

Court Services and Offender Supervision Agency *for the District of Columbia*

FY 2015 Budget Request **Summary Statement & Frequently Asked Questions (FAQs)** March 10, 2014

Background

The Court Services and Offender Supervision Agency for the District of Columbia (CSOSA) was established by the National Capital Revitalization and Self-Government Improvement Act of 1997 (the Revitalization Act¹). Following a three-year period of trusteeship, CSOSA was certified as an independent Executive Branch agency on August 4, 2000. CSOSA's mission is to increase public safety, prevent crime, reduce recidivism, and support the fair administration of justice in close collaboration with the community.

The Revitalization Act was designed to provide financial assistance to the District of Columbia by transferring full responsibility for several critical, front-line public safety functions to the Federal Government. Three separate and disparately functioning entities of the District of Columbia government were reorganized into one federal agency, CSOSA. The new agency assumed its probation function from the D.C. Superior Court Adult Probation Division and its parole function from the D.C. Board of Parole. The Pretrial Services Agency for the District of Columbia (PSA), responsible for supervising pretrial defendants, became an independent entity within CSOSA and receives its funding as a separate line item in the CSOSA appropriation. On August 5, 1998, the parole determination function was transferred to the U.S. Parole Commission (USPC), and on August 4, 2000, the USPC assumed responsibility for parole revocation and modification with respect to felons. With implementation of the Revitalization Act, the Federal government took on a unique, front-line role in the day-to-day public safety of everyone who lives, visits or works in the District of Columbia.

The CSOSA appropriation is composed of two programs:

- The Community Supervision Program (CSP), and
- The Pretrial Services Agency (PSA).

CSP is responsible for supervision of offenders on probation, parole or supervised release, as well as monitoring Civil Protection Orders and deferred sentencing agreements; PSA is responsible for supervising pretrial defendants.

Community Supervision Program: The Community Supervision Program (CSP) provides supervision for adult offenders released by the D.C. Superior Court or the U.S. Parole

¹ Public Law 105-33, Title XI

Commission on probation, parole or supervised release. The CSP strategy emphasizes public safety, successful re-entry into the community, and effective supervision through an integrated system of comprehensive risk assessment, close supervision, routine drug testing, treatment and support services, and graduated sanctions and incentives. CSP also develops and provides the Courts and the U.S. Parole Commission with critical and timely information for probation and parole decisions.

The criminal justice system in the nation's capital is complex, with public safety responsibility spread over both local and Federal government agencies. CSP works closely with the D.C. Metropolitan Police Department, D.C. Superior Court, and D.C. Department of Corrections, as well as the Federal Bureau of Prisons, U.S. Parole Commission, U.S. Attorney's Office and U.S. Marshals Service to increase public safety for everyone who lives, visits or works in the District of Columbia. CSP also relies upon the District of Columbia government, local faith-based and non-profit organizations to provide critical social services to the offender population.

In FY 2013, CSP supervised approximately 14,000 offenders on any given day and 23,065 different offenders over the course of the fiscal year. In FY 2013, 8,116 offenders entered CSP supervision; 6,145 men and women sentenced to probation by the Superior Court for the District of Columbia and 1,971 individuals released from incarceration in a Federal Bureau of Prisons facility on parole or supervised release. Parolees serve a minimum of their sentence in prison before they are eligible for parole at the discretion of the U.S. Parole Commission while supervised releasees serve a minimum of 85 percent of their sentence in prison and the balance under CSP supervision in the community.

Offenders typically remain under CSP supervision for the following durations²:

Probation: 21 to 22 months;
Parole³: 11.6 to 12.4 years; and
Supervised Release: 44 to 45 months

On September 30, 2013, CSP supervised 13,693 offenders, including 8,013 probationers and 5,680 on supervised release or parole. Approximately 84 percent were male and 3,076, or 36.7 percent of those eligible for classification⁴, were assessed and supervised by CSP at the highest risk levels (maximum and intensive). Roughly 11,750 of these offenders reside in the District of Columbia,

² Values represent the 95% confidence interval around the average length of sentence for CSP Total Supervised Population (FY 2013).

³ Life sentences, which comprise approximately 12 percent of parole cases, have been excluded.

⁴ Offenders are considered 'eligible' for classification (through an AUTO Screener assessment) if they are in any Active supervision status, in any of the following Monitored supervision statuses -- (Monitored - Halfway Back, Monitored - Hospitalization, Monitored - In Residential Treatment, Monitored - Long Term Care, Monitored - RSC, Monitored - RSAT, Monitored - In SRTP) -- AND are not assigned to an Interstate Out supervision team. On September 30, 2013, there were 8,384 offenders eligible for classification.

representing about 1 in every 44 adult residents of the District⁵. The remaining supervised offenders reside in another jurisdiction and their cases are monitored by CSP.

The number of offenders supervised by CSP decreased in FY 2013 versus prior-year levels. Some factors that may be influencing this decrease are:

- A significant decrease in the number of offenders entering supervision in FY 2013 compared to previous years, possibly due to a decrease in crime (e.g., fewer people getting arrested);
- The closing out by CSP of an increased number of old warrant cases in FYs 2012 and 2013 as a result of a new Warrant Team created by CSP;
- A decrease in the parole population since parole was abolished in the District of Columbia in 2000;
- Quicker closing by CSP of monitored cases and cases past expiration;
- Increased CSP focus on requesting early termination of supervision for compliant offenders; and
- Demographic shifts in Washington, DC.

Despite this recent reduction in the number of offenders under supervision, CSP data suggest that offender supervision and support services needs of high-risk offenders continues to escalate. In addition, CSP must also be prepared to address emergent changes in the criminal justice lanscape (e.g., the proliferation of synthetic drugs and crime spikes) and the potential increase in the offender population over the next few years.

CSP established one outcome indicator and one outcome-oriented performance goal related to public safety that are contained in our FY 2014 – 2018 Strategic Plan:

- 1. Decreasing recidivism among the supervised offender population, and**
- 2. Successful completion of supervision.**

The connection between substance abuse and crime has been well-established. Long-term success in reducing recidivism among drug-abusing offenders, who constitute the majority of individuals under supervision, depends upon two key factors:

1. Identifying and treating drug use and other social problems among the defendant and offender population; and
2. Establishing swift and certain consequences for violations of release conditions.

⁵ U.S. Census Bureau, 2012 Population Estimates, District of Columbia Adults 18 and Over (522,931)

CSP's work to stabilize offenders must consider several dynamic variables. The 8,116 offenders entering CSP supervision in FY 2013 who had a CSP AUTO Screener assessment were characterized by the following:

- 80.4 percent self-reported having a history of substance use;
- 73.8 percent were unemployed (self-reported at intake);
- 40.6 percent reported having less than a high school diploma or GED;
- 30.6 percent had diagnosed or self-reported mental health issues;
- 27.5 percent were aged 25 or younger; and
- 11.8 percent reported that their living arrangement was unstable at intake.

Further, many of our offenders do not have supportive family relationships, particularly those who have served long periods of incarceration. Economic hardship has only increased the difficulties faced by offenders in obtaining employment and housing.

Despite these challenges faced by offenders, in FY 2013, CSP has been successful in seeing that the overwhelming majority of supervised offenders (90.2 percent) are not revoked to incarceration. In addition, 63.2 percent of case closures in FY 2013 were characterized as successful completions of supervision.

CSP recognizes that **recidivism places an enormous burden on the offender's family, the community and the entire criminal justice system.** We carefully monitor revocation rates and other related factors, as well as continually monitor and adjust (as needed) our interventions to meet offender needs. A CSP review of offenders entering supervision in FY 2008 identified that 50.2 percent were re-arrested, and 24.8 percent were revoked to incarceration, within 36 months after their FY 2008 CSP supervision start date. Revoked offenders often return to CSP supervision. Of the 8,116 offenders who entered supervision in FY 2013, 27.5 percent had been under CSP supervision at some point in the 36 months prior to their supervision start date.

CSP research has shown that, compared to the total supervised population, offenders who are incarcerated (recidivate) are more likely to be younger, test positive for drugs, have unstable housing, lack employment, be supervised as part of a mental health caseload, and be assessed by CSP at the highest risk levels. **As such, CSP is continuing to realign existing supervision and offender support services to provide focused interventions for high-risk, mental health and young-adult offenders in an attempt to reduce recidivism and increase successful completion of supervision.** In March 2013, CSP launched a pilot program, which created two new supervision teams dedicated to young adult males. Concurrently, CSP completed an offender supervision workload balancing and realignment process that standardized all caseloads by offender risk, need and supervision type. This resulted in more-balanced caseloads and additional, specialized supervision teams for mental health offenders, a reflection of the increasing mental health need. This accomplishment build upon previous efforts to reallocate and focus resources to increase specialized supervision and support programming for our female, mental health, domestic violence, warrant status and sex offenders.

An emerging challenge for CSP, and all law enforcement entities, is the detection and treatment of synthetic drug use (cannabinoids and cathinones), such as 'K2' and 'Spice', by our offender population. CSOSA is working closely with the Center for Substance Abuse Research (CESAR) staff at the University of Maryland to conduct preliminary analyses of the prevalence of sythetic drug use. CSOSA is also working with local and national criminal justice, health and treatment partners to develop a comprehensive, citywide approach to address this challenge.

CSP is continuing to work closely with our public safety and community partners to focus our remaining resources on the highest-risk offenders to provide effective offender supervision, increase the number of offenders who successfully reintegrate into the community and improve public safety in the District of Columbia.

Pretrial Services Agency (PSA): PSA assists judicial officers in both the Superior Court of the District of Columbia and the United States District Court for the District of Columbia by conducting a risk assessment for every arrested person who will be presented in court and formulating release or detention recommendations based upon arrestee's demographic information, criminal history, as well as substance use and/or mental health information. For defendants who are placed on conditional release pending trial, PSA provides supervision and treatment services that reasonably assure that they return to court and do not engage in criminal activity pending their trial and/or sentencing. The result is that, in the District of Columbia, unnecessary pretrial detention is minimized, jail crowding is reduced, public safety is increased and, most significantly, the pretrial release process is administered fairly.

During FY 2013, PSA supervised 20,184 defendants, including 15,639 defendants who were placed in supervision during the year and 4,545 whose supervision continued from FY 2012.

PSA's mission is to promote pretrial justice and enhance community safety. Consistent with its mission—and the legal status of pretrial defendants—PSA's three key strategic outcomes are:

- ✓ *Minimizing rearrests* among defendants released while pending trial to help ensure public safety.
- ✓ *Reducing failures to appear for scheduled court appearances* to help promote more efficient administration of justice.
- ✓ *Maximizing the number of defendants who remain on release at the conclusion of their pretrial status with no pending requests for removal or revocation at the conclusion of their pretrial status* to encourage defendant accountability.

In FY 2013, PSA exceeded its outcome measure targets:

- ✓ 90 percent of released defendants remained arrest free, exceeding the established target by 2 percent.
- ✓ 88 percent of released defendants also made all scheduled court appearances, 1 percent better than the established target.
- ✓ 87 percent of defendants remained on release at the conclusion of their pretrial status without a pending request for removal or revocation due to non-compliance, 14 percent above the established target.

In FY 2015, PSA will further its strategic objective of being a performance-based, evidence-driven organization that can directly link costs and outcomes. PSA will continue to improve its identification and supervision of defendants who pose a higher risk of pretrial failure, and work with local justice and community partners to expand services and support for persons with substance use disorders and mental health needs. PSA will emphasize evidence-based operational and management techniques and place a high value on human capital to improve quality. Most importantly, PSA will continue its 47-year commitment to providing excellent service to the District of Columbia through a strong sense of mission, a dedicated and professional staff, and collaboration with our justice and community partners.

Mission and Goals (CSOSA: CSP and PSA)

CSOSA's mission is to increase public safety, prevent crime, reduce recidivism, and support the fair administration of justice in close collaboration with the community. Given that 70 percent of convicted offenders serve all or part of their sentence in the community and approximately 85 to 90 percent of pretrial defendants are released to the community, CSOSA's functions of effective supervision of pretrial defendants and convicted offenders, along with effective service to the courts and paroling authority, are critical to public safety. Although CSP and PSA have two distinct mandates, they share common strategic goals for the Agency's management and operations:

- Establish strict accountability and prevent the population supervised by CSOSA from engaging in criminal activity.
- Delivering preventative interventions to the population supervised by CSOSA based on assessed need.
- Support the fair administration of justice by providing accurate information and meaningful recommendations to criminal justice decision-makers.

To achieve these goals, CSOSA has developed strategic objectives encompassing all components of community-based supervision. These strategic objectives include:

- Establish and implement (a) an effective risk and needs assessment and case management process to help officials determine whom it is appropriate to release and at what level of supervision, and (b) an ongoing evaluation process that assesses a defendant's compliance with release conditions and an offender's progress in reforming his/her behavior.
- Provide close supervision of high-risk defendants and offenders, with intermediate graduated sanctions for violations of release conditions and incentives for compliance.
- Provide appropriate treatment and support services, as determined by the needs assessment, to assist defendants in complying with release conditions and offenders in reintegrating into the community.
- Establish partnerships with other law enforcement agencies and community organizations.
- Provide timely and accurate information with meaningful recommendations to criminal justice decision-makers so they may determine the appropriate release conditions and/or disposition of cases.

These strategic objectives are the foundation for CSOSA's structure and operations, as well as the Agency's plans for allocating resources, measuring performance, and achieving outcomes. In terms of both day-to-day operations and long-term performance goals, these strategic objectives guide what CSOSA does. They unite CSP's and PSA's strategic plans, operations, and budgets.

FY 2015 President's Budget Request (CSOSA: CSP and PSA)

The FY 2015 CSOSA President's Budget request (CSP and PSA) totals \$232,568,000: an increase of \$6,084,000 or 2.7 percent over the FY 2014 Enacted.

The \$6,084,000 FY 2015 increase over the FY 2014 Enacted budget consists of net Adjustments to Base (ATB) totaling -\$3,191,000 and \$9,275,000 in requested Program Changes.

CSOSA (CSP and PSA)

- The FY 2015 Budget request for CSP is \$171,723,000, an increase of \$4,454,000 or 2.7 percent over the FY 2014 Enacted budget.
- The FY 2015 Budget request for PSA is \$60,845,000; an increase of \$1,630,000, or 2.8 percent, above the FY 2014 Enacted budget.

FY 2015 President's Budget Request:

| | Thousands of Dollars | | | | | Increase from FY 2014 Enacted | |
|--|----------------------|--------------------|-----------------------------|-----------------|-----------------|-------------------------------|------------|
| | FY 2011 Enacted | FY 2012 Enacted | FY 2013 Enacted | FY 2014 Enacted | FY 2015 Request | Amount | Percent |
| Community Supervision Program – Annual | 153,548 | 153,548 | 145,517 | 167,269 | 171,723 | 4,454 | 2.7 |
| Pretrial Services Agency – Annual | 58,435 | 58,435 | 55,378 | 59,215 | 60,845 | 1,630 | 2.8 |
| Sub-Total - Annual | 211,983 | 211,983 | 200,895 ² | 226,484 | 232,568 | 6,084 | 2.7 |
| Pretrial Services Agency – 3 Year | 0 | 1,000 ¹ | 948 ³ | 0 | 0 | 0 | 0 |
| CSOSA Appropriation Total | 211,983 | 212,983 | 201,843 | 226,484 | 232,568 | 6,084 | 2.7 |

¹ The FY 2012 Enacted budget contained resources to relocate the PSA Drug Lab.

² The FY 2013 Enacted budget reflects a \$11,140,289 reduction below FY 2012 Enacted due to the .2 percent Rescission (\$425,966) contained in FY 2013 Enacted (P.L. 113-6 dated March 26, 2013) and the March 1, 2013 Sequestration (\$10,714,323).

³ The FY 2013 Enacted budget contained continued resources for the PSA Drug Lab relocation (\$947,694 adjusted for Sequestration/Rescission) due to the FY 2013 full-year Continuing Resolution maintaining CSOSA's FY 2012 Enacted authorities.

FY 2014 Enacted & FY 2015 President's Budget Request: Summary of Change:

| | Community Supervision Program | | Pretrial Services Agency | | CSOSA Appropriation | |
|--|-------------------------------|--------------|-----------------------------|--------------|---------------------|--------------|
| | Amount | FTE | Amount | FTE | Amount | FTE |
| FY 2013 Enacted Budget | \$145,517 | 836 | \$55,378¹ | 350 | 200,895 | 1,186 |
| <u>Changes to FY 2014 Base:</u> | | | | | | |
| FY 2013 Sequestration | 7,724 | 42 | 2,940 | 15 | 10,664 | 57 |
| FY 2014 Rent Adjustment | 400 | 0 | 0 | 0 | 400 | 0 |
| FY 2014 Pay Raise | 1,449 | 0 | 387 | 0 | 1,836 | 0 |
| FY 2014 Non-Pay Inflation Increase | 1,080 | 0 | 221 | 0 | 1,301 | 0 |
| Sub-Total, Adjustments to FY 2014 Base | 10,810 | 42 | 3,837 | 15 | 14,647 | 57 |
| <u>FY 2014 Program Changes:</u> | | | | | | |
| CSP Field Unit Relocations | 8,108 | 0 | 0 | 0 | 8,108 | 0 |
| CSP/PSA Physical and IT Security | 2,834 | 2 | 0 | 0 | 2,834 | 2 |
| Sub-Total, FY 2014 Program Changes | 10,942 | 2 | 0 | 0 | 10,942 | 2 |
| FY 2014 Enacted Budget | \$167,269 | 880 | \$59,215 | 365 | \$226,484 | 1,245 |
| <u>Changes to FY 2015 Base:</u> | | | | | | |
| Prior-Year Cost Adjustments | 826 | 22 | 157 | 7 | 983 | 29 |
| Non-Recurring Costs for FY 2014 CSP Field Unit Relocation | -6,518 | 0 | 0 | 0 | -6,518 | 0 |
| Non-Recurring Costs for FY 2014 CSP/PSA Physical and IT Security | -1,594 | 0 | 0 | 0 | -1,594 | 0 |
| FY 2015 Pay Raise and Retirement Benefit Cost Increases | 1,803 | 0 | 609 | 0 | 2,412 | 0 |
| FY 2015 Non-Pay Inflation Increase | 1,262 | 0 | 264 | 0 | 1,526 | 0 |
| Sub-Total, Adjustments to FY 2015 Base | -4,221 | 22 | 1,030 | 7 | -3,191 | 29 |
| <u>FY 2015 Program Changes:</u> | | | | | | |
| CSP Field Unit Relocation | 6,990 | 0 | 0 | 0 | 6,990 | 0 |
| CSP/PSA Contract Drug Treatment | 1,685 | 0 | 600 | 0 | 2,285 | 0 |
| Sub-Total, FY 2015 Program Changes | 8,675 | 0 | 600 | 0 | 9,275 | 0 |
| FY 2015 President's Budget | \$171,723 | 902 | \$60,845 | 372 | \$232,568 | 1,274 |
| Increase from FY 2014 Enacted Budget | +\$4,454 | +22 | +\$1,630 | +7 | +\$6,084 | +29 |
| Percent Increase from FY 2014 Enacted Budget | +2.7% | +2.5% | +2.8% | +1.9% | +2.7% | +2.3% |

¹ The FY 2013 Enacted Budget contained additional three-year (FY 2013 – 2016) resources for the PSA Drug Lab relocation (\$947,694 adjusted for Sequestration/Rescission).

FY 2015 Community Supervision Program: (+\$4,454,000 Net Increase Above FY 2014 Enacted):

| | | |
|---|---------------------|----------------|
| I. Community Supervision Program – Net Adjustments to Base | -\$4,221,000 | +22 FTE |
|---|---------------------|----------------|

FY 2015 Pay Raise and Retirement Benefit Cost Increases **\$1,803,000** **0 positions** **0 FTE**

The FY 2015 President’s Budget requests resources to fund the anticipated FY 2015 pay raise and the increase in agency contributions to Federal Employee Retirement System (FERS) retirement plans.

FY 2015 Non-Pay Inflationary Increases **\$1,262,000** **0 positions** **0 FTE**

The FY 2015 President’s Budget requests \$1,262,000 as an ATB to fund cost increases to non-personnel cost categories, including rents and contracts.

Prior-Year Cost Adjustments **\$826,000** **0 positions** **22 FTE**

The FY 2015 President’s Budget requests \$826,000 as an ATB to fund prior-year cost increases. The request projects an increase in 22 FTE as vacant positions are hired with requested resources.

FY 2014 Field Unit Relocation Adjustment **-\$6,518,000** **0 positions** **0 FTE**

The FY 2014 Enacted Budget contains \$8,108,000 to relocate the 25 K Street, NE, 655 15th Street, NW, 1418 Good Hope Road locations and any resulting staff relocations necessitated by these moves. Only \$1,590,000 of this FY 2014 funding request would remain in our base for FY 2015 to support increased tenant costs at the replacement locations; \$6,518,000 (\$8,108,000 - \$1,590,000) non-recurs in FY 2015.

FY 2014 Security Adjustment **-\$1,594,000** **0 positions** **0 FTE**

The FY 2014 Enacted Budget contains \$2,834,000 to replace CSOSA’s (CSP/PSA) Physical Access Control System and fund Agency cyber-security. Only \$1,240,000 of this request remains in our base for FY 2015 to support continued operations; \$1,594,000 (\$2,834,000 - \$1,594,000) non-recurs in FY 2015.

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| II. Community Supervision Program –Program and Authority Changes | +\$8,675,000 | 0 FTE |
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FY 2015 CSP Field Unit Relocation (300 Indiana Avenue, NW)

For FY 2015, CSP requests a total of **\$6,990,000** to support relocation costs for our 300 Indiana Avenue, NW, field unit.

CSP occupies approximately 51,380 rentable square feet of space at 300 Indiana Avenue. This building is also the headquarters of the D.C. Metropolitan Police Department (MPD) and is directly adjacent to the Superior Court for the District of Columbia (500 Indiana Avenue). The building is owned and managed by the D.C. Government. CSP has occupied this space since the passage of the Revitalization Act in 1997.

Approximately 153 CSP staff performing direct offender supervision for approximately 3,031 offenders currently assigned to this location. CSP occupants at 300 Indiana Avenue include high-risk supervision teams, offender intake operations, drug testing and other critical offender services.

CSP occupies 300 Indiana Avenue under an annual Memorandum of Understanding (MOU) and financial reimbursement with the D.C. Government. CSP currently pays below-market occupancy costs at this location. The D.C. Government has formally notified CSOSA of its plans to renovate the building and no longer have CSOSA as a tenant. Although this relocation has been temporarily placed on-hold by the D.C. Government, the physical conditions are often disruptive and an on-going morale problem. Renovations are a critical concern as the building was built in 1939 and is in need of major infrastructure replacement. The mechanical and electrical systems are well beyond their useful life, not dependable, and routinely breakdown, causing operational disruptions and sub-standard working conditions. In addition, when local emergencies are experienced in D.C. (e.g., demonstrations), it is not unusual for 300 Indiana Avenue to be closed to the public or closed to everyone except the MPD, effectively halting a large portion of CSOSA law enforcement operations for high-risk offenders.

CSP has already obtained a Congressionally-approved Prospectus through GSA to procure space. The prospectus includes expansion space for offender programming. The expansion space for offender programming may be most effectively implemented at locations other than the 300 Indiana replacement space. Due to the advance planning requirements for such a move, CSP requires FY 2015 resources to fund the relocation of staff in FY 2016.

Of the requested funding to support this initiative in FY 2015, \$3,822,000 will be requested for FY 2016 to support anticipated increased annual occupancy costs at the new location. \$3,168,000 of the FY 2015 request will be non-recurred in FY 2016.

FY 2015 CSP Contract Treatment and Transitional Housing

CSP requests **\$1,685,000** in FY 2015 resources to restore our appropriated Treatment and Transitional Housing budget to FY 2011 levels (\$14,978,000).

Substance abuse treatment and transitional housing are integral components of the Agency's strategy of providing offenders with appropriate treatment and support services to assist reintegration into the community. It is critical that CSP address the substance abuse and housing needs of high-risk offenders in a timely manner in order to stabilize the offender's risk and support successful reintegration. Failure to immediately address treatment and housing needs increases the likelihood of re-offending and supervision failure. CSP research of offender outcomes has shown that, compared to the total supervised population, offenders who are incarcerated (recidivate) are more likely to test positive for drugs, have unstable housing and be assessed by CSP at the highest risk levels. Finally, research has shown that funds spent on offender treatment and housing is cost beneficial when compared to alternatives, such as crime and incarceration.

Over 30 percent of the offenders entering CSP supervision each fiscal year are persistent drug users⁶ requiring substance abuse treatment. Of the 8,116 offenders who entered CSP supervision in FY 2013, 2,477 (30.5 percent) were classified by CSP as persistent drug users; 1,151 of these persistent drug users were assessed and supervised by CSP at the highest risk levels (maximum and intensive combined). In addition, approximately nine (9) percent of our daily supervised offender population lives in temporary or emergency housing; most of whom live in homeless shelters or have no fixed address.

In FY 2012, CSP reduced our appropriated Treatment and Transitional Housing budget from \$14.978M to \$13.293M. In FY 2013, due to Sequestration, CSP's Contract Treatment and Transitional Housing budget was further reduced by an additional \$3.305M to \$9.988M. As a result of budget reductions and cost increases, substance abuse treatment placements decreased by 31 percent. The FY 2014 Enacted Budget restores the Sequestration reductions, thereby increasing CSP's Treatment and Transitional Housing budget to FY 2012 enacted levels.

With the additional treatment and transitional housing resources requested in the FY 2015 President's Budget, CSP can meet the substance abuse treatment need of less than half of the high-risk, persistent drug users entering supervision in FY 2013.

FY 2015 Authority for Offender Incentives

CSOSA requests authority to provide offenders and defendants with incentives for successfully complying with terms of supervision. CSOSA requests authority to purchase incentive items with appropriated funds and receive in-kind donations (gifts) of incentive items for distribution to eligible offenders and defendants.

⁶ Persistent drug users are defined as offenders who tested positive for drugs (excluding synthetic drugs and excluding positive tests for alcohol) on three or more occasions during the fiscal year of intake to supervision.

Pretrial Services Agency: (+\$1,630,000 Increase Above FY 2014 Enacted)

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| I. Pretrial Services Agency – Adjustments to Base | +\$1,030,000 | 7 FTE |
|--|---------------------|--------------|

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| FY 2015 Pay Raise and Retirement Benefit Cost Increases | \$609,000 | 0 positions | 0 FTE |
|--|------------------|--------------------|--------------|

The FY 2015 PB requests resources to fund the anticipated FY 2015 pay raise and the increase in agency contributions to Federal Employee Retirement System (FERS) retirement plans.

| | | | |
|---|------------------|--------------------|--------------|
| FY 2015 Non-Pay Inflation Increase | \$264,000 | 0 positions | 0 FTE |
|---|------------------|--------------------|--------------|

The FY 2015 PB requests resources to fund projected cost increases in non-personnel cost categories including rent, supplies, contracts, materials, equipment, and utilities.

| | | | |
|------------------------------------|------------------|--------------------|--------------|
| Prior-Year Cost Adjustments | \$157,000 | 0 positions | 7 FTE |
|------------------------------------|------------------|--------------------|--------------|

The FY 2015 PB requests resources to fund prior-year cost adjustments. The request projects an increase in 7 FTE as vacant positions are hired with requested resources.

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|---|-------------------|--------------|
| II. Pretrial Services Agency – Program changes | +\$600,000 | 0 FTE |
|---|-------------------|--------------|

PSA requests **\$600,000** in FY 2015 resources to restore its appropriated Contract Drug Treatment budget to the FY 2011 level (\$2.3M).

In FY 2012, PSA reduced its Contract Drug Treatment budget from \$2.3M to \$1.7M as a result of two fiscal years of flat budgets and continued cost increases. In FY 2013, due to Sequestration, PSA’s Contract Drug Treatment budget was reduced by an additional \$400K to \$1.3M. The FY 2014 Enacted Budget restores the Sequestration reductions, thereby increasing PSA’s Contract Drug Treatment budget to the FY 2012 enacted level.

Since receiving the FY 2014 Enacted Budget in January 2014, PSA has begun to restore its Contract Drug Treatment program back to the FY 2012 level. While this funding level will help to minimize many of the adverse impacts experienced in FY 2013 as a result of the Sequestration Order, the recent and expected demand for treatment services by the defendant population can no longer be met at this same funding level.

Of the 1,800 defendants who require intensive substance use disorder treatment services each year, approximately 40 percent require residential treatment, while the remaining 60 percent require intensive outpatient treatment. PSA’s in-house treatment program meets a fraction of this demand by serving a large percentage of defendants in need of intensive outpatient services. The Agency relies on contract drug treatment funding to meet the need for residential, as well as intensive outpatient treatment service needs that exceed its in-house treatment capacity.

Additionally, in FY 2013, 597 defendants charged with an impaired driving offense (e.g., driving under the influence, driving while intoxicated) were assessed to need treatment services. While PSA administers supervision and drug testing services for these defendants, PSA cannot deliver or provide treatment services for this population. In these cases, PSA is forced to rely on self-pay and local government sources to meet the treatment needs of these defendants. While most of these defendants are eventually placed in some level of treatment, defendants typically encounter significant delays in securing those placements, are provided services at a lower clinical level than that identified in the assessment, and have no way of providing PSA information relative to the quality of care or their compliance with program requirements.

This increase in treatment funding will allow PSA to place more defendants into appropriate treatment services, thereby increasing the likelihood of successful completion of pretrial supervision. If PSA does not receive the requested increase, the impacts will be similar to what resulted in FY 2013 – placement delays, modified treatment services, increased use of pre-treatment services, and some defendants not receiving recommended treatment services. Some defendants in need of treatment will be required to seek services through the District of Columbia Addiction Prevention and Recovery Administration, which has experienced budget reductions in recent years that have significantly reduced the availability of treatment. In addition, without the increase, PSA's ability to support the successful Drug Court and Mental Health Community Court will be significantly impaired.

CSOSA (CSP and PSA) Frequently Asked Questions (FAQs)

1. How many offenders and defendants are under CSOSA's supervision?

In FY 2013, CSP monitored or supervised approximately 14,000 offenders on any given day, including offenders on probation, parole or supervised release, as well as monitoring Civil Protection Orders and deferred sentencing agreements.

Of the average daily supervised population, 36 percent were supervised as part of a specialized supervision caseload (e.g., sex offender, mental health and domestic violence), 16 percent were female and over 20 percent were under the age of 25. Approximately 37 percent of eligible offenders were assessed, classified and supervised at the highest risk levels (maximum and intensive).

Defendants are placed into PSA supervision programs during the pretrial release period based on the release conditions ordered by the Court. In FY 2013, PSA supervised 20,184 defendants, including 15,639 defendants who were placed in supervision during the year and 4,545 whose supervision continued from FY 2012.

2. What is the duration that offenders and defendants are supervised by CSOSA?

The period of supervision varies according to the individual's status. CSP parolees are typically under supervision for 12 years; supervised releasees for almost four years; and CSP probationers for two years.

The length of pretrial supervision varies, since it is a function of the time needed to adjudicate a criminal case. During FY 2013, defendants under PSA supervision spent an average of 107 days on supervision, which is three fewer days than the FY 2011 average. PSA attribute this reduction to decreased case filings in the DC Superior Court (an 11.8% decrease between 2011 and 2012) and U.S. District Court (13.3%), which means that cases are being adjudicated more quickly than in prior years.

3. How many offenders/defendants entered CSOSA supervision in FY 2013?

In FY 2013, 8,116 offenders entered CSP supervision; 6,145 men and women sentenced to probation by the Superior Court for the District of Columbia and 1,971 individuals released from incarceration in a Federal Bureau of Prisons facility on parole or supervised release. In FY 2013, approximately 67 percent of prison releases transitioned directly from prison to CSP supervision, bypassing a BOP Residential Re-entry Center (also known as halfway house).

In FY 2013, PSA supervised 20,184 defendants, including 15,639 defendants who were placed into supervision during the year and 4,545 defendants whose supervision continued from FY 2012.

4. Of the 8,116 offenders entering CSP supervision in FY 2013, how many had been under CSP's supervision within the previous three years?

Twenty-seven (27) percent of the offenders entering supervision in FY 2013 had been under CSP supervision at some point in the three years prior to their FY 2013 supervision start date.

5. How do CSOSA and PSA assess offender and defendant risk of re-offending while in the community?

CSP developed an automated offender screening instrument, the CSP AUTO Screener, to assess each offender's risk and needs for purposes of assigning an appropriate level of supervision and developing an automated, individualized prescriptive supervision plan (PSP) that identifies programs and services to address the offender's needs. Offenders are assessed with the AUTO Screener upon intake and on a recurring basis throughout supervision. Offenders assessed as high risk pose the greatest threat to public safety and have a high propensity to re-offend and return to prison.

PSA's pre-release process assesses both risk of rearrest and failure to appear for scheduled court appearances. The assessment process has two components:

Risk Assessment: PSA uses a risk assessment instrument that examines relevant defendant data to help identify the most appropriate supervision levels for released defendants. The assessment scores various risk measures specific to the District's defendant population (e.g., previous failure to appear for court, previous dangerous and violent convictions in the past 10 years, suspected substance use disorders, current relationship to the criminal justice system, among numerous others). It then generates a score that assigns defendants to different risk categories and corresponding supervision assignments to help reduce the risk of failure to appear in court and rearrest.

Recommendation to the Court: PSA makes recommendations for release or detention based on risk determination. If release is recommended, the Agency recommends the least restrictive conditions for each defendant given the need for public safety and reasonable assurance that the defendant will return to court. When warranted, PSA recommends to the Court a variety of restrictive conditions including, but not limited to, drug testing, substance use disorder treatment, mental health treatment, orders to stay-away from specified persons or places, regular and frequent face-to-face contact with a PSO, halfway house placement, GPS and electronic monitoring.

6. What portion of offenders entering CSP supervision in FY 2013 had illicit substance treatment needs?

In FY 2013, a total of 8,116 offenders entered CSP supervision. 80.4% of these offender intakes with AUTO-Screener data self-reported a history of illicit substance use.

A CSP review of the 8,116 offenders entering CSP supervision in FY 2013 revealed that 2,477 (30.5 percent) were classified by CSP as persistent drug users⁷ and, of these persistent drug users, 1,605 entered supervision with a special condition for drug treatment imposed by the Court or the U.S. Parole Commission. Just under half (1,151) of these persistent drug users were assessed and supervised by CSP at the highest risk levels (maximum and intensive combined). Of the 1,151 high-risk, persistent drug users who began supervision in FY 2013, 693 had a special condition for treatment and were persistently testing positive for illicit substances. High-risk offenders are not the only group to demonstrate a need for treatment. Of the 1,911 offenders entering supervision in FY 2013 who were assessed by CSP at the minimum risk level, 541 exhibited persistent drug use while under supervision.

7. What portion of offenders and defendants entering CSOSA supervision in FY 2013 had mental health issues?

Based upon self-reported information obtained from the CSP AUTO Screener, over 30 percent of FY 2013 offender intakes reported mental health issues. Of the 8,116 offenders who began supervision with CSP in FY 2013, 7.1 percent had been formally diagnosed with a mental health disorder; were in a community-based mental health treatment program; had a history of or were taking medication to treat a mental health disorder; or had been hospitalized as result of a mental health disorder. An additional 23.5 percent of the FY 2013 entry population reported an undiagnosed mental health condition.

Of the 26,224 total cases supervised in PSA programs in FY 2013, 2,505 cases (9.6 percent) had sufficiently serious mental health problems to merit placement in PSA's Specialized Supervision Unit (SSU). The SSU provides critical supervision and case management services for defendants with severe and persistent mental health disorders, as well as those dually diagnosed with both mental illness and substance use disorders. The SSU ensures that these defendants are linked with community-based mental health treatment through the D.C. Department of Mental Health. Personnel in this unit have mental health expertise and/or specialized training in working effectively with the mentally-ill and dually-diagnosed defendants.

The SSU plays a vital role in supporting the Mental Health Diversion Court (MHDC), which is a partnership between PSA, the D.C. Superior Court, U.S. Attorney's Office, and local defense bar created to provide an alternative to case processing for appropriate defendants with mental health issues. PSA's participation in the MHDC includes assessing and recommending eligible misdemeanor defendants for participation, providing close supervision and referrals for mental health and substance use disorder treatment, and reporting compliance to the court. During FY 2013, PSA supervised 622 defendants in the MHDC, 522 of who were placed during the fiscal year. There were 272 defendants placed onto diversion agreements during the fiscal year and 160 defendants had their cases dismissed due to successful completion of diversion requirements.

⁷ Persistent drug users are defined as offenders who tested positive for drugs (excluding synthetic drugs and positive tests for alcohol) on three or more occasions during the fiscal year.

8. Of the offenders under CSP supervision, how many have unstable housing?

Programs funded by the U.S. Department of Housing and Urban Development (HUD) use a comprehensive definition of homelessness and housing instability [found in the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (P.L. 111-22, Section 1003)] to include persons who:

- lack a fixed, regular, and adequate nighttime residence,
- have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground,
- live in a publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing),
- reside in shelters or places not meant for human habitation,
- are in danger of imminently lose their housing [as evidenced by a court order resulting from an eviction action that notifies the person(s) that they must leave within 14 days, having a primary nighttime residence that is a room in a hotel or motel and where they lack the resources necessary to reside there for more than 14 days, or credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days], and/or
- have experienced a long-term period without living independently in permanent housing, have experienced persistent instability as measured by frequent moves over such period, and can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.

CSP uses a more-narrow definition of ‘unstable housing’. If an offender resides in a homeless shelter, halfway house through a public law placement, transitional housing, hotel or motel, or has no fixed address, he or she is deemed by CSP as having ‘unstable housing’. Approximately nine (9) percent) of the FY 2013 average daily offender population had unstable housing. Two-thirds of those with unstable housing lived in homeless shelters. The remaining individuals resided in CSP-funded transitional housing, halfway houses through public law placements, hotels or motels; or were living without a fixed address.

CSP does not routinely track a number of factors considered in HUD’s definition of homelessness and housing instability (i.e., the number of offenders who live with parents, other relatives or friends on a temporary basis; offenders in danger of imminently losing housing; etc.). As such, CSP’s reported figures of offenders living in unstable conditions are likely underestimated.

9. How many CSP offenders have dependent children? How is CSP attempting to meet the needs of offenders with children?

Of the FY 2013 new offender entrants for whom family information was available in a completed CSP AUTO Screener, almost two-thirds (64.4 percent) reported having children. Of those with children, 93.1 percent had dependent children (under age 18). Roughly one-fifth of offenders with dependent children (19.2 percent) identified themselves as the primary caretakers of their dependents; and 28.8 percent reported residing in the same household as their dependents.

A limited number of CSP contract substance abuse treatment providers allow children (under age 11) to accompany offenders to residential drug treatment. The children are provided educational support (or are enrolled in school, if age appropriate), and receive primary health care screening and referrals.

In FY 2014, CSP launched a pilot initiative in coordination with BOP's Secure Female Facility at Hazelton, WV, to perform video-conferencing to connect D.C. females incarcerated at the facility with their children living in the District of Columbia. The bi-weekly program is conducted at CSP field locations where children can visit and connect with their mothers via videoconferencing. Efforts to enable offenders to develop and maintain relationships with their children prior to re-entry will be expanded to include male offenders. CSP is also beginning to work with the local child welfare agency, the D.C. Child and Family Services Agency, to reconnect incarcerated parents with their children in foster care.

10. Does CSOSA supervise juvenile offenders?

Neither CSP nor PSA supervises offenders/defendants adjudicated as juveniles; this function remains the responsibility of the D.C. Government's Department of Youth Rehabilitation Services (DYRS). However, both agencies supervise defendants and offenders charged or convicted as adults, some of whom are under the age of 18.

During FY 2013, CSP supervised two offenders under the age of 18 who were convicted as adults. In FY 2013, CSP supervised approximately 20 offenders each day (or less than 1 percent of the daily supervised population) under the age of 21 who were also committed to DYRS. Identification of these cases allows for DYRS and CSP to adequately address the needs of these youth in a coordinated fashion.

11. Does CSP provide unique supervision programs for young adult offenders?

The percentage of CSP's offender population characterized as youthful offenders continues to increase with over 20 percent of CSP's September 30, 2013 offender population aged 25 or under. Analysis of our data has shown that our young adult offenders, generally between the ages of 18-25, are less compliant with supervision and intervention strategies, pose a higher risk for re-offending/re-arrest and exhibit higher rates of drug and alcohol abuse. Among this population, 45 percent lack a high school diploma or GED. Overall, these youthful offenders are simply more challenging to supervise from the point of intake to the completion of their term of supervision. To address these challenges, CSP deployed our new Young Adult Supervision Initiative pilot in FY 2013. Two specialized supervision teams are designated to employ comprehensive and integrated case management strategies that tailor supervision plans

specifically to the level of risk and unique needs of these offenders; provide streamlined access to programs and interventions; engage the young adult offender and associated CSP partners earlier in the case management process; and use routine interactions as opportunities to enhance motivation and reinforce pro-social behavior.

12. What has CSP accomplished towards providing specialized services for female offenders?

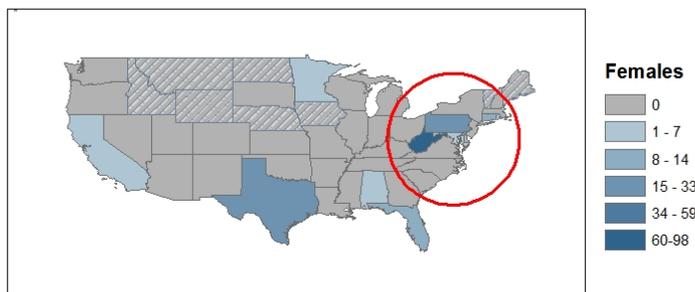
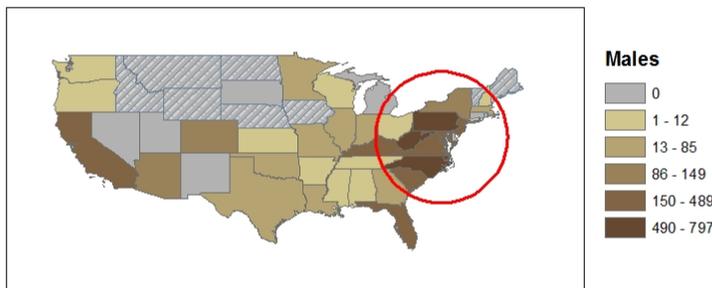
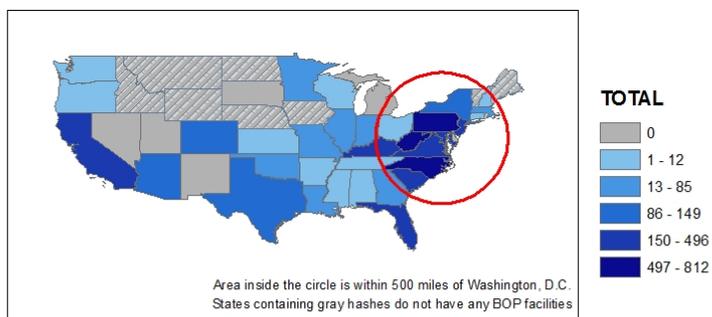
Female offenders represent approximately 16 percent of CSP's average daily supervised population. CSP has made great efforts toward re-organizing existing resources to provide specialized supervision services to meet the unique needs of female offenders:

- Re-organized existing CSO resources to create four supervision teams dedicated to only supervising female offenders.
- Converted one male unit of our Re-entry and Sanctions Center into a unit for female offenders with mental health and substance abuse issues.
- Re-organized existing resources to establish a second Day Reporting Center (DRC) solely for female offenders at 25 K Street, NE. There are three gender-specific programs for female offenders offered at the 25 K Street DRC site:
 1. Women In Control Again: A three phase program that provides intensive case management services and focused monitoring to ensure offender compliance and assist offenders to recognize alternative choices while making positive behavioral changes;
 2. Life Time Make Over: An eight (8) week, cognitive behaviorally-based program designed to assist female offenders in improving their social, decision-making, and motivation skills so that they can become employed, productive members of the community; and
 3. Thinking for a Change: An eight (8) week cognitive behavioral program that addresses offenders' criminal thinking patterns.
- Hosting of a yearly Women's Re-entry Forum. The Forum includes plenary sessions and creative activities geared toward enlightening, empowering and motivating women involved in the criminal justice system.
- CSP contracts for specialized substance abuse treatment and transitional housing services for female offenders, including female offenders with dependent children.

13. Where are offenders under CSP supervision confined prior to their release?

The legislation that established CSOSA in 1997 also transferred the custody of offenders sentenced in D.C. Superior Court to the Federal Bureau of Prisons (BOP). This transfer was completed, and the District’s Lorton Correctional Complex closed, in 2000. Convicted misdemeanants with very short sentences or terms of split-sentence probation (a term of incarceration followed immediately by a term of supervised probation) are incarcerated by the D.C. Department of Corrections at the Central Detention Facility or the Correctional Treatment Facility (CTF). Sentenced felons and individuals whose community supervision is revoked by the releasing authority (D.C. Superior Court or the United States Parole Commission) are placed in BOP facilities around the country. In FY 2013, 1,971 individuals were released from BOP facilities and entered CSP supervision on parole or supervised release.

On September 30, 2013, there were 5,360 inmates (5,175 male; 185 female) housed in facilities managed by or under contract with the BOP following adjudication in DC Superior Court. This represents a small decrease from the number of such BOP inmates as of October 26, 2012 (5,495). The states with the highest population of DC offenders on September 30, 2013 were Pennsylvania (812), West Virginia (779) and North Carolina (742). The leading three states housing female inmates were West Virginia (98), the District of Columbia (23) and Texas (20).



14. How many Community Supervision Officers (CSO) and Pretrial Services Officers (PSO) does CSOSA have?

CSP had 314 total, on-board CSO employees as of September 2013 performing offender supervision, diagnostic and investigative functions.

PSA had 146 Pretrial Services Officers/Assistant Pretrial Services Officers in FY 2013 performing defendant diagnostic, supervision or treatment-related services. This number does not include seven (7) vacant Pretrial Services Officer and Assistant Pretrial Services Officer FTEs responsible for performing diagnostic, supervision or treatment-related duties.

Thirty-five (35) Pretrial Services Officers perform diagnostic, court representation, assessment, quality assurance and program administration duties. These positions are not included in the total number of Pretrial Services Officers/Assistant Pretrial Services Officers conducting actual case management duties.

15. In previous budgets, CSP requested and Congress provided resources to allow CSP to reduce the number of offenders supervised by each Community Supervision Officer (CSO). What has been the effect of these additional resources on offender caseloads?

Prior to the Revitalization Act, supervision CSO caseloads averaged over **100** offenders, far in excess of the nationally recognized standards of the American Probation and Parole Association and best practices.

As of September 30, 2013 the overall ratio of supervised offenders to on-board supervision CSO staff is **52.9:1**; a significant improvement since the agency’s inception. A CSO workload balancing initiative resulted in closer monitoring and supervision of high-risk offenders by our special supervision units (e.g., mental health, domestic violence, sex offender).

CSP Community Supervision Officer (CSO) / Offender Caseloads
(Total Offenders Per On-Board Supervision CSO, by Case Type, as of September 30, 2013)

| Offender Case Type | Supervised Offenders | Supervision CSOs | Caseload Ratio |
|--|-----------------------------|-------------------------|-----------------------|
| Special Supervision (Sex Offenders, Mental Health, Domestic Violence) | 4,927 | 115 | 42.8:1 |
| General Supervision | 4,585 | 102 | 45.0:1 |
| Interstate Supervision | 2,525 | 33 | 76.5:1 |
| Sub-Total | 12,037 | 250 | 48.1:1 |
| Warrant | 1,562 | 7 | NA |
| Kiosk Reporting | 94 | 2 | 47.0:1 |
| TOTAL | 13,693 | 259 | 52.9:1 |

16. What are the defendant supervision ratios for PSA?

On September 30, 2013, PSA had 100 Pretrial Services Officer (PSO) FTE dedicated to supervising 4,514 defendants. This equates to a daily supervision caseload ratio of 45:1 (4,514 defendants /100 PSOs). The chart below provides a depiction of daily caseloads by program area:

**PSA Supervision Caseload Ratios
On September 30, 2013**

| Category | PSOs | Cases-Defendants Based | Ratios | Functional Description |
|---|------------|------------------------|-------------|---|
| General Supervision | | | | |
| Extensive Supervision | 35 | 2,322 | 1:66 | Medium-to-high risk defendants with drug testing, stay away, and reporting conditions |
| Condition Monitoring/ Courtroom Support ^{Note 1} | 4 | 359 | 1:90 | Low risk defendants requiring minimal level supervision |
| High Intensity Supervision (HISP) | 16 | 367 | 1:23 | High-risk defendants placed on electronic surveillance or home confinement |
| Halfway House (Work Release) | 2 | 66 | 1:33 | High-risk defendants ordered to the Department of Corrections halfway house; supervision may include other conditions |
| U.S. District Court | 6 | 170 | 1:28 | Felony and misdemeanor defendants charged in U.S. District Court |
| Subtotal – General Supervision | 63 | 3,284 | | |
| Treatment | | | | |
| Extensive Treatment ^{Note 2} | 19 | 549 | 1:29 | High-risk defendants ordered to substance use disorder and/or mental health treatment |
| Specialized Supervision Unit (SSU) | 18 | 681 | 1:38 | |
| Subtotal –Treatment | 37 | 1,230 | | |
| Total | 100 | 4,514 | 1:45 | |
| Released on Personal Recognizance without Supervision | | 1,853 | | |
| ^{Note 1} A total of 14 PSOs are assigned to the Condition Monitoring/Courtroom Support category. Most of the PSOs spend the majority of their time serving as Court Representatives to provide daily courtroom support to judicial officers to ensure defendants are placed in appropriate programs, and in addition; they carry a partial supervision caseload. ^{Note 2} Includes totals from SCDIP, DCMTI, and SBTT. | | | | |

17. How many CSP offenders have used illicit drugs?

In FY 2013, 80.4 percent of the offenders entering CSP supervision with AUTO Screener data self-reported having a history of illicit drug use.

Illicit Drug Use of Offenders Entering CSP Supervision in FY 2013, by Drug (Self-Reported)

| Illicit Drug | Percentage of New FY 2013 Offenders Reporting Use of the Drug | Average Age at First Use | Average Length of Use (Years) |
|--------------|---|--------------------------|-------------------------------|
| Marijuana | 63.1% | 16 | 9.7 |
| Cocaine | 31.9% | 25 | 12.6 |
| PCP | 23.7% | 20 | 7.5 |
| Opiates | 14.0% | 24 | 14.9 |

18. What is the arrest history of offenders entering CSP supervision in FY 2013?

Of the FY 2013 offender entrants with arrest histories identified by CSP's AUTO Screener, over half self-reported having been arrested for a drug-related charge in the past. The average age at first arrest for these offenders is 24, and they were arrested for drug-related offenses an average of 3.8 times.

| Arrest Charge Type | Percent with Arrest History ¹ | Average Age at First Arrest | Average Number of Arrests |
|--|--|-----------------------------|---------------------------|
| Drug-Related Offense (Excluding Alcohol) | 54.5% | 24 | 3.8 |
| Property Offense | 42.5% | 23 | 3.9 |
| Violent Offense | 32.9% | 22 | 2.7 |
| Simple Assault | 30.9% | 27 | 2.1 |
| Traffic | 22.1% | 28 | 2.1 |
| Public Order | 21.8% | 26 | 2.8 |
| Firearm Offense | 18.3% | 23 | 1.7 |
| Domestic Violence | 14.6% | 30 | 1.7 |
| Alcohol | 7.2% | 31 | 1.7 |
| Sex Offense | 5.5% | 28 | 1.4 |
| Prostitution | 3.4% | 28 | 3.2 |

¹ An offender may have arrests for multiple charge types.

19. Where can I find more information on CSP's and PSA's Programs?

Information on CSOSA programs may be found online at www.csosa.gov. CSP also has established a site containing multimedia programming related to public safety in the District of Columbia at <http://media.csosa.gov> in order to share information with the community and our law enforcement partners. PSA's website can be found at <http://www.psa.gov/>.

20. Does CSOSA Track Re-arrests of Supervised Offenders and Defendants?

Yes. CSP receives District of Columbia offender arrest data from the D.C. Metropolitan Police Department several times each day and daily arrest information from the states of Maryland and Virginia. Arrest data is loaded into and matched against supervised offenders in our offender case management system (SMART). If it is determined that a CSP offender has been arrested, an alert is immediately sent to the supervising Community Supervision Officer and their supervisor for appropriate response.

Additionally, since 2007, CSP electronically submits current offender data to the FBI's National Crime Information Center (NCIC) system. In August 2010, the FBI implemented improvements in NCIC that enabled electronic notification to CSP for any new CSP offender arrest reported to NCIC by any jurisdiction in the U.S. A new SMART feature that displays any NCIC-reported nationwide new arrest, warrant, or other law enforcement inquiry for CSP offenders was deployed in FY 2011.

PSA receives automatic electronic notification of new arrests in the District of Columbia. PSA case managers promptly notify the appropriate calendar judge of the new arrest and, when appropriate, recommend termination of PSA supervision as a result of the new arrest. In addition, case managers conduct regular nationwide warrant and criminal history updates for all supervised defendants.

Minimizing rearrests among defendants released to the community pending trial to help assure public safety is one of PSA's key strategic outcome measures. In FY 2013, 90 percent of released defendants remained arrest free, exceeding the established target by 2 percent.

21. Is CSOSA a member of the Criminal Justice Coordinating Council (CJCC) for the District of Columbia?

CSP and PSA are each permanent members of the CJCC, which is a forum for collaboration among law enforcement entities within the District. The Director of CSOSA serves as the current co-chair of the CJCC. Other permanent members include the Federal Bureau of Prisons, U.S. Marshals Service, Metropolitan Police Department, U.S. Attorneys Office, U.S. Parole Commission, D.C. Department of Corrections, D.C. Public Defender Service, D.C. Superior Court, Attorney General for the District of Columbia, Department of Youth Rehabilitation Services and the Mayor of D.C. The Chairs of the City Council of the District of Columbia and Council Judiciary Committee also serve as permanent CJCC members.

22. Does CSOSA perform annual financial audits?

CSOSA (CSP and PSA), like all other Federal agencies, is required by law to prepare and audit agency financial statements on an annual basis. CSOSA issued its FY 2013 Agency Financial Report, including audited financial statements, on December 12, 2013. CSOSA received an Unqualified (positive) opinion on the FY 2013 financial statements from an independent auditor; the auditor did not identify any material internal control issues or significant deficiencies.

23. In FY 2004, CSP first received resources to implement Global Positioning System (GPS) Electronic Monitoring of high-risk offenders. What is the status of this initiative? Is CSP’s GPS program effective?

CSP continues to monitor the movement of the highest risk offenders using GPS technology. On September 30, 2013, 418 high-risk CSP offenders were on GPS Electronic Monitoring. CSP’s GPS program has demonstrated its effectiveness in reducing rearrests and improving information sharing and collaboration across local criminal justice agencies.

CSP performed a review of offenders who were placed on GPS monitoring for at least sixty successive days in FYs 2012 and 2013, comparing violations and rearrests in the sixty days before GPS activation to the sixty days after. The table below shows that, for both years, rearrests of offenders decreased dramatically while they were on GPS monitoring. A modest decrease in non-drug violations was also observed. Although drug violations increased during monitoring, this increase may be explained by an increase in testing requirements that often accompanies placement on GPS (see footnote below table).

Violations and Rearrests for Offenders on GPS Monitoring for At Least 60 Successive Days, FYs 2012 - 2013

| | FY 2012 | | FY 2013 | |
|--|---------------------------------|-----------------------------------|---------------------------------|-----------------------------------|
| | Before GPS Activation (60 Days) | While on GPS Monitoring (60 Days) | Before GPS Activation (60 Days) | While on GPS Monitoring (60 Days) |
| Average Number of Violations | 5.3 | 7.8 | 5.2 | 6.7 |
| <i>Drug Violations¹</i> | 4.8 | 5.7 | 4.8 | 5.5 |
| <i>Non-Drug Violations</i> | 0.5 | 0.3 | 0.4 | 0.3 |
| <i>GPS Violations</i> | 0.0 | 1.8 | 0.0 | 0.9 |
| Total Number of Rearrests While on Supervision | 85 | 12 | 45 | 14 |

¹ Drug violations include: failing to submit a sample for substance use testing, illegally possessing a controlled substance, illegally using a controlled substance, and water-loading. A review of drug test events showed that, on average, offenders were tested 9.2 times during the 60 days prior to GPS activation and 11.9 times during monitoring in FY 2012; they tested 9.1 times prior to GPS activation and 12.3 times during monitoring in FY 2013.

In addition, CSP had trained 1,353 staff from 19 other law enforcement entities, including the D.C. Metropolitan Police Department, the US Attorney’s office and the U.S Marshals Service, on use of CSP’s GPS data. This training of partner agencies has allowed CSOSA to improve information sharing and better coordinate law enforcement efforts with the ultimate goal of improving public safety.

24. Does PSA use Global Positioning System (GPS) Electronic Monitoring to track defendants?

The High Intensity Supervision Program (HISP) supervises high risk defendants who have supervision-related failures from other PSA units; are charged with violent misdemeanors and felonies; were initially detained but are now being considered for release; or are compliant with halfway house conditions of work release and are now being considered for placement back into the community. Supervision requirements include face-to-face contact and drug testing at least

once per week, and a daily electronically monitored curfew. HISP monitors location-based stay away orders imposed by the courts using Global Positioning Surveillance (GPS). Due to the heightened risk associated with this population, PSA reports all program violations to the court within an expedited timeframe.

PSA uses a dual function surveillance unit that combines Radio Frequency (RF) and GPS technologies, which allows for simultaneous monitoring of compliance with location-based stay away orders and curfew. In FY 2013, PSA supervised and monitored 1,561 higher risk cases using electronic monitoring surveillance technologies.

25. Describe CSP's participation in the Secure Residential Treatment Program (SRTP)?

The Secure Residential Treatment Program (SRTP) is a joint collaboration of CSP, the D.C. Government, the United States Parole Commission, and the Bureau of Prisons (BOP) as an alternative to incarceration. The SRTP began limited operations in September 2009 to provide a secure, residential substance abuse treatment intervention/sanction to high risk, chronic substance abusing, and criminally-involved D.C. Code offenders in lieu of revoking them to BOP custody. To effectively address the needs of this high-risk offender population and to increase their chances of successful community reintegration, the SRTP program identifies and provides appropriate treatment interventions prior to revocation. Addressing the core substance abuse and criminality issues faced by these offenders locally at the SRTP, rather than returning them to a BOP institution, will help to break their cycle of recidivism. The SRTP uses one unit (32 beds) at the Correctional Treatment Facility (CTF), a local contract facility of the D.C. Government that houses detained inmates. The BOP and D.C. Government assumed financial responsibility for most operations of the SRTP effective July 2012.

On September 30, 2013, 32 offenders were participating in the SRTP. Since the SRTP Program began in September 2009 through September 30, 2013, 267 high risk-CSP offenders have entered the SRTP. Of the 256 offenders eligible to complete the first 180 days of the SRTP, 171 offenders (67 percent) successfully completed the program.

26. In FY 2001 CSP was charged with setting up a Sex Offender Registry for the District of Columbia. Has this been accomplished?

Yes. CSP developed and established a secure database for sex offender registration information. CSP assumed responsibility for the registration function in October 2000. As of December 31, 2013, 1,652 total registrants were listed in the D.C. Sex Offender Registry, of which 1,003 were active. The data, photographs and supporting documents are transmitted by CSP to the D.C. Metropolitan Police Department (MPD) for community notification as required by law. In FY 2013 (October 1, 2012 – September 30, 2013), 133 new registrants were transmitted by CSP to DC MPD. The Sex Offender Registry database is maintained by CSP; however, the website for use by the public is hosted by D.C. Office of the Chief Technology Officer (OCTO) on behalf of MPD at www.mpdc.dc.gov.

In December 2012, CSP deployed an enhanced version of the Sex Offender Registry application and database that is compliant with DC law and meets Federal technology and system security regulations. The enhanced version of the Sex Offender Registry automates the violation notification process between CSP and D.C. MPD, provides more detailed tracking of the required offender verifications, provides for automated communications via email between CSP offices, offers a wider range of reports, and provides the ability for end users to create their own reports/lists.

27. What are CSP offender Housing Contacts?

CSP Community Supervision Officers (CSOs) conduct three types of housing contacts: accountability tours, home verifications and home visits. These housing contacts may be conducted independently of one another, or they may be combined (e.g., accountability tour with home verification, home visit with home verification).

- *Accountability tours* are visits to the homes of high-risk offenders conducted jointly by a CSO and a D.C. Metropolitan Police Department (MPD) Officer in support of our public safety mandate. They may be scheduled or unscheduled visits, and the purpose of these tours is to closely supervise the highest risk offenders. In FY 2013, CSOs conducted a total of 4,136 accountability tours for 3,554 offenders.
- *Home verifications* are conducted by a CSO with the owner of the residence in which the offender resides to ensure that the offender lives at the address provided to CSOSA, and does not reside in some other, unapproved location. In FY 2013, CSOs also conducted 49,669 home verifications for 16,658 offenders.
- *Home visits* are conducted by a CSO with an offender to assess the offender's living quarters, interact with other residents, determine how the offender is adjusting to his or her living situation, and to assess any potential problems/barriers that the offender may be experiencing in the home or community that may affect the offender's success under supervision. In FY 2013, CSOs conducted 65,038 home visits for 17,668 offenders.

28. Does CSP Implement Graduated Sanctions in Response to an Offender's Violation of Conditions of Release, Including Re-Arrest?

Graduated sanctions are a critical element of CSP's offender supervision model. Research emphasizes the need to impose sanctions quickly and uniformly for maximum effectiveness. A swift response to non-compliant behavior can restore compliance before the offender's behavior escalates to include new crimes. From its inception, the agency has worked closely with both D.C. Superior Court and the U.S. Parole Commission to develop a range of options that Community Supervision Officers (CSOs) can implement immediately, without returning offenders to the releasing authority.

Graduated sanction options include increasing the offender's frequency of drug testing or supervision contacts, assigning the offender to community service or the CSP Day Reporting Center, placing the offender in a residential sanctions program [including the Re-Entry and Sanctions Center, the Secure Residential Treatment Program (SRTP) or the Halfway Back program], or placing the offender on Global Positioning System (GPS) monitoring. Offender sanctions are defined in an Accountability Contract established with the offender at the start of supervision. Sanctions take into account both the severity of the non-compliance and the offender's supervision level.

If sanctions do not restore compliance, the non-compliant behavior escalates or the offender is re-arrested, the CSO will inform the releasing authority (US Parole Commission or the Court) by filing an Alleged Violation Report (AVR). On average, CSP files AVRs for roughly three out of every ten offenders annually. Offenders under supervised release are most likely to have AVRs filed, with almost 40 percent of offenders under supervised release having at least one AVR filed in FY 2013. Comparatively, less than one-fourth of parolees had an AVR filed in FY 2013. In FY 2013, AVRs were filed for 2,649 offenders on parole/supervised release and 4,042 offenders on probation. About half of all AVRs submitted in FY 2013 involved re-arrests.

29. How many community-based offender supervision offices does CSP have?

Immediately after the Revitalization Act, CSP had three small field offices for supervising offenders on Probation. Parole supervision was performed centrally in downtown offices. CSP currently has seven community-based offender (Probation and Parole) supervision field offices throughout the District.

1. 1230 Taylor Street, NW
2. 910 Rhode Island Avenue, NE
3. 1418 Good Hope Road, SE
4. 3850 South Capitol Street, SE
5. 25 K Street, NE
6. 800 North Capitol Street, NW
7. 4415 South Capitol Street, SW

In addition, CSP supervises high-risk offenders at our headquarters, located at 633 Indiana Avenue, NW.

CSP also operates the Re-Entry and Sanctions Center (RSC) at Karrick Hall on the grounds of the former D.C. General Hospital (1900 Massachusetts Ave SE). In addition, CSP operates vocational and educational programs at St. Luke's Church on 4923 East Capitol Street, SE.

CSP has specialized offender supervision operations co-located with the Metropolitan Police Department at 300 Indiana Avenue, NW, for highest-risk offenders (sex offenders, mental health, etc.) who cannot be supervised at neighborhood field offices. CSP operates on a year-to-year lease at 300 Indiana Avenue, NW, which is owned and operated by the D.C. Government. The FY 2015 President's Budget contains resources to relocate from this location.

CSP plans to fund the relocation of two offender supervision field offices (25 K Street, NE, and 1418, Good Hope Road, SE), one administrative location (655 15th Street, NW) and other intra-Agency moves with funds contained in our FY 2014 Enacted Budget.

30. Describe CSOSA's Re-Entry and Sanctions Center at Karrick Hall.

The CSOSA Re-entry and Sanctions Center (RSC) at Karrick Hall (1900 Massachusetts Ave, SE) provides high-risk offenders and defendants with a treatment readiness program that includes intensive assessment and reintegration programming. The RSC program is specifically tailored for offenders/defendants with long histories of crime and substance abuse coupled with long periods of incarceration and little outside support. These individuals are particularly vulnerable to both criminal and drug relapse at the point of release.

Offenders/defendants assigned to the RSC participate in a 28-day holistic, residential and multidisciplinary program (42 days for women). The RSC has the capacity to serve 102 male/female offenders/defendants in six units, or 1,200 offenders/defendants annually. Two of the six units are dedicated to meeting the needs of dually diagnosed (mental health and substance abuse) offenders/defendants; one of these two units services female offenders.

Treatment readiness and motivation are the focus of each of the interventions offered at the RSC. These interventions are structured to address one or more of the factors identified as particular challenges to an offender's/defendant's successful reentry including psychological disorders, substance abuse, cognitive impairments, protracted withdrawal, poor attachment/social bonding and criminogenic factors.

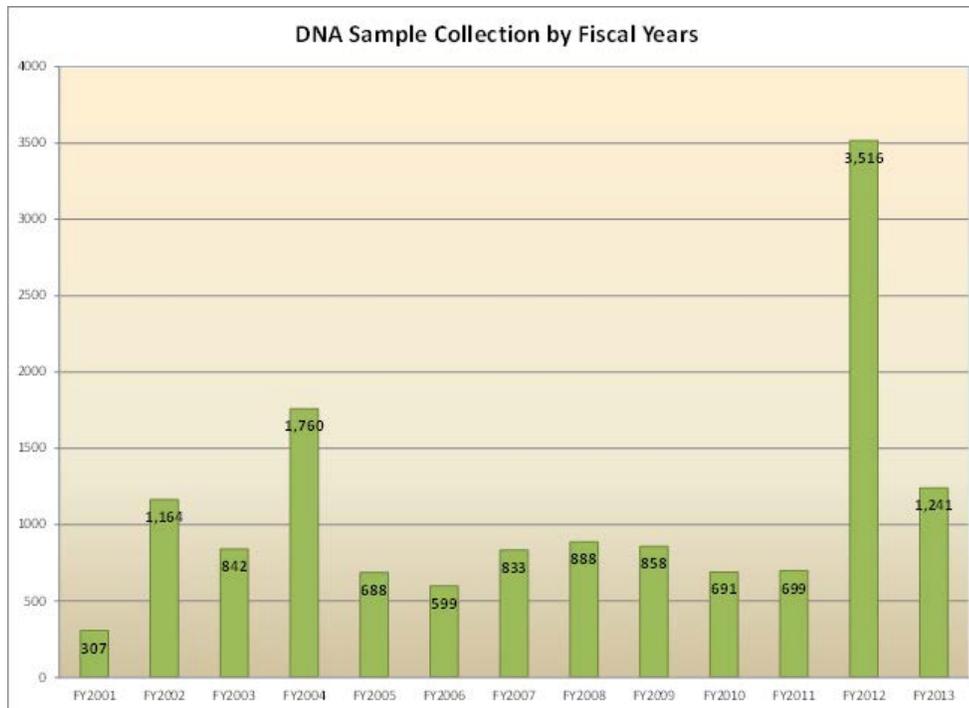
RSC offenders/defendants also receive counseling; a complete physical, psychological and behavioral assessment; and have a comprehensive treatment plan developed that includes referrals to an individualized continuum of inpatient, residential and/or daily outpatient substance abuse treatment programs.

In FY 2013, the RSC admitted a total of 1,180 high risk-offenders/defendants and discharged 1,019. Of the 1,019 discharges, 798 (78.3%) successfully completed the RSC program.

31. Does CSP collect DNA samples from its offender population?

In FY 2001 CSP assumed responsibility for collecting DNA samples from probationers and parolees convicted of certain qualifying District of Columbia offenses, typically violent crimes and sex offenses, for transmission to the Federal Bureau of Investigation (FBI). Offenses that require DNA collection are specified in accordance with D.C. Code § 22-4151. The FBI maintains the DNA information in their Combined DNA Index System (CODIS) used for crime solving. CSP does not collect or transmit DNA data for qualifying offenders whose information already is maintained in CODIS.

Since FY 2001, CSP has collected a total of 14,086 DNA samples that were transmitted to the FBI. CSP had a significant increase in DNA sample collection in FY 2012 due to D.C. ST 22-4151 (Bill 18-138, the "Omnibus Anti-Crime Amendment Act of 2009) that expanded qualifying D.C. offenses for which a DNA sample is required when in the Bureau of Prisons or under CSOSA Supervision.



32. How much contract Treatment, Transitional Housing and Halfway Back Sanctions funding does CSP have for offenders?

In FY 2011, CSP had \$14,978,000 in total appropriated contract substance abuse treatment, transitional housing and halfway back sanctions funding. In FY 2012, as a result of flat budgets and increasing costs, CSP reduced funding for these critical support initiatives by \$1,685,000. In FY 2013, due to Sequestration, CSP reduced this funding by an additional \$3,305,000 for a net reduced budget of \$9,988,000. The FY 2014 Enacted Budget restores the Sequestration reductions, thereby increasing CSP’s Treatment and Transitional Housing budget to FY 2012 enacted levels. The FY 2015 President’s Budget requests to restore CSP’s total appropriated contract treatment, transitional housing and halfway back sanctions funding to FY 2011 levels.

| Fiscal Year | Total Appropriated Funding | Change from Prior Fiscal Year |
|-------------|----------------------------|-------------------------------|
| FY 2011 | \$14,978,000 | |
| FY 2012 | \$13,293,000 | -\$1,685,000 |
| FY 2013 | \$9,988,000 | -\$3,305,000 |
| FY 2014 | \$13,293,000 | +\$3,305,000 |
| FY 2015 PB | \$14,978,000 | +\$1,685,000 |

CSP uses these funds for contract costs related to substance abuse inpatient and outpatient treatment, transitional (including re-entrant) housing and the halfway back sanctions program. In addition, funds have been used for contracted sex offender treatment, faith-based re-entry and mental health assessments. CSP eliminated contracted faith-based re-entry in FY 2013.

33. How many defendants and offenders have been placed in contract treatment, transitional housing and residential sanctions programs?

In FY 2013, CSP made 2,105 contract substance abuse treatment, transitional housing, and halfway back treatment sanction placements using appropriated funds. In addition, at any given time, up to 300 offenders per month are participating in CSP in-house substance abuse treatment or treatment readiness programming. The number of FY 2013 contract placements represents an 28.5 percent reduction from FY 2011 placements (2,946).

Typically, those offenders referred to treatment with severe illicit substance use disorders require a contract treatment program continuum consisting of at least three separate substance abuse treatment placements (in-house or contract) to fully address their issues. This may include placement in detoxification, residential treatment, and transitional housing in conjunction with intensive outpatient continuing care.

CSP Contract Offender Placements (Appropriated Funds)

| Treatment and Housing Services | FY 2011 Placements | FY 2013 Placements |
|---|---------------------------|---------------------------|
| Detoxification | 229 | 98 |
| Residential Treatment | 1,040 | 828 |
| Outpatient Treatment | 848 | 514 |
| Sanctions-Based Treatment | 205 | 160 |
| Transitional Housing | 624 | 505 |
| Total Contract Offender Placements | 2,946 | 2,105 |

Since FY 2011, PSA treatment numbers have continued to decline as the budget has been reduced. The chart below shows the number of defendants placed into contract treatment during the last three fiscal years. Total placements are also shown in the chart since some defendants are placed in more than one program during their pretrial supervision. Treatment resources contained in the FY 2015 PB request would allow for approximately 550 total placements per year.

| FY | Placements | Defendants |
|-----------|-------------------|-------------------|
| 2011 | 473 | 349 |
| 2012 | 294 | 215 |
| 2013 | 250 | 178 |

34. How does CSOSA determine who should be subject to drug testing?

This determination is different for CSP offenders and PSA defendants.

CSP conducts drug testing on all offenders placed on CSP supervision by the Superior Court for the District of Columbia and the U.S. Parole Commission (USPC), as well as offenders for whom CSP is completing a pre-sentence investigation, in accordance with its drug testing policy. Surveillance drug testing is primarily intended to enforce the release condition of abstinence and identify offenders in need of treatment services. Substance abuse is a major factor in supervision failure. Through

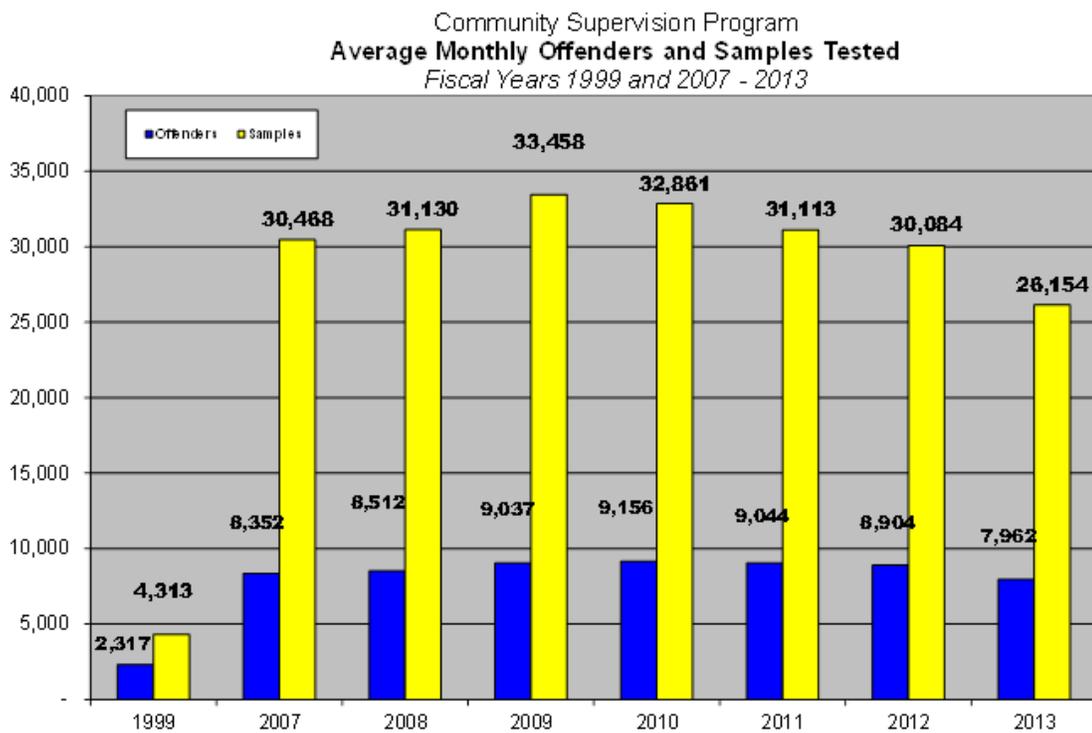
aggressive surveillance testing, CSP can identify and intervene—through sanctions and/or treatment placement—in the offender’s drug use before it escalates to the point of revocation. CSP maintains a zero tolerance of drug use. All offenders are placed on a drug testing schedule, with frequency of testing dependent upon prior substance abuse history, supervision risk level, and length of time under CSP supervision. In addition, all offenders are subject to random spot testing at any time.

PSA attempts to obtain a baseline drug test for every defendant processed through lock-up. Subsequent testing is done pursuant to a court order. Defendants placed in PSA’s treatment programs are tested randomly and frequently, generally two to three times per week. Other defendants are tested on a fixed, non-random schedule, usually once per week.

35. How many offenders and defendants has CSOSA drug tested?

In FY 2013, over 85 percent of eligible offenders were drug tested once per month, exceeding our performance target. CSP obtained an average of 26,154 drug samples from 7,962 offenders per month in our four collection units/sites located throughout the District and the Re-entry and Sanctions Center. Each sample may be tested for up to seven drugs (Marijuana, PCP, Opiates, Methadone, Cocaine, Amphetamines and Alcohol). CSP offender urine samples are tested by PSA and results provided back to CSP within 48 hours after the sample is taken. FY 2013 drug testing decreased below FY 2012 levels yet represents a significant increase above the FY 1999 testing levels reported at the Agency’s inception.

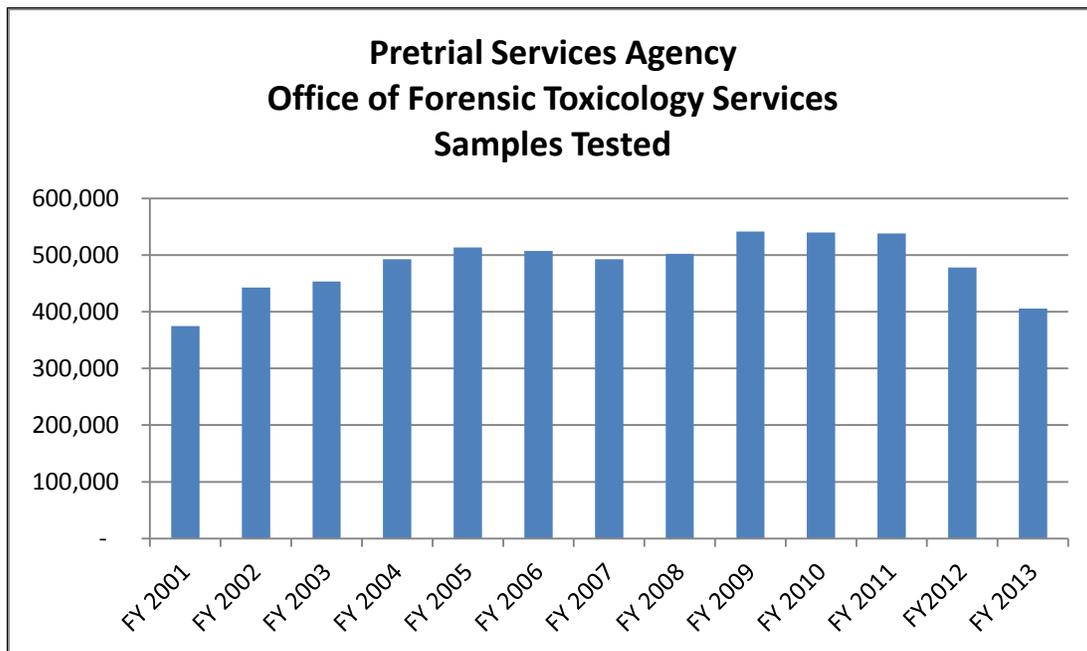
In September 2013, 24.86 percent of offender samples, and 31.71 percent of tested offenders, tested positive for at least one tested drug (including alcohol; excluding synthetic drugs).



PSA conducted initial and follow-up drug tests on 17,985 defendants during FY 2013, with about 32.2 percent (5,791) recording at least one non-compliant drug test result.

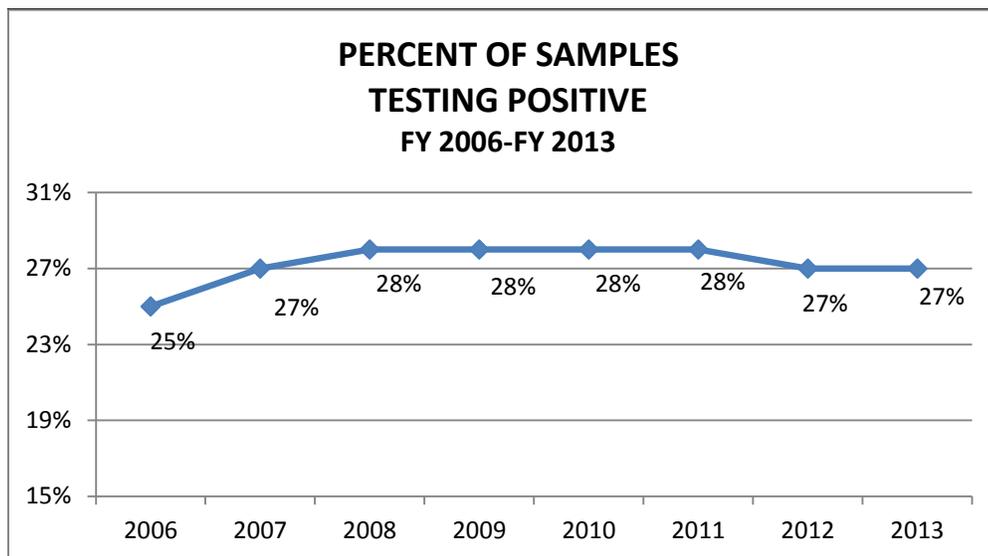
36. How many drug samples are processed by PSA's Office of Forensic Toxicology Services (OFTS)?

In FY 2013, the OFTS conducted 2,598,858 drug tests on 405,898 urine samples from defendants on pretrial release, offenders on probation, parole, and supervised release, as well as for persons (juveniles and adults) whose matters are handled the Family Court. Each sample can be tested for up to seven different drugs. These results are critical to assessing risk and needs levels.



37. How many defendant drug samples collected by PSA tested positive?

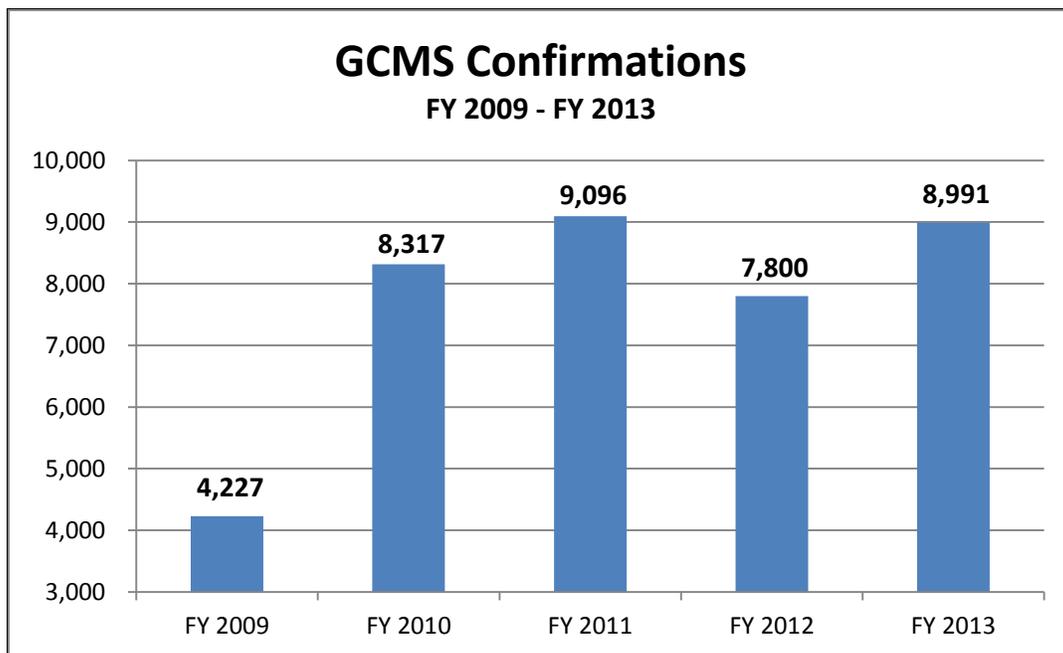
In FY 2013, approximately 27 percent of the defendant samples tested had at least one positive test. This has remained relatively consistent over the last 8 years.



38. What is the procedure when a drug test result is disputed?

When a defendant/offender disputes a drug screen result, the supervising Pretrial Services Officer/Community Supervision Officer (PSO/CSO) may request a gas chromatograph/mass spectrometer (GC/MS) confirmation on the specimen. Results are reviewed and reported through automated systems. PSOs/CSOs almost always request a confirmation if the test result will trigger a judicial sanction or adverse action. GC/MS confirmations are also routinely performed to confirm opiates and amphetamines when a defendant/offender has provided a prescription for a medication containing these substances and to verify low levels of PCP to rule out other drug involvement. The majority of the GC/MS confirmations are performed on amphetamines and opiates. In general, after a GC/MS confirmation test is performed, a toxicologist from the lab is subpoenaed to testify to the accuracy of the test result, particularly if the defendant/offender persists in disputing the result.

The PSA OFTS performed 23,366 levels analyses which aid in the determination of continuing drug use and performed 8,991 GC/MS confirmation tests in FY 2013.



39. What is the status of the plans to relocate PSA’s Drug Lab? What is the cost to relocate the laboratory?

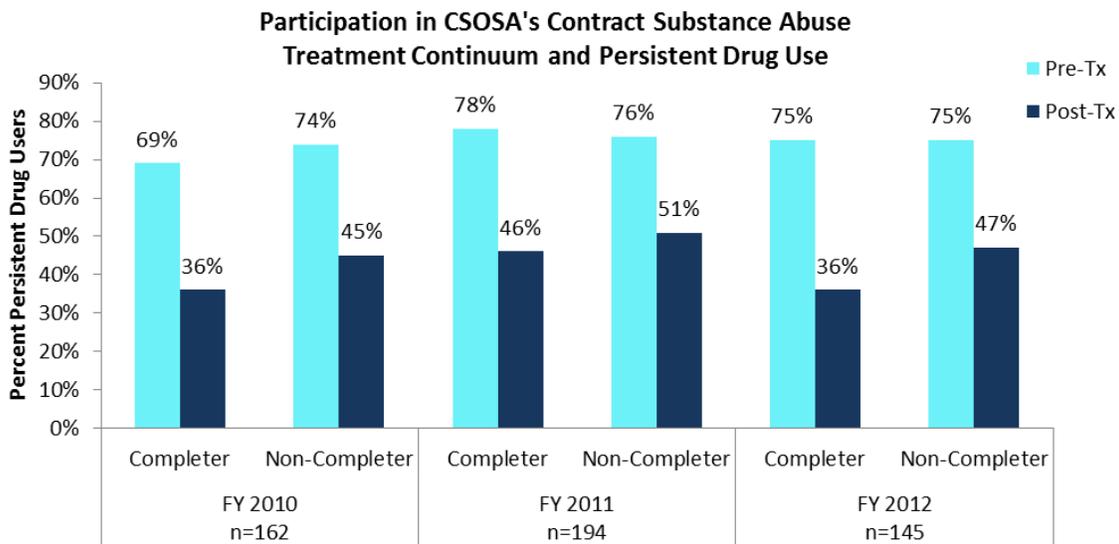
The FY 2012 Enacted Budget for PSA included \$1,000,000 to fund the relocation and redesign of the drug testing laboratory currently located at the District of Columbia’s Henry J. Daly Building, 300 Indiana Avenue. In September 2013, a new space was selected through the GSA acquisition process. The PSA drug testing laboratory will be relocated to Sentinel Square, Phase I, 90K Street, NE, Washington, DC in the fourth quarter of FY 2014 following the design and construction phases.

40. Has the increase in CSP offender drug testing and treatment been effective?

There are indications that suggest the increase in drug testing and treatment has had a positive effect among CSP's supervised population.

- I. CSP's Office of Research and Evaluation examined the extent to which completion of substance abuse treatment services reduced offender drug use and found that participation in treatment was related to decreases in future chronic substance use.

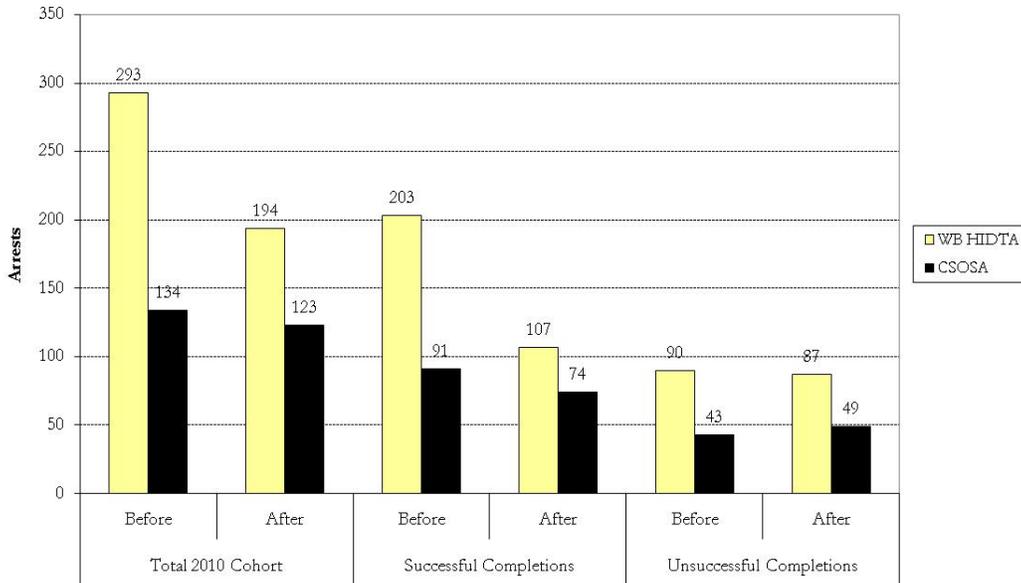
In FY 2012, when compared to their use before treatment, 52 percent fewer offenders who completed multiple drug treatments were deemed persistent drug users⁸ after completing their prescribed treatment continuum. For offenders who participated in treatment, but did not complete all treatment successfully, 37 percent fewer offenders were considered chronic drug users after unsuccessfully discharging from treatment. This suggests that, while full treatment completion is ideal, some treatment is better than no treatment.



⁸ Persistent drug users are defined as offenders who tested positive for drugs (excluding synthetic drugs and positive tests for alcohol) on three or more occasions during the fiscal year.

II. CSOSA is one of nine jurisdictions within the Washington/Baltimore (W/B) HIDTA area that received grant funding to support drug treatment in calendar year 2010. CSOSA uses W/B HIDTA funding to support post-Re-entry and Sanctions Center (RSC) contract treatment for offenders/defendants meeting HIDTA eligibility criteria. A study by the Institute for Behavior and Health⁹ found that roughly 19 percent fewer CSOSA offenders and defendants who participated in the RSC program and successfully completed post-RSC drug treatment funded by the W/B HIDTA were re-arrested after completing the program.

**Individuals Arrested One-Year Before and One-Year After
Completing Treatment Funded by Washington/Baltimore HIDTA (2010
Cohort)**



⁹ *The Effect of W/B HIDTA-Funded Substance Abuse Treatment on Arrest Rates of Criminals Leaving Treatment in Calendar Year 2010.* Institute for Behavior and Health, Inc., June 4, 2012.

41. What were some characteristics (gender, race, education, age, criminal charge) of the offenders under CSP supervision during FY 2013?

As shown in the table below, offenders under CSP supervision in FY 2013 were primarily male, African-American, and ages 35 or younger. About six in ten offenders achieved a high school diploma, GED or higher education level. Of offenders rearrested in DC while under CSP supervision, roughly 3 out of 10 were charged with a violation of their release conditions; just under one-fourth were charged with a public order offense.

Characteristics of the FY 2013 CSP Total Supervised Population (23,065 Offenders)

| | Percent |
|--|---------|
| Gender | |
| Male | 83% |
| Female | 17% |
| Race | |
| African American | 89% |
| Caucasian | 5% |
| Hispanic | 4% |
| Other/Unknown | 2% |
| Educational Level¹ | |
| Less than High School | 34% |
| High School Diploma/GED | 42% |
| Above High School | 19% |
| Missing/Unknown | 5% |
| Age | |
| 25 and Under | 37% |
| 26 to 35 | 28% |
| 36 to 45 | 23% |
| 46 to 55 | 10% |
| 56 to 65 | 2% |
| 66 and above | <1% |
| Criminal Charge^{2 3} | |
| <u>Violent Offenses</u> (Charge Categories: Criminal Homicide, Robbery, Forcible Rape, Sex Offenses, Aggravated Assault, Offenses Against Family & Children, Other Assaults) | 15% |
| <u>Drug Offenses</u> (Charge Category: Drug Abuse) | 11% |
| <u>Property Offenses</u> (Charge Categories: Arson, Burglary, Larceny-Theft, Embezzlement, Fraud, Forgery & Counterfeiting, Motor Vehicle Theft, Stolen property, Vandalism) | 8% |
| <u>Public Order Offenses</u> (Charge Categories: Weapons-Carrying/Possessing, Driving Under the Influence, Disorderly Conduct, Fail to Comply w/ Public Transportation Regs., Gambling, Loitering, Obstruction of Justice, Prostitution & Commercialized Vice, Traffic, Vagrancy, Liquor Laws) | 23% |
| <u>Release Condition Violations</u> (Charge Categories: Parole and Probation Violations) | 29% |
| <u>Other Offenses</u> (Charge Categories: Drunkenness, Licensing & Regulation Issues, Other Offenses, Unknown) | 15% |
| <p>¹ As reported by the offender; not necessarily as assessed by CSOSA Educational Specialists. ² Reflects arrest charges for offenders rearrested in D.C. while under CSOSA supervision through June 30, 2013 (n=3,490). Due to challenges with capturing MPD arrest and charge data in FY 2013, CSP is unable to report charges for the fourth quarter. ³ Charge Categorization taken from the Bureau of Justice Statistics</p> | |