00	7/1/16-6/30/17 (I)
Sangamon	\$95,997.09	7/1/15-6/30/16 (I)	\$235,098.00	7/1/16-6/30/17 (I/P)
Will	\$281,129.00	7/1/15-6/30/16 (I)	\$302,616.00	7/1/16-6/30/17 (I)
Winnebago	\$651,109.87	7/1/15-6/30/16 (I)	\$733,398.94	7/1/16-6/30/17 (I)
TOTAL	\$5,034,475.14		\$6,421,889.71	

I = Implementation; P = Planning

*Based on reimbursement of actual SFY16 expenses incurred.

APPENDIX D: ARI Client Statistics

State Fiscal Year 2017		
ALL SITES	Number	Percent
Age at enrollment		
<20	57	3%
20-29	612	36%
30-39	469	28%
40-49	308	18%
50-59	204	12%
60+	32	2%
Missing	7	0%
Total	1689	100%
Emerging Adults 17-24	358	21%
Gender		
Male	1148	68%
Female	535	32%
Missing	6	0%
Total	1689	100%
Race		
White	897	53%
African American	643	38%
Hispanic	95	6%
Missing	37	2%
Other	17	1%
Total	1689	100%
Risk Level (LSI-R)		
High	678	40%
Moderate/Medium	742	44%
Minimum/Low	46	3%
Other	3	0%
Missing	220	13%
Total	1689	100%
Admitting Offense		
Property Offense	681	40%
Controlled Substance	491	29%
Other	196	12%
Missing	125	7%
Methamphetamine	91	5%
DUI	47	3%
Cannabis	45	3%
Sex Offense	2	0%

State Fiscal Year 2017		
ALL SITES	Number	Percent
Weapons	3	0%
Drug Paraphernalia	2	0%
Violent	6	0%
Total	1689	100%
Exit Status		
Successful	262	41%
Unsuccessful not IDOC	144	22%
Unsuccessful IDOC	208	32%
Other	31	5%
Total Exits	645	100%
Still active in program	1044	
Total clients served	1689	

APPENDIX E: ARI Performance Measures

Measure	Data elements used to calculate measure	Definition	Interpretation
Progress towards 25 percent reduction	A. Total clients enrolled B. Clients re-sentenced to IDOC from ARI county Reduction = A-B	Number of clients successfully diverted from IDOC, either by successful completion of probation or sanction to lesser alternative	Assesses the site's progress towards diversion goal as specified in grant agreement
Number of clients enrolled in ARI	A. Total clients enrolled in program B. Clients enrolled but not starting services Enrolled = A-B	Referred individuals who were eligible for and enrolled in the ARI program who started services	Assesses the ongoing capacity of the site to enroll clients and provide ARI services
Number of clients screened for ARI, but not enrolled (will vary based on availability of data collected by sites)	A. Total clients screened for eligibility B. Clients ultimately enrolled Screened, not enrolled = A-B	Individuals screened for eligibility but not ultimately enrolled in ARI	Assess the site's screening process to assist in identifying enrollment bottlenecks
Employment rates/changes in employment during program enrollment	A. Client employment status at enrollment B. Client employment status during enrollment C. Client employment status at termination Employment changes = changes from A to B and C	Number of clients who become employed, have no change in employment, or lose employment while in ARI	Indicator of pro-social outcomes for ARI participants
Changes in education level during program enrollment	A. Client education level at enrollment B. Client education level during enrollment C. Client education level at termination Education changes = changes from A to B and C	Number of clients who experience changes in formal education level or have no change in education level	Indicator of pro-social outcomes for ARI participants
Completion of treatment programs/court requirements: cognitive behavioral therapy, substance abuse treatment, mental health treatment, Community Restorative Boards, restitution	A. Total clients enrolled in intervention B. Number of clients active in intervention C. Number of clients successfully completing intervention Completion = A-B Percent successful = C/A	Number of clients who are enrolled in treatment programs and who complete them unsuccessfully and successfully; Percentage of clients enrolled who successfully complete	Indicator of pro-social outcomes for ARI participants; indicator of efficacy of treatment components of ARI program
Prevalence of rule-violating behavior: number of new misdemeanor and felony arrests, number and nature of technical violations/non-compliance	A. Number of reported non-compliance incidents B. Number of new misdemeanor arrests C. Number of new felony arrests	Prevalence of rule-violating behavior	Indicator of use and efficacy of graduated sanctions and changes in compliance levels; indicator of impact on public safety

Measure	Data elements used to calculate measure	Definition	Interpretation
Average number of monthly face-to-face contacts between clients and probation officers	A. Total number of face-to-face contacts with probation per month for all clients B. Total number of “client-months” in the program Average contacts = A/B	Average number of monthly face-to-face contacts between clients and probation officers	Indicator of supervision level at ARI sites; assesses adherence to intensive supervision practices
Rates of successful completion of ARI program	A. Total number of clients terminating ARI program B. Number of clients successfully terminating ARI/probation Percent successful = B/A	Number of clients who successfully complete ARI programs	Assesses how many clients have successfully completed program requirements as determined by ARI site
Rates of unsuccessful termination from ARI program: rate of re-sentence to IDOC, rate of re-sentence to non-prison sanction	A. Total number of clients terminating ARI programs B. Number of clients unsuccessfully terminating ARI/probation C. Number of clients re-sentenced to IDOC D. Number of clients re-sentenced to non-IDOC sanction Percent unsuccessful = B/A Percent IDOC = C/A Percent non-IDOC = D/A	Number of clients who are unsuccessfully terminated from ARI; number of clients re-sentenced to IDOC; number of clients re-sentenced to sanction other than IDOC (jail, other probation, etc.)	Assess how many clients have unsuccessfully terminated from ARI program; Indicator of site ability to divert offenders from IDOC to non-prison alternatives
Rate of LSI-R assessment for clients: percent of clients assessed at high, medium, or low; percent with overrides	A. Number of clients enrolled in ARI program B. Number of clients with a valid LSI-R assessment C. Number of clients assessed at high risk D. Number of clients assessed at medium risk E. Number of clients assessed at low risk F. Number of clients with overrides Rate of assessment = B/A Percent high risk = C/A Percent medium risk = D/A Percent low risk = E/A Percent of overrides = F/A	Number of clients enrolled in ARI who receive a risk assessment upon enrollment or immediately prior to enrollment; number of clients assessed at high, medium, and low risk; number of clients with score overrides	Assesses the use of validated risk assessment instruments at sites; assesses site’s ability to identify and enroll targeted risk groups

APPENDIX F: Performance Measurement Matrix

The following contractual performance measures will be used to review adherence to Adult Redeploy Illinois requirements. Certain conditions related to the performance measures may initiate the need for technical assistance and/or corrective action:

Contractual Performance Measure	Initiator for Corrective Action
<p>Reduction goal:</p> <ul style="list-style-type: none"> • 25% reduction of ARI-eligible IDOC commitments from the identified target population for the grant period. 	<ul style="list-style-type: none"> • Failure to meet or risk of failure to meet the contractual 25% reduction goal for the grant period.
<p>Assessment tools:</p> <ul style="list-style-type: none"> • Risk and needs assessment information utilized for enrollment determinations. 	<ul style="list-style-type: none"> • No assessment tool in use. • Assessment tool not used consistently. • Assessment tool failing to guide enrollment or programming determinations.
<p>Evidence-based practices (EBP):</p> <ul style="list-style-type: none"> • Fidelity of EBP is documented. • 100% of enrolled are receiving EBP. • % high-risk/need engaged in appropriate programming (e.g. substance abuse treatment, mental health treatment, cognitive-behavioral therapy). 	<ul style="list-style-type: none"> • Failure to use EBP (e.g., failure to assess and use information for enrollment and programming, failure to utilize risk-need-responsivity model, failure to use evidence-based programs or curricula). • Failure to address technical assistance recommendations in a timely manner.
<p>Appropriate ARI target/service population:</p> <ul style="list-style-type: none"> • Participants are: <ul style="list-style-type: none"> ○ Non-violent ○ Prison-bound ○ Moderate to high risk • Local programs enroll appropriate target population as planned to match intervention (e.g., high-risk/low-need or high-risk/high-need). 	<ul style="list-style-type: none"> • Analysis of program’s unsuccessful exits shows a lower than pre-determined threshold of program revocations committed to IDOC. • Analysis of LSI-R scores shows program is not serving moderate to high-risk individuals according to pre-determined threshold. • Analysis shows program is excessively overriding LSI-R scores.
<p>Provision of program data as required in contracts:</p> <ul style="list-style-type: none"> • Demographics • Case information • ARI information <ul style="list-style-type: none"> ○ Probation/ARI conditions ○ Drug testing results ○ Diagnosis information ○ Treatment providers ○ Status/termination of conditions ○ Changes in employment/education levels ○ Technical violations, arrests, convictions ○ LSI-R/other assessment information ○ Client contacts 	<ul style="list-style-type: none"> • Failure to provide requested data in the form/detail requested or in a timely manner.

Corrective action plan (CAP) remedies:

1. Training (use of assessment tools, evidence-based practices, data collection, group dynamics)
2. Technical assistance
3. Assessment of mitigating circumstances
4. Sanctions
5. Termination of contract

APPENDIX G: Corrective Action Plan Language

CORRECTIVE ACTION PLAN FOR SITES AT RISK OF NOT MEETING REDUCTION GOALS:

At the end of each quarter, staff from the site and the Department administering the Adult Redeploy Illinois grant will (1) do a formal review of the number of individuals diverted from the Illinois Department of Corrections (using the site's and IDOC's data) and (2) assess whether the number conforms with the site's approved plan in order to achieve the annual 25% reduction included in the plan.

If either site or the state agency administering staff believes that it will not, they shall bring the issue to the next meeting of the Oversight Board (or within the first month of the next quarter, whichever is sooner) with a plan for remediation, designed to avert a penalty charge to the site. The site may choose to send its representatives to the Board meeting to explain the plan, and the Board shall act on the plan immediately upon its receipt.

Should the Board not accept the plan, the site will have the opportunity to modify the plan or withdraw from the program by the next Board meeting (or the second month of the quarter, whichever is sooner). Should the site accept the corrective action plan, the plan shall include a schedule for reporting on the progress of the plan, with regular reports at least once a quarter to the Board, until the Board agrees that the corrective action plan has been successfully implemented.

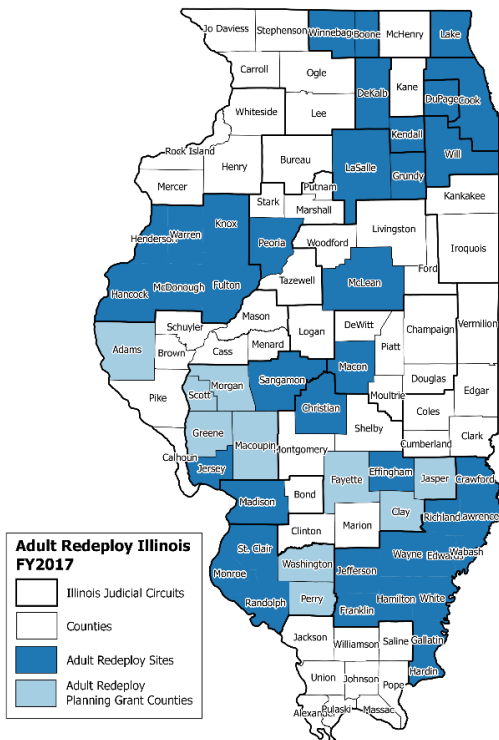
APPENDIX H: ARI Dashboard



GOAL: To safely divert individuals with non-violent offenses from prison to more effective and less expensive community-based supervision and services by providing local funding and technical assistance.

Adult Redeploy Illinois sites use grant funds to design and implement local programs that address participants' risks and needs and leverage their assets (family support, employment) to improve public safety and participant outcomes.

Significant positive impact: 20 local sites operating 39 diversion programs serving 39 counties, and planning in areas covering 10 additional counties	>3,000 total diverted (Jan 2011-June 2017)	\$107.9 million total costs avoided (prison per capita cost less average ARI cost)
	1,265 / 1,214 served diverted last quarter (April-June 2017)	\$5.6 million costs avoided last quarter (April-June 2017)



- ### Key Components
- Assessment of risk, needs and assets
 - Evidence-based and promising practices
 - Performance measurement and evaluation
 - Annual report to Governor and General Assembly

- ### Local Programs
- 27 Problem-solving courts
 - 22 Drug courts
 - 5 Mental health courts (2 with veterans' treatment track)
 - 12 Intensive supervision probation with services programs (1 HOPE probation)

- ### Results
- Reduced prison over-crowding
 - Lower costs to taxpayers
 - End to the expensive and vicious cycle of crime and incarceration

LESS EXPENSIVE
 Cost of a year in prison (FY16): **\$21,900/person**, Cost of average ARI intervention: **\$3,400/person**
MORE EFFECTIVE
 Evidence-based practices utilized by Adult Redeploy Illinois pilot sites can **reduce recidivism up to 20%**.

APPENDIX I: ARI Success Stories

Below is a sampling of the success stories shared by ARI sites for SFY17. The stories have been edited for clarity, conciseness, and to protect the anonymity of the participants.

In January 2014, AB committed several offenses of retail theft. At the time of arrest, she had been engaged in this behavior for 7 years with minimal consequence. She developed an addiction to stealing as it produced a high from the adrenaline rush she experienced when she wasn't caught. During this time period she reports she began to misuse her prescription Xanax. She became mentally unstable and highly impulsive. She was convicted of a class 4 felony and was placed on a two-year term of standard probation in October 2014. AB continued to engage in high risk behaviors and was again arrested for retail theft in 2014. ***Due to these convictions she was not able to maintain employment and her nursing license was revoked.*** In April 2015, AB received a new term of probation, and was accepted into the ARI program. During her treatment she participated and successfully completed: Integrated Dual Disorder Treatment, anger management, Dialectical Behavior Therapy, criminal and addictive thinking, Wellness Recovery Action Plan, leisure group and illness management. She also received individual therapy, nursing and psychiatry services all while working two part-time jobs in the food service industry. AB graduated from the program in November 2016. She remains on probation currently as she is paying her fines and fees. Through the course of the program, she regained her sense of responsibility and has worked hard to reestablish her credit. She has also accepted responsibility for her actions and behaviors and faced the licensing board. ***Through hearings and appeals she was able to get her nursing license reinstated. As of February 2017, she has returned to nursing and is employed as a Registered Nurse at a community facility.***

CD came into the program in 2016 on a class 4 Possession of a Controlled Substance charge, and was actively using heroin at the time of enrollment. He was unemployed and living with his girlfriend at the time he was admitted to the program.

Although he had periods of time where he was doing well in the program, he struggled with several relapses. On the recommendation of his treatment providers, CD started medication-assisted treatment (MAT) and was placed on Vivitrol. Since that time CD regained his sobriety, began working in housekeeping, participates in a Family Enrichment Program, and moved into his own apartment. ***During his graduation in July 2017, CD shared that his only intention when enrolling in the program was to avoid prison, but in the end it saved his life.***

EF was originally sentenced to probation and then resentenced to the Redeploy program for 24 months after violating his original term. He was screened by program staff and during the screening was asked about his motivation to participate in the program in lieu of potential incarceration. EF responded by stating he, "...wanted to get himself in a life situation that is more normal. This is not the way I want to live and I have fallen far from where I want to be." Recognizing the lack of support, EF was experiencing and his relative stability in other areas of his life, he was quickly referred to the Moral Reconciliation Therapy (MRT) group early in his ARI term. EF has established himself as a leader in this forum, initially struggling with being honest in the process, to a place where he is deemed a leader in the group by other participants and group facilitators. In a team meeting, program staff felt it was important to challenge EF to assess the progress he has made and he was asked to write his version of the impact Redeploy has had on his life. EF accepted the challenge of giving back and completed the narrative below:

"My name is EF and this is my story about how I was given the opportunity to be eligible for the Redeploy program. I was arrested for crystal meth possession and spent about a month in jail and was given 2 years of probation and fines. After a short period of time, I stopped going to my probation meetings and didn't return phone calls or mail that was sent to me. After about 6 months on probation and a couple of months of not meeting my probation mandates, I was arrested again for not appearing in court and for not going to meetings with my probation officer. I then served another month in jail but was given another opportunity for probation through a program called 'Redeploy.' It hasn't been easy for me

to get my life back on track but with the support of my friends, given the opportunity to be included in MRT group meetings as well as my desire to become a law abiding citizen that is able to contribute to society, I'm getting there. I spent my first night in a homeless shelter and then walked to the neighboring town where I was able to access funds so I could go to a motel but I only had enough money for 2 nights. I was able to get in touch with a friend who gave me financial support for motel stays, food and a down payment for a used work vehicle. I also had opportunities for work through this friend leading to a place where I finally have been able to be self-reliant. Since then, I have been able to get my own jobs but my financial situation is difficult because I still live in a motel, although I have been able to save money. After a few months in the Redeploy program I was given the opportunity to be involved with the MRT program. From the very first page of the workbook I thought this program would be very helpful to me. ***This program has helped me to be all the things I used to be like.*** I could try and figure out how to write down all the different benefits that this program teaches, like becoming happy and accepting, content, reliable, helpful and a productive asset to society but it would take too long. MRT has really showed me the way to becoming happy again. ***No medication or counselor will ever be able to do what this program has done for me.*** The facilitators have made this program something I look forward to attending every week. They make the MRT program a really good experience. I am up to Step 9 (commitment to change), almost step 10 (maintain positive change). I've got a little way to go yet but I'm almost there."

GH joined the Drug Court Program in March 2016. She moved up to Phase IV in April 2017. GH has been able to gain employment while in the program. She managed to move her family into a larger home that can accommodate her children. She is now able to spend time with her children after school and is volunteering with her daughter's softball team. She manages to work part-time, participate in the Drug Court Program, takes care of medical and psychiatric appointments for her and her family. ***We celebrated her one year sobriety in March 2017. It is the longest reported abstinence for her in over 7 years.*** She has attended NA meetings for the past year and has now found a church that she really enjoys. She even joined a women's group on Wednesday nights and attends faithfully. ***GH is now a productive member of society and her 10 year old daughter loves having her "mom back."*** GH is an inspiration to the other drug court members.

IJ signed her contract in April 2016 and was accepted into the drug court program. Her drug use history includes heroin and cocaine, having had involvement in three inpatient treatment and two outpatient treatment programs in the last 5 years. IJ was on probation prior to drug court and was in jeopardy of violating her probation due to continued drug use. She had expressed feelings of guilt, stating she feels like she has failed to raise her children, instead choosing to use drugs over being with them. IJ had several prior criminal cases and probation sentences. She had struggled with low self-esteem, feeling destined to making poor choices and living a drug/criminal lifestyle. IJ made the decision to accept drug court and was finally expressing she was ready for change. While participating in drug court, she successfully completed intensive outpatient treatment and aftercare. IJ continues to submit to drug tests which have all returned with negative results. She attends Moral Reconciliation Therapy (MRT), Thinking for a Change and Criminal Thinking groups and has been an active participant. ***IJ has also joined in our weekly workout groups and has been faithful to living a more healthful life, losing over 20 pounds.*** She has re-built her relationships with her children and has become a devoted and active mother. She attends their sporting events, teacher conferences and assists with homework and school projects. ***IJ is a leader in weekly groups and an active participant; she wants to someday become a sponsor to other women in the program.*** She has made amazing changes stemming from her positive and open attitude. She is working diligently on learning how to make improvements in her life. ***IJ is confident, building her self-esteem and many times said that she is proud of herself.*** She puts tremendous effort into her groups, Alcoholics Anonymous/Narcotics Anonymous meetings, her workouts and our meetings. These have been key components in her ability to open up to change and progress in her sobriety. IJ is a role model and influence in the sober community. ***She is a positive example as to how our specialty courts work with mothers who struggle with addiction.***
