

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

FY 2017 Budget Request **Summary Statement & Frequently Asked Questions (FAQs)** February 9, 2016

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.

¹ Public Law 105-33, Title XI

Community Supervision Program: The Community Supervision Program (CSP) provides supervision for adults released by the D.C. Superior Court or the U.S. Parole 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 law enforcement entities such as 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. Attorneys 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 partnerships with the District of Columbia government, local faith-based and non-profit organizations to provide critical social services to the offender population.

In FY 2015, CSP supervised approximately 12,000 offenders on any given day and 18,427 different offenders over the course of the fiscal year. In FY 2015, 6,461 offenders entered CSP supervision; 4,869 men and women sentenced to probation by the Superior Court for the District of Columbia and 1,592 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: 18.6 to 19.4 months;
Parole³: 11.9 to 14.6 years; and
Supervised Release: 42.6 to 43.6 months

On September 30, 2015, CSP supervised 11,150 offenders, including 6,318 probationers and 4,832 on supervised release or parole. Roughly 8,500 of these offenders resided in the District of Columbia, representing about 1 in every 64 adult residents of the District.⁴ The remaining supervised offenders reside in another jurisdiction and their cases are monitored by CSP.

² Values represent the 95% confidence interval around the average length of sentence for the CSP's FY 2015 Total Supervised Population.

³ Life sentences have been excluded.

⁴ U.S. Census Bureau, 2014 Population Estimates, District of Columbia Adults 18 and Over (543,587). Data as of January 4, 2016.

The number of offenders supervised by CSP decreased in FY 2015 compared to previous years. Some factors influencing this decrease are:

- A decrease in the number of offender intakes FY 2015 compared to previous years:
 - There were 21 percent fewer probation intakes and roughly 19 percent fewer parole/supervised release intakes in FY 2015 compared to FY 2013; and
- A decrease in the number of offenders returning to the District of Columbia on parole and supervised release:
 - As of September 30, 2015, CSOSA was supervising 15 percent fewer re-entrants (i.e., parolees and persons on supervised release) compared to the end of FY 2013.

Despite this recent reduction in the number of offenders under supervision, CSP data suggests 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 landscape (e.g., the proliferation of synthetic drugs and crime spikes) and the potential increase in the offender population over the next few years.

In our FY 2014 – 2018 Strategic Plan, CSP established one outcome indicator and one outcome-oriented performance goal related to public safety:

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

In considering these outcome measures, CSOSA recognizes the well-established connection between behavioral health (both substance abuse and mental health challenges) and crime. Long-term success in reducing recidivism depends upon two key factors:

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

CSP's work to stabilize offenders must consider several dynamic variables. The 6,461 offenders entering CSP supervision in FY 2015 were characterized by the following:

- 81.5 percent self-reported having a history of substance use⁵;
- 55.0 percent were unemployed⁶;
- 31.5 percent reported having less than a high school diploma or GED;
- 41.0 percent had diagnosed or self-reported mental health issues⁵;
- 64.3 percent self-reported having children; 19.4 percent *of those with dependent-age children* reported being the primary caretaker of those children⁵

⁵ Based on offender entrants for whom an Auto Screener assessment was completed. Data reflect assessments completed closest to when the offender began supervision.

⁶ Based on offenders deemed “employable” according to job verifications completed closest to when they began supervision. Offenders are “employable” if they are not retired, disabled, suffering from a debilitating medical condition, receiving SSI, participating in a residential treatment program, participating in a residential sanctions program (i.e., incarcerated), or participating in a school or training program. Offenders who did not have job verification are neither considered employable nor unemployable.

- 29.2 percent were aged 25 or younger; and
- 7.9 percent reported that their living arrangement was unstable at intake⁷.

Further, many of our offenders do not have supportive family relationships, particularly those who have served long periods of incarceration. Economic hardship only increases the difficulties faced by offenders in obtaining employment and housing. Despite these challenges, in FY 2015, CSP saw that the overwhelming majority of offenders (91.9 percent) were not revoked to incarceration. In addition, 68.1 percent of case closures in FY 2015 were characterized as successful completions of supervision.

CSP is encouraged by these outcomes as we recognize that **recidivism places an enormous burden on the offender's family, the community and the entire criminal justice system.** We monitor revocation rates and other related factors, as well as monitor and adjust (as needed) our interventions to meet offender needs. Revoked offenders often return to CSP supervision. Of the 6,461 offenders who entered supervision in FY 2015, 24.7 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 our specialized populations in an attempt to reduce recidivism and increase successful completion of supervision.** In FY 2015, CSP created a new domestic violence supervision team and increased the number of supervision staff allocated to our mental health supervision teams to reduce supervision caseloads for these specialized case types. This realignment builds upon previous efforts to reallocate and direct resources to increase specialized supervision and support programming for our female, young adult, mental health, warrant status and sex offenders.

A continuing challenge for CSP, and all law enforcement entities, is the detection and treatment of synthetic drug use (cannabinoids and cathinones), such as 'bath salts', 'K2' and 'Spice', by our offender population. 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 and PSA have been involved in several studies to examine the prevalence of sythetic drug use in our populations and, beginning in FY 2016, PSA began testing most CSP samples for the presence of today's more commonly-used sythetic cannabinoid substances.

⁷ Based on home verifications completed closest to when each offender began supervision. Offenders are considered to have "unstable housing" if they reside in a homeless shelter, halfway house through a public law placement, transitional housing, hotel or motel, or has no fixed address. Programs funded by the U.S. Department of Housing and Urban Development (HUD) use a more comprehensive definition of homelessness and housing instability to include, for example, persons living with friends or family members on a temporary basis and persons in imminent danger of losing their current housing. CSOSA does not routinely track a number of factors considered in HUD's definition. Therefore, reported figures may underestimate the percentage of offenders living in unstable conditions.

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

| FY 2015 INTAKES | FY 2015 SUPERVISED POPULATION | FY 2015 EXITS |
|--|--|---|
| <p style="text-align: center;">Total: 6,461</p> <p>259 Parole 1,333 Supervised Release 4,309 Probation 296 DSA 264 CPO</p> <p style="text-align: center;"><u>Characteristics at intake</u></p> <ul style="list-style-type: none"> • 25 percent had previously been under CSOSA supervision at some point within the last three years • 82 percent self-reported having a history of substance use² • 55 percent were unemployed³ • 32 percent had less than a high school education • 8 percent resided in unstable conditions⁴ • 36 percent self-reported diagnosed mental health conditions; an additional 5 percent self-reported undiagnosed conditions² • 64 percent self-reported having children; 19 percent of those with dependent-age children reported being the primary caretaker of those children² | <p style="text-align: center;">Supervised 18,427 unique offenders over the course of the fiscal year and approximately 12,000 offenders on any given day</p> <ul style="list-style-type: none"> • Approximately 36 percent of offenders assessed and supervised by CSP at the highest risk levels¹ • 23 percent aged 25 and under • 17 percent female • 20 percent of offenders were rearrested while under supervision • 53 percent of the tested population⁵ tested positive for illicit substances (excluding alcohol and synthetic drugs) • CSOs issued AVRs to the releasing authority for 24 percent of supervised offenders | <p style="text-align: center;">Total: 7,738</p> <p>527 Parole 1,622 Supervised Release 5,055 Probation 307 DSA 227 CPO</p> <p style="text-align: center;"><u>Supervision outcomes</u></p> <ul style="list-style-type: none"> • 68 percent of cases closed successfully • 92 percent of the unique offenders supervised in FY 2015 were not revoked to incarceration |

¹ CSOSA assesses the risk to public safety posed by offenders during supervision at intake using a validated instrument known as the Auto Screener. Auto Screener assessments are based on both the offender’s static characteristics (e.g., criminal history, sex) as well as the latest available dynamic risk factors (e.g., employment status, pro-social community support, drug test results). Offenders are reassessed every six months while they remain on supervision, though they may be reassessed sooner if an event occurs that may impact an offender’s risk level (e.g., the offender is rearrested, gains/loses employment). Risk assessments are not required for misdemeanants residing outside of DC who are supervised primarily by mail and kiosk, or for offenders while they are in monitored or warrant statuses.

² Reported estimates are based on offender entrants for whom an Auto Screener was completed. Data reflect assessments completed closest to when the offender began supervision.

³ Based on offenders who are deemed “employable” according to job verifications completed closest to when each offender began supervision. Offenders are “employable” if they are not retired, disabled, suffering from a debilitating medical condition, receiving SSI, participating in a residential treatment program, participating in a residential sanctions program (i.e., incarcerated), or participating in a school or training program. Offenders who do not have job verifications are neither considered employable nor unemployable.

⁴ Based on home verifications completed closest to when each offender began supervision. Offenders are considered to have “unstable housing” if they reside in a homeless shelter, halfway house through public law placement, transitional housing, hotel or motel, or have no fixed address. Programs funded by the U.S. Department of Housing and Urban Development (HUD) use a more comprehensive definition of homelessness and housing instability to include, for example, persons living with friends or family members on a temporary basis and persons in imminent danger of losing their current housing. CSOSA does not routinely track a number of factors considered in HUD’s definition. Therefore, reported figures may underestimate the percentage of offenders residing in unstable conditions.

⁵ Includes all offenders in active status during a reporting month who were supervised at the medium, maximum or intensive level.

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.

In FY 2015, PSA supervised over 18,000 defendants, and had oversight of approximately 4,000 individuals on any given day. The vast majority of supervised defendants are awaiting trial in DC Superior Court, with a smaller number awaiting trial in US District Court. PSA’s current caseloads include individuals being supervised on a full range of charges from misdemeanor property offenses to felony murder. On average, defendants remain under supervision for 87 days. During this period, PSA administers evidence-based and data informed risk assessment and supervision practices to identify factors related to pretrial misconduct and maximize the likelihood of arrest-free behavior and court appearance during the pretrial period.

PSA’s mission is to promote pretrial justice and enhance community safety. Consistent with its mission—and the legal status of pretrial defendants—PSA measures achievement of its critical outcomes through three measures:

- ✓ ***Arrest-Free Rate*** - *percentage of defendants who remain arrest-free during the pretrial release period.*
- ✓ ***Appearance Rate*** – *percentage of defendants who make all scheduled court appearances during the pretrial period.*
- ✓ ***Continued Pretrial Release*** – *percentage of defendants who remain on release at the conclusion of their pretrial period without a pending request for removal or revocation due to non-compliance.*

In FY 2015, PSA exceeded its outcome measure targets:

- ✓ 89 percent of released defendants remained arrest free, exceeding the established target by 1 percent.
- ✓ 88 percent of released defendants also made all scheduled court appearances, exceeding the established target rate by 1 percent.
- ✓ 88 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, exceeding the established target rate by 3 percent.

PSA's *FY 2017 President's Budget (PB)* reinforces the Agency's commitment to be a performance-based, results-driven organization that can directly link costs with outcomes. It highlights the Agency's dedication to ensuring public safety and promoting pretrial justice through high-quality risk assessment, supervision and treatment services. PSA will continue to improve its identification of defendants who pose a higher risk of pretrial failure, enhance its supervision and oversight of these defendants, expand services and support of persons with substance dependence and mental health needs, and lead efforts in implementing drug testing strategies to keep pace with emerging drug use trends.

During the past three years, PSA has worked with various criminal justice, research, health, and policy partners to assess the prevalence of synthetic cannabinoids in the defendant and offender populations in the District of Columbia. Often referred to as "synthetic marijuana," synthetic cannabinoids exist in several different forms, with newer ones being synthesized and added to the class rapidly. As the use of synthetic drugs increases, the risk to public safety and public health is expected to correspondingly escalate.

To detect and swiftly respond to the use of these synthetic substances with appropriate supervision and treatment, PSA requires additional funding to further expand drug testing operations to better detect the use of synthetic cannabinoids, and to also begin detection of synthetic cathinones, another class of synthetics, which includes "bath salts". PSA's FY 2017 PB includes resources to fund systems enhancements, staff and operating costs to increase its capacity to perform in-house testing of offender and defendant samples for synthetic substances.

Due to the urgency of the issue, PSA has temporarily allocated existing FY 2015 and FY 2016 financial resources to purchase reagents to begin limited screening for synthetic cannabinoids beginning October 1, 2015. Even though PSA is able to fast track limited screening for synthetic cannabinoids ahead of the planned schedule, in order to establish a sustainable in-house testing strategy for synthetic substances, PSA will require the additional funding requested in its FY 2017 PB. Without expansion of its synthetic drug testing capabilities, both PSA and CSP will be significantly restrained in their ability to detect and respond to the emerging trend of synthetic drug use within the DC criminal justice population, which places both agencies at risk of negatively impacting their missions to enhance public safety.

PSA's FY 2017 PB also includes resources to better address the substance use treatment needs of defendants accused of DC Code offenses prosecuted by the DC Office of the Attorney General (OAG). These include individuals charged with Driving Under the Influence (DUI), Operating While Impaired (OWI), and Driving While Intoxicated (DWI). While PSA has consistently provided supervision for this population, due to funding limitations, it has never been able to provide treatment services to those in need. PSA's FY 2017 PB includes a proposal to fund contract treatment services for high-risk/need defendants awaiting trial on these traffic-related charges.

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. The primary elements of CSP's Strategic Plan are outlined below:

- Establish strict accountability and prevent the population supervised by CSOSA from engaging in criminal activity.
- Deliver 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 to encourage 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 are fundamental to CSOSA's efforts. They unite CSP's and PSA's strategic plans, operations, and budgets.

FY 2017 President’s Budget Request (CSOSA: CSP and PSA)

The FY 2017 CSOSA President’s Budget request (CSP and PSA) totals \$248,008,000, an increase of \$3,245,000 or 1.3 percent above the FY 2016 Enacted.

The \$3,245,000 FY 2017 increase over the FY 2016 Enacted budget consists of net Adjustments to Base (ATB) totaling \$229,000 and \$3,016,000 in requested Program Changes.

CSOSA (CSP and PSA)

- The FY 2017 Budget request for CSP is \$182,721,000, an increase of \$315,000 or 0.17 percent over the FY 2016 Enacted budget.
- The FY 2017 Budget request for PSA is \$65,287,000, an increase of \$2,930,000, or 4.7 percent, above the FY 2016 Enacted budget.

FY 2012 – FY 2017 Budget History:

| | Thousands of Dollars | | | | | | Increase from FY 2016 Enacted | |
|--|----------------------|----------------------------|-----------------|--------------------|--------------------|--------------------|-------------------------------|-------------|
| | FY 2012 Enacted | FY 2013 Enacted | FY 2014 Enacted | FY 2015 Enacted | FY 2016 Enacted | FY 2017 PB Request | Amount | Percent |
| Community Supervision Program – Annual | 153,548 | 145,517 | 167,269 | 164,155 | 179,247 | 182,721 | 3,474 | 1.9 |
| Community Supervision Program – 3 Year | 0 | 0 | 0 | 9,000 ⁴ | 3,159 ⁵ | 0 | -3,159 | -100 |
| Sub-Total – CSP | 153,548 | 145,517 | 167,269 | 173,155 | 182,406 | 182,721 | 315 | 0.17 |
| Pretrial Services Agency – Annual | 58,435 | 55,378 | 59,215 | 60,845 | 62,357 | 65,287 | 2,930 | 4.7 |
| Pretrial Services Agency – 3 Year | 1,000 ¹ | 948 ³ | 0 | 0 | 0 | 0 | 0 | 0 |
| Sub-Total – PSA | 59,435 | 56,326 | 59,215 | 60,845 | 62,357 | 65,287 | 2,930 | 4.7 |
| CSOSA Appropriation Total | 212,983 | 201,843² | 226,484 | 234,000 | 244,763 | 248,008 | 3,245 | 1.3 |

¹ The FY 2012 Enacted budget contained Three-Year (FY 2012-2014) 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 three-year resources (FY 2013-2015) 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.

⁴ The FY 2015 Enacted budget contains Three-Year (FY 2015-2017) resources for the relocation of CSP offender supervision field offices.

⁵ The FY 2016 Enacted budget contains Three-Year (FY 2016-2018) resources for the relocation of CSP offender supervision field offices.

FY 2014 – FY 2017 CSOSA Budget: Summary of Change

| | Community Supervision Program | | Pretrial Services Agency | | CSOSA Appropriation | |
|--|-------------------------------|------------|--------------------------|------------|---------------------|--------------|
| | Amount | FTE | Amount | FTE | Amount | FTE |
| FY 2014 Enacted Budget | \$167,269 | 880 | \$59,215 | 365 | \$226,484 | 1,245 |
| Changes to FY 2015 Base: | | | | | | |
| Prior-Year Cost Adjustments | 826 | 5 | 157 | 7 | 983 | 12 |
| 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 | 5 | 1,030 | 7 | -3,191 | 12 |
| FY 2015 Program Changes: | | | | | | |
| CSP Field Unit Relocation | 9,000 | 0 | 0 | 0 | 9,000 | 0 |
| CSP/PSA Contract Drug Treatment | 1,107 | 0 | 600 | 0 | 1,707 | 0 |
| Sub-Total, FY 2015 Program Changes | 10,107 | 0 | 600 | 0 | 10,707 | 0 |
| FY 2015 Enacted Budget | \$173,155 | 885 | \$60,845 | 372 | \$234,000 | 1,257 |
| Changes to FY 2016 Base: | | | | | | |
| FY 2016 Pay Raise and Retirement Benefit Cost Increase | 1,738 | 0 | 670 | 0 | 2,408 | 0 |
| FY 2016 Non-Payroll Inflation | 1,404 | 0 | 142 | 0 | 1,546 | 0 |
| FY 2015 Non-Recurring Resources (FY 2015 Field Unit Relocation) | -3,168 | 0 | 0 | 0 | -3,168 | 0 |
| Sub-Total, Adjustments to FY 2016 Base | -26 | 0 | 812 | 0 | 786 | 0 |
| FY 2016 Program Changes: | | | | | | |
| CSP Field Unit Relocation | 3,159 | 0 | 0 | 0 | 3,159 | 0 |
| CSP Offender Drug Treatment | 2,500 | 0 | 0 | 0 | 2,500 | 0 |
| CSP/PSA Telecommunications System | 1,662 | 0 | 0 | 0 | 1,662 | 0 |
| CSP Offender Case Management system Re-Design | 1,200 | 0 | 0 | 0 | 1,200 | 0 |
| CSP/PSA Electronic Document Records Management system | 756 | 2 | 700 | 1 | 1,456 | 3 |
| Sub-Total, FY 2016 Program Changes | 9,277 | 2 | 700 | 1 | 9,977 | 3 |
| FY 2016 Enacted Budget | \$182,406 | 887 | \$62,357 | 373 | \$244,763 | 1,260 |

| | Community Supervision Program | | Pretrial Services Agency | | CSOSA Appropriation | |
|---|-------------------------------|------------|--------------------------|------------|---------------------|--------------|
| | Amount | FTE | Amount | FTE | Amount | FTE |
| FY 2016 Enacted Budget | \$182,406 | 887 | \$62,357 | 373 | \$244,763 | 1,260 |
| | | | | | | |
| Changes to FY 2017 Base: | | | | | | |
| FY 2016 Non-Recurring Resources (FY 2016 Field Unit Relocation) | -1,298 | 0 | 0 | 0 | -1,298 | 0 |
| FY 2016 Non-Recurring Resources (FY 2016 Telecommunications System) | -1,662 | 0 | 0 | 0 | -1,662 | 0 |
| FY 2016 Non-Recurring Resources (FY 2016 Records Management System) | -220 | 0 | -500 | 0 | -720 | 0 |
| FY 2017 Pay Raise Increase | 1,847 | 0 | 817 | 0 | 2,664 | 0 |
| FY 2017 Non-Pay Inflation Increase | 1,114 | 0 | 131 | 0 | 1,245 | 0 |
| Sub-Total, Adjustments to FY 2017 Base | -219 | 0 | 448 | 0 | 229 | 0 |
| | | | | | | |
| FY 2017 Program Changes: | | | | | | |
| CSP/PSA Synthetic Drug Testing | 534 | 0 | 2,082 | 1 | 2,616 | 1 |
| PSA Contract Drug Treatment | 0 | 0 | 400 | 0 | 400 | 0 |
| Sub-Total, FY 2017 Program Changes | 534 | 0 | 2,482 | 1 | 3,016 | 1 |
| | | | | | | |
| FY 2017 Budget Request | \$182,721 | 887 | \$65,287 | 374 | \$248,008 | 1,261 |
| | | | | | | |
| Increase from FY 2016 Enacted Budget | +\$315 | | +\$2,930 | | +\$3,245 | |
| Percent Increase from FY 2016 Enacted Budget | +0.17% | | +4.7% | | +1.3% | |

FY 2017 Community Supervision Program: (+\$315,000 Net Increase Above FY 2016 Enacted Budget):

| | | |
|---|-------------------|--------------|
| I. Community Supervision Program – Net Adjustments to Base | -\$219,000 | 0 FTE |
|---|-------------------|--------------|

FY 2016 Field Unit Relocation Adjustment -\$1,298,000 0 positions 0 FTE

The FY 2016 Enacted Budget contains \$3,159,000 to relocate CSP field unit locations and develop a long-term space acquisition plan. Only \$1,861,000 of this FY 2016 funding request remains in our base for FY 2017 to support increased tenant costs at the replacement locations; \$1,298,000 (\$3,159,000 - \$1,861,000) non-recurs in FY 2016.

FY 2016 Agency Telecommunications System Adjustment -\$1,662,000 0 positions 0 FTE

The FY 2016 Enacted Budget contains \$1,662,000 to procure and deploy a new Agency (CSP/PSA) telecommunications system. Funding for this initiative non-recurs in FY 2017.

FY 2016 Agency Records Management System Adjustment -\$220,000 0 positions 0 FTE

The FY 2016 Enacted Budget contains \$756,000 to procure and deploy a new Agency (CSP/PSA) electronic document records management system (EDRMS). Only \$536,000 of this FY 2016 funding request remains in our base for FY 2017 to support permanent systems and staff costs associated with the EDRMS.

FY 2017 Pay Raise Increase \$1,847,000 0 positions 0 FTE

The FY 2017 President’s Budget requests resources to fund the anticipated 2017 pay raise.

FY 2017 Non-Pay Inflationary Increases \$1,114,000 0 positions 0 FTE

The FY 2017 President’s Budget requests \$1,114,000 as an ATB to fund cost increases to non-personnel cost categories, including rents and contracts.

| | | |
|--|-------------------|--------------|
| II. Community Supervision Program –Program Change | +\$534,000 | 0 FTE |
|--|-------------------|--------------|

FY 2017 CSP Offender Synthetic Drug Testing

CSP requests **\$534,000** in FY 2017 resources to test our offender population for synthetic substances.

CSP is faced with the need to identify and appropriately respond to the use of two new classes of drugs being used within the District of Columbia: synthetic cannabinoids and synthetic cathinones.

The use of synthetic drugs by CSP offenders is believed to be prevalent and our current inability to test most offender drug samples for these substances and provide immediate interventions is a significant impediment to effective supervision.

Synthetic cathinones are a class of drugs containing an amphetamine-like stimulant that naturally occurs in the khat plant. Synthetic cathinones are known by a number of aliases, including “bath salts.”

Synthetic cannabinoids are a new class of synthetic designer drugs that are being used as a less expensive and less risky alternative to marijuana. The synthetic cannabinoid materials are meant to mimic the effects of cannabis on the human brain.⁸ However, these substances, and their effects on people, are in fact often significantly different than marijuana. The effects of synthetic cannabinoids vary by compound and may result in any number of ill effects, including seizures and psychoses. They are referred to by a variety of street names, including “Black Mamba”, “K2” and “Spice.” Several different forms of these drugs exist, and newer ones are frequently synthesized and added to the class in order to evade legal restrictions on identified compounds. Because these drugs are often developed in underground labs, the amount and types of compounds in a synthetic drug can vary widely. This endless supply of newer and varied forms of the drug has resulted in the lack of a validated and standardized database of scientific information on the metabolites and testing procedures. Therefore, identifying these synthetic cannabinoids and their metabolites has been an analytical challenge for laboratories.

PSA is requesting resources in its FY 2017 budget for systems enhancements, staff and operating costs to increase its capacity to test offender and defendant samples for synthetic cannabinoid and cathinone drugs. As a result, CSP requests **\$534,000** in FY 2017 resources to fund drug testing supplies (chemical re-agents) to be reimbursed to PSA for the testing of CSP offender samples for synthetic substances.

⁸ National Institute of Drug Abuse: K2/Spice (Synthetic Drugs) December 2012.

Pretrial Services Agency: (+\$2,930,000 Increase Above FY 2016 Enacted)

| | | |
|---|-------------------|--------------|
| I. Pretrial Services Agency – Net Adjustment to Base | +\$448,000 | 0 FTE |
|---|-------------------|--------------|

| | | | |
|--|-------------------|--------------------|--------------|
| FY 2016 Agency Electronic Document Records Management System Adjustment | -\$500,000 | 0 positions | 0 FTE |
|--|-------------------|--------------------|--------------|

The FY 2016 Enacted budget contains \$700,000 to procure and deploy a new Agency (CSP/PSA) electronic document records management system (EDRMS). Only \$200,000 of this FY 2016 funding request remains in the PSA base for FY 2017 to support permanent systems and staff costs associated with the EDRMS.

| | | | |
|--------------------------|------------------|--------------------|--------------|
| FY 2017 Pay Raise | \$817,000 | 0 positions | 0 FTE |
|--------------------------|------------------|--------------------|--------------|

This request represents the anticipated 2017 pay raise to be effective January 2017 through September 2017.

| | | | |
|---|------------------|--------------------|--------------|
| FY 2017 Non-Pay Inflation Increase | \$131,000 | 0 positions | 0 FTE |
|---|------------------|--------------------|--------------|

This request applies projected FY 2017 cost increases to non-payroll cost categories including rent, utilities, supplies, equipment, and contracts.

| | | |
|---|---------------------|--------------|
| II. Pretrial Services Agency – Program changes | +\$2,482,000 | 1 FTE |
|---|---------------------|--------------|

| | | | |
|---|--------------------|-------------------|--------------|
| Strategy to Address Synthetic Drug Use | \$2,082,000 | 1 position | 1 FTE |
|---|--------------------|-------------------|--------------|

| Program Area | Increase in FTE | Increase in Funding | |
|---|------------------------|----------------------------|----------------------------|
| Contractor Support to Upgrade Information Management Infrastructure | 0 | +\$1,800,000 | One-time; Non-recurring |
| Laboratory Personnel | 1 | +\$112,000 | Permanent; Recurring |
| Operating Costs | 0 | +170,000 | Permanent; Recurring |
| Total Requested Program Increase | 1 | +\$2,082,000 | |

PSA requests \$2,082,000 in FY 2017 resources to establish a comprehensive in-house synthetics testing program, using available state-of-the-science technology to mitigate the risk posed by users of these substances. In addition, establishment of an in-house synthetic testing program will allow PSA to conduct more in-depth testing for CSP and for Family Court respondents. Establishment of this testing program will allow PSA to provide critical trend information, which will not only support achievement of PSA’s and CSP’s missions to enhance public safety, but will also provide information that will be of use to the District of Columbia criminal justice system as a whole.

PSA’s existing Drug Testing Management System (DTMS), which is used for recording drug testing data, needs to be redesigned in order to have the flexibility to accommodate an unlimited number of substances for testing (including additional synthetics). The redesign would include upgrades to the core database, user interface and system reports. In addition, existing data must be converted to the new format, data interfaces with toxicology analyzers will have to be enhanced, and internal and external interfaces to other systems such as PSA’s Pretrial Real-time Information System Manager (PRISM) and CSP’s Supervision and Management Automated Record Tracking (SMART) system have to be enriched. PRISM will also have to be modified to support the reporting of results for an increased number of substances. PSA’s Office of Information Technology estimates that the upgrade project can be completed over an 18-month period with contractor support at a one-time cost of \$1.8 million.

One additional full time equivalent (FTE) is required to accommodate the increased duties associated with synthetic testing and data analysis. These duties include consolidation and extraction of specimens, liquid chromatography–tandem mass spectrometry (LC-MS/MS) testing, analyzing and interpreting results and posting them to the Agency’s information management systems for retrieval by PSA staff and its partner agencies, including CSP and DC Superior Court Family Division.

PSA estimates annual operating costs for the LC-MS/MS instrument to be approximately \$170,000. This estimate is for supplies, materials and consumables, such chemicals, solvents, reagents, test columns and other materials, necessary to conduct testing.

| | | | |
|--------------------------------|-------------------|--------------------|--------------|
| Contract Drug Treatment | +\$400,000 | 0 Positions | 0 FTE |
|--------------------------------|-------------------|--------------------|--------------|

PSA requests \$400,000 in FY 2017 resources for Contract Drug Treatment funding to address the unmet treatment needs of the high-risk/need defendants accused of DC Code offenses prosecuted by the DC Office of the Attorney General (OAG). These include individuals charged with Driving Under the Influence (DUI), Operating While Impaired (OWI), and Driving While Intoxicated (DWI).

Presently, many defendants who shift to the use of synthetic substances avoid detection while under supervision. However, as PSA strengthens and expands its drug testing capabilities for synthetic substances, the number of defendants who test positive for drug use and who are assessed to need treatment services will increase. This additional funding will also provide treatment services to address the use of synthetic substances in the District.

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

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

In FY 2015, CSP monitored or supervised approximately 12,000 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, 40.3 percent were supervised as part of a specialized supervision caseload (e.g., sex offender, mental health and domestic violence), over 15 percent were female and approximately 20 percent were under the age of 25. Approximately 36.5 percent of eligible offenders were assessed, classified and supervised at the highest risk levels (maximum and intensive).

In FY 2015, PSA supervised over 18,000 defendants, and had oversight of approximately 4,000 individuals on any given day. The vast majority of defendants are awaiting trial in DC Superior Court, with a smaller number awaiting trial in US District Court. PSA's current caseloads include individuals being supervised on a full range of charges from misdemeanor property offenses to felony murder. During this period, PSA administers evidence-based and data informed risk assessment and supervision practices to identify factors related to pretrial misconduct and maximize the likelihood of arrest-free behavior and court appearance during the pretrial period.

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

While the period of supervision varies according to the individual's status, offenders typically remain under CSP supervision for the following durations⁹:

Probation: 18.6 to 19.4 months;

Parole¹⁰: 11.9 to 14.6 years; and

Supervised Release: 42.6 to 43.6 months

The length of pretrial supervision varies, since it is a function of the time needed to adjudicate a criminal case. During FY 2015, defendants under PSA supervision spent an average of 87 days on supervision.

⁹ Values represent the 95% confidence interval around the average length of sentence for the CSP's FY 2015 Total Supervised Population.

¹⁰ Life sentences have been excluded.

3. How many offenders/defendants entered CSOSA supervision in FY 2015?

In FY 2015, 6,461 offenders entered CSP supervision; 4,869 men and women sentenced to probation by the Superior Court for the District of Columbia and 1,592 individuals released from incarceration in a Federal Bureau of Prisons facility on parole or supervised release. In FY 2015, approximately 64 percent of prison releases transitioned directly from prison to CSP supervision, bypassing a BOP Residential Re-entry Center (also known as halfway house).

Defendants are placed into PSA supervision programs during the pretrial release period based on the release conditions ordered by the Court. In FY 2015, PSA supervised 18,791 defendants, including 14,313 defendants who were placed into supervision during the year and 4,478 defendants whose supervision continued from FY 2014.

4. Of the 6,461 offenders entering CSP supervision in FY 2015, how many had been under CSP's supervision within the previous three years?

Roughly 25 percent of the offenders entering supervision in FY 2015 had been under CSP supervision at some point in the three years prior to their FY 2015 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 scientifically validated risk assessment instrument (RAI) that examines relevant defendant data to help identify the most appropriate supervision levels for released defendants. The assessment scores various risk measures and assigns weights for each item that is 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 provides a guideline for determining each defendant's risk level. This risk level designation informs the recommendation made by PSA at arraignment and, for defendants released to PSA while awaiting trial, the level and nature of supervision required to 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 and statutory guidelines. If pretrial 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 release 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 have illicit substance treatment needs?

CSP performed a review of FY 2014 offender intakes to determine illicit substance abuse treatment needs. In FY 2014, a total of 7,724 offenders entered CSP supervision. 82.3 percent of these offender intakes with Auto-Screener data self-reported a history of illicit substance use at or near the beginning of their supervision period. 2,621, or 34 percent, of the FY 2014 offender intakes were classified by CSP as persistent drug users¹¹ within one year of their supervision start date. Of these persistent drug users, 1,548 had a special condition for drug treatment imposed by the Court or the U.S. Parole Commission during their first year of supervision. Nearly 60 percent (1,499) of the persistent drug users were assessed and supervised by CSP at the highest risk levels (maximum and intensive combined) at some point during their first year of supervision.

7. What portion of offenders and defendants entering CSOSA supervision in FY 2015 had mental health issues?

Based upon self-reported information obtained from the CSP Auto Screener, forty-one (41) percent of FY 2015 offender intakes reported mental health issues. Of the offenders who began supervision with CSP in FY 2015 and who completed an Auto Screener, 36 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 5.0 percent of the FY 2015 entry population reported an undiagnosed mental health condition.

Of the 18,791 total cases supervised in PSA programs in FY 2015, 2,295 cases (12 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.

¹¹ 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 within one year of their supervision start date.

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.

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'. Nearly nine (9) percent of the FY 2015 average daily offender population had unstable housing. Three-fourths 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 2015 new offender entrants for whom family information was available in a completed CSP Auto Screener, almost two-thirds (64.3 percent) reported having children. Of those with children, 94.6 percent had dependent children (under age 18). Roughly one-fifth of offenders with dependent children (19.4 percent) identified themselves as the primary caretakers of their dependents; and 28.6 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 2015, CSP supervised 37 offenders under the age of 18 who were convicted as adults. In FY 2015, CSP supervised approximately 20 offenders each month (or less than one 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?

Roughly one-fifth of CSP's September 30, 2015 offender population were aged 25 or under. Analysis of our data has shown that our young adult offenders¹² are less compliant with supervision and intervention strategies, pose a higher risk for re-offending/re-arrest and exhibit

¹² Offenders age 25 and younger.

high 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 15 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:

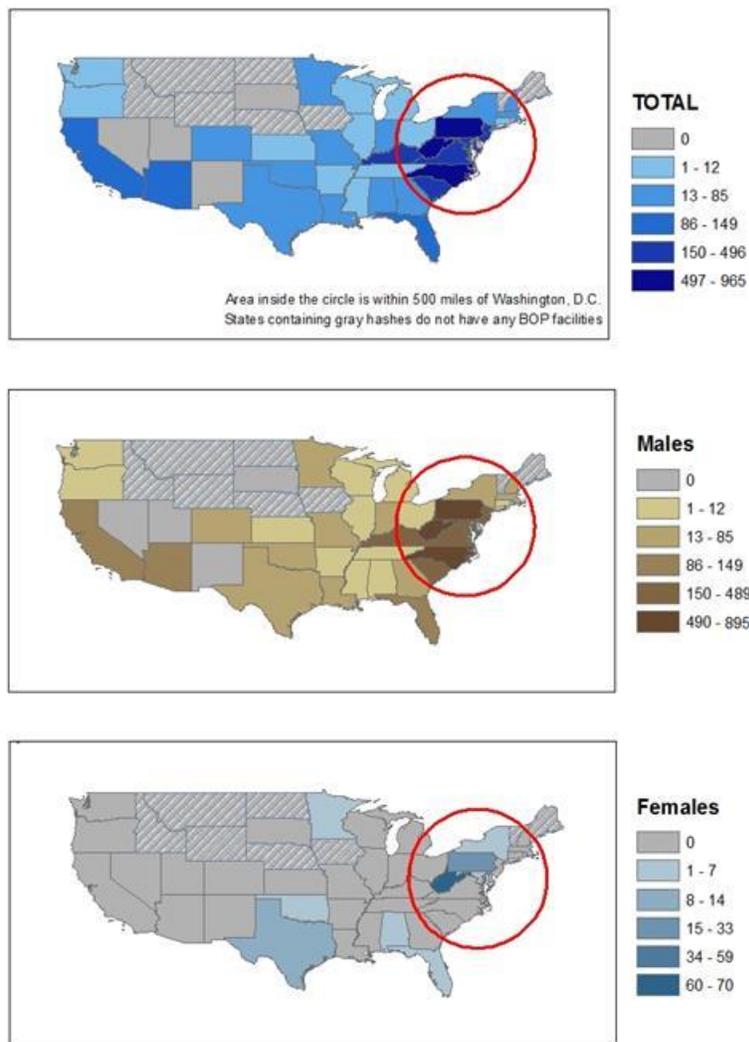
- Re-organized existing CSO resources to create four supervision teams dedicated to only supervising female offenders.
- Converted one male unit of our Re-entry and Sanctions Center into a unit for female offenders with mental health and substance abuse issues.
- Re-organized existing resources to establish 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 2015, 1,592 individuals were released from BOP facilities and entered CSP supervision on parole or supervised release.

On September 30, 2015, there were **4,780** inmates (4,633 male; 147 female) housed in facilities managed by or under contract with the Federal Bureau of Prisons (BOP) following adjudication in DC Superior Court. The states with the highest population of DC offenders were West Virginia (965), Pennsylvania (739) and North Carolina (535). The leading three states housing male inmates were West Virginia (895), Pennsylvania (720) and North Carolina (535). The leading three states housing female inmates were West Virginia (70), the District of Columbia (21) and Pennsylvania (19). These estimates do not include 253 inmates who were in-transit to or from a BOP facility on September 30, 2015.



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

CSP had 289 total, on-board CSO employees as of September 2015 performing offender supervision, diagnostic and investigative functions.

PSA had 148 Pretrial Services Officers/Assistant Pretrial Services Officers in FY 2015 performing defendant diagnostic, supervision or treatment-related services.

Thirty-two (32) 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, 2015 the overall ratio of supervised offenders to on-board supervision CSO staff is **47.45:1**; 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, 2015)

| Offender Case Type | Supervised Offenders | Supervision CSOs | Caseload Ratio |
|---|-----------------------------|-------------------------|-----------------------|
| Special Supervision (Sex Offenders, Mental Health, Domestic Violence) | 4,497 | 116 | 38.77:1 |
| General Supervision | 3,174 | 80 | 39.68:1 |
| Interstate Supervision | 2,053 | 30 | 68.4:1 |
| Sub-Total | 9,724 | 226 | 43.03:1 |
| Warrant Team | 1,213 | 7 | NA |
| Kiosk Reporting | 213 | 2 | 106.5:1 |
| TOTAL | 11,150 | 235 | 47.45:1 |

16. What are the defendant supervision ratios for PSA?

PSA Supervision Caseload Ratio Averages Fiscal Year 2015

| Category | PSOs | Cases- Defendants Based | Ratios | Functional Description |
|--|------------|-------------------------------|-------------|---|
| General Supervision | | | | |
| Extensive Supervision | 35 | 1,965 | 1:56 | Medium-to-high risk defendants with drug testing, stay away, and reporting conditions |
| Condition Monitoring/ Courtroom Support ^{Note 1} | 6 | 336 | 1:56 | Low risk defendants requiring minimal level supervision |
| High Intensity Supervision (HISP) | 19 | 354 | 1:19 | High-risk defendants placed on electronic surveillance or home confinement |
| Halfway House (Work Release) | 2 | 78 | 1:39 | High-risk defendants ordered to the Department of Corrections halfway house; supervision may include other conditions |
| U.S. District Court | 5 | 162 | 1:32 | Felony and misdemeanor defendants charged in U.S. District Court |
| Subtotal – General Supervision | 67 | 2,895 | | |
| Treatment | | | | |
| Extensive Treatment ^{Note 2} | 9 | 165 | 1:18 | High-risk defendants ordered to substance use disorder and/or mental health treatment |
| Traffic Safety Supervision Unit (TSSU) | 4 | 317 | 1:79 | |
| Specialized Supervision Unit (SSU) | 20 | 623 | 1:31 | |
| Subtotal –Treatment | 33 | 1,105 | | |
| Total | 100 | 4,000 | 1:40 | |
| Released on Personal Recognizance without Supervision | | 1,255 | | |

^{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 and SBTT.

17. How many CSP offenders have used illicit drugs?

In FY 2015, 81.5 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 2015, by Drug (Self-Reported)

| Illicit Drug | Percentage of FY 2015 Entrants Reporting Use of the Drug | Average Age at First Use | Average Length of Use (Years) |
|--------------|--|--------------------------|-------------------------------|
| Marijuana | 69.1% | 16 | 11.4 |
| Cocaine | 32.7% | 24 | 13.6 |
| PCP | 30.4% | 21 | 8.4 |
| Opiates | 18.4% | 25 | 13.7 |

18. What is the arrest history of offenders entering CSP supervision in FY 2015?

Of the FY 2015 offender entrants with arrest histories identified by CSP's Auto Screener, roughly two-thirds self-reported having been arrested for property offenses, and three out of five reported having been arrested for drug-related offenses, in the past.

| Arrest Charge Type | Percentage with Arrest History ¹ | Average Age at First Arrest | Average Number of Arrests |
|----------------------|---|-----------------------------|---------------------------|
| Property Offense | 67.0% | 22 | 4.9 |
| Drug-Related Offense | 59.7% | 23 | 4.5 |
| Public Order | 54.2% | 25 | 3.8 |
| Simple Assault | 53.4% | 26 | 2.5 |
| Violent Offense | 49.5% | 23 | 2.7 |
| Traffic | 40.5% | 28 | 2.5 |
| Firearm Offense | 29.4% | 23 | 2.0 |
| Domestic Violence | 23.6% | 30 | 1.9 |
| Alcohol | 22.2% | 32 | 1.9 |
| Sex Offense | 7.8% | 26 | 1.5 |
| Prostitution | 5.0% | 30 | 2.8 |

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 2015, 89 percent of released defendants remained arrest free, exceeding the established target by 1 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. Attorney's 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 2015 Agency Financial Report, including audited financial statements, on November 16, 2015. CSOSA received an Unmodified (positive) opinion on the FY 2015 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 25, 2015, 347 high-risk CSP offenders were on GPS Electronic Monitoring. Over the course of FY 2015, 1,938 different offenders were placed on GPS 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 - 2015, comparing violations and rearrests in the sixty days before GPS activation to the sixty days after. The table below shows that, for all 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 – 2015

| | FY 2012 | | FY 2013 | | FY 2014 | | FY 2015 | |
|--------------------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| | Before GPS (60 Days) | While on GPS (60 Days) | Before GPS (60 Days) | While on GPS (60 Days) | Before GPS (60 Days) | While on GPS (60 Days) | Before GPS (60 Days) | While on GPS (60 Days) |
| Average Number of Violations | 5.3 | 7.8 | 5.2 | 6.7 | 5.7 | 8 | 5.2 | 7.1 |
| <i>Drug Violations¹</i> | 4.8 | 5.7 | 4.8 | 5.5 | 5.2 | 6.4 | 4.6 | 5.8 |
| <i>Non-Drug Violations</i> | 0.5 | 0.3 | 0.4 | 0.3 | 0.4 | 0.3 | 0.4 | 0.3 |
| <i>GPS Violations</i> | 0 | 1.8 | 0 | 0.9 | 0 | 1.3 | 0 | 1 |
| Total Rearrests While on Supervision | 85 | 12 | 45 | 14 | 31 | 11 | 80 | 20 |

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 roughly 9 times during the 60 days prior to GPS activation and 12 times during monitoring each year.

In addition, CSP had trained 1,913 staff from 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 2015, PSA supervised and monitored 1,324 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, 2015, 32 offenders were participating in the SRTP. During FY 2015, 55 of the 71 offenders (or 78 percent) eligible to complete the first 180 days of the SRTP 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 September 30, 2015, 1,760 total registrants were listed in the D.C. Sex Offender Registry, of which 1,057 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 2015 (October 1, 2014 – September 30, 2015), 189 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.mpd.dc.gov.

In FY 2013, 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 2015, CSOs conducted a total of 3,147 accountability tours for 2,532 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 2015, CSOs also conducted 40,887 home verifications for 9,211 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 2015, CSOs conducted 63,798 home visits for 9,627 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 filed AVRs for just under one-fourth (24.0 percent) of the FY 2015 Total Supervised Population. Although comparable to FY 2014, this is an increase compared to previous years, when CSP filed AVRs for roughly one out of five offenders annually. Offenders under supervised release are most likely to have AVRs filed, with more than one-third (35.2 percent) of offenders under supervised release having at least one AVR filed in FY 2015. Comparatively, one-fifth of probationers (19.9 percent) had AVRs filed in FY 2015. As of September 30, 2015, AVRs were filed for 2,119 offenders on parole/supervised release and 2,314 offenders on probation. Roughly 57 percent of all AVRs filed during the year were for 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 300 Indiana Avenue, NW, and 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.

CSP is currently working to relocate our 25 K Street, NE, 300 Indiana Avenue, NW, and 1418 Good Hope Road SE, offender supervision locations.

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.

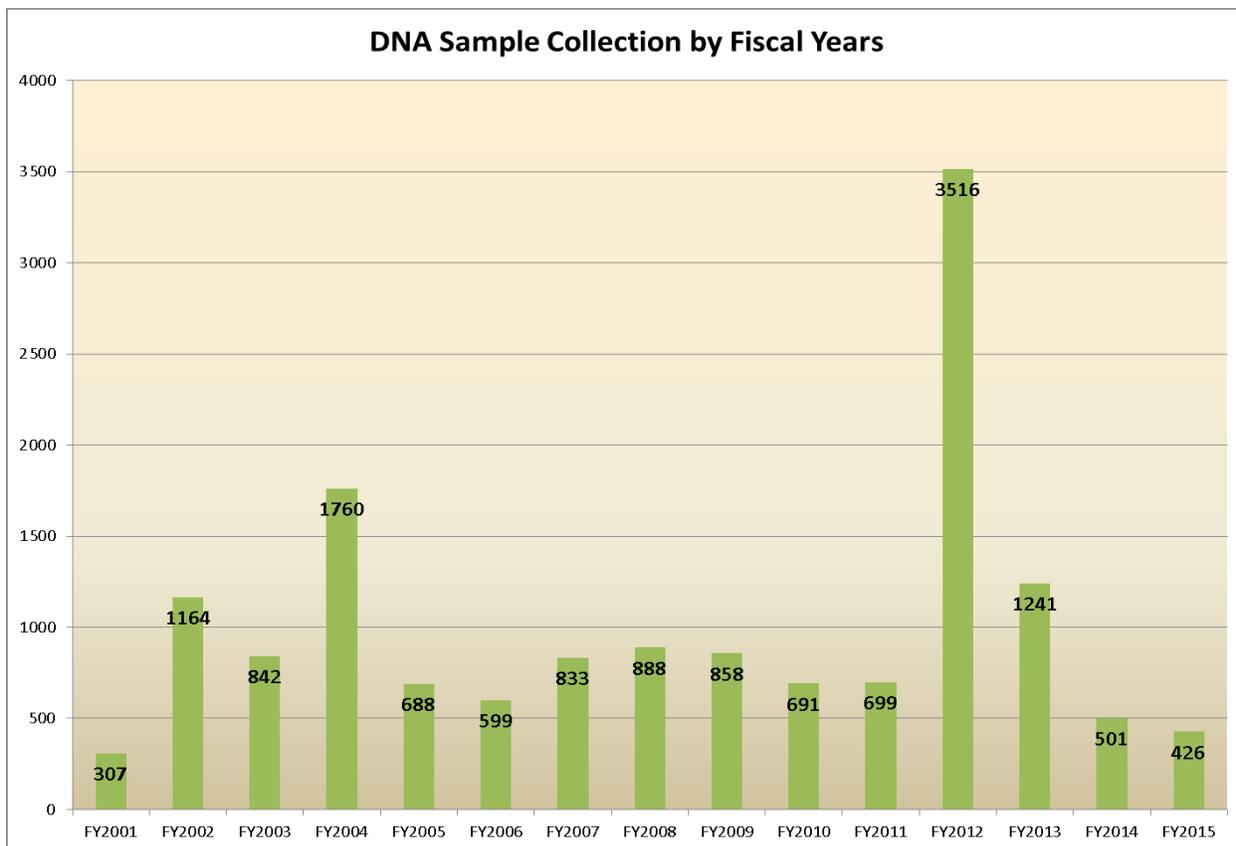
RSC offenders/defendants also receive counseling; a complete physical, psychological and behavioral assessment; and have a comprehensive treatment plan developed that includes referrals to an individualized continuum of inpatient, residential and/or daily outpatient substance abuse treatment programs.

In FY 2015, the RSC admitted a total of 928 high risk-offenders/defendants and discharged 803. Of the 803 discharges, 600 (74.7%) 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 15,013 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?

CSP uses contract Treatment, Transitional Housing and Halfway Back Sanctions funding to support 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, mental health assessments, and Day Reporting Center and Violence Reduction Program contract services.

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 and FY 2015 Enacted Budgets restored most of the Sequestration reductions. The FY 2016 Enacted Budget provides \$2,500,000 in additional resources to increase the number of high-risk, chronic substance abusers that can receive contract treatment and homeless offenders that can receive contract transitional housing.

| 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 | \$14,400,000 | +\$1,107,000 |
| FY 2016 | \$16,900,000 | +\$2,500,000 |

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

In FY 2015, CSP made 1,459 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.

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 2015 Placements |
|---|---------------------------|
| Detoxification | 55 |
| Residential Treatment | 588 |
| Outpatient Treatment | 262 |
| Sanctions-Based Treatment | 117 |
| Transitional Housing | 437 |
| Total Contract Offender Placements | 1,459 |

In FY 2015, PSA made nearly 330 defendant placements in contracted substance abuse treatment which includes residential, transitional housing, intensive inpatient detoxification and/or intensive outpatient services.

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.

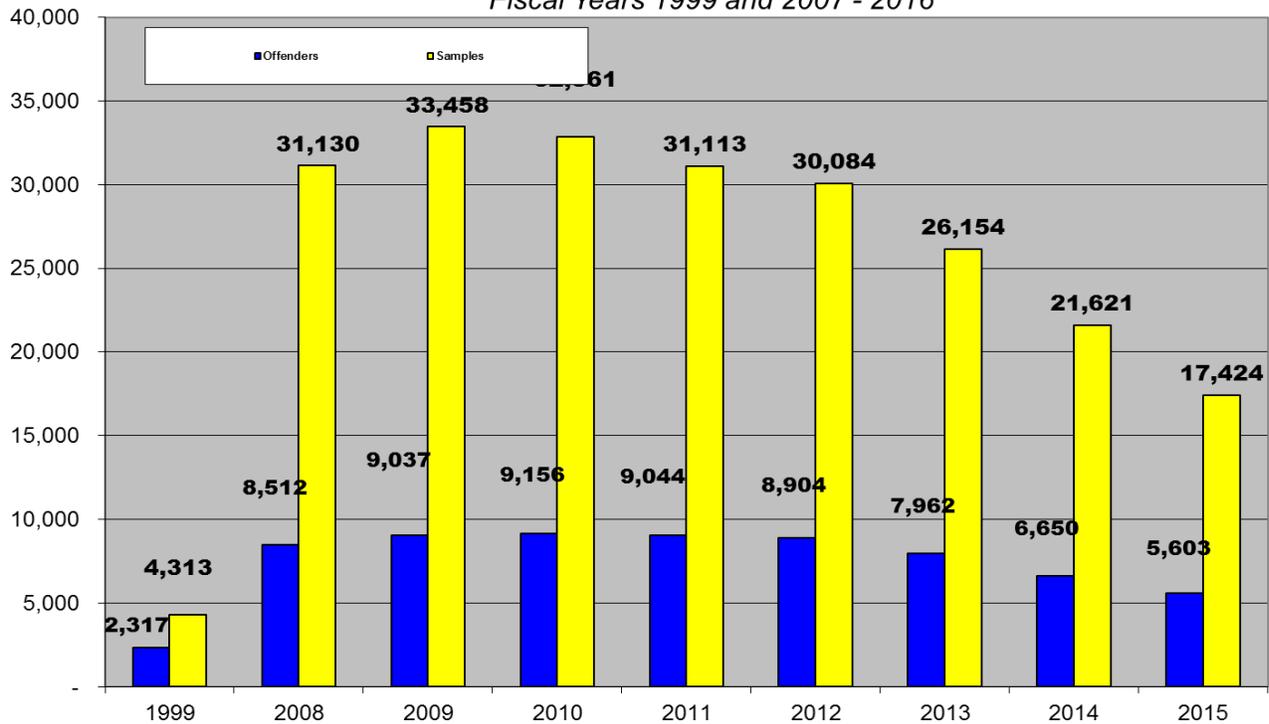
PSA attempts to obtain a baseline drug test for every defendant processed through lock-up. Subsequent testing is done pursuant to a court order. Defendants placed in PSA’s treatment programs are tested randomly and frequently, generally two to three times per week. Other defendants are tested on a fixed,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

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

In FY 2015, 82.6 percent of eligible offenders were drug tested once per month. CSP obtained an average of 17,424 drug samples from 5,603 offenders per month in our four collection units/sites located throughout the District and the Re-entry and Sanctions Center. In FY 2015, each urine sample was tested for up to eight drugs [Marijuana, PCP, Opiates (codeine/morphine), Methadone, Cocaine, Amphetamines, and Alcohol]. In addition, a very limited number of urine samples were tested for synthetic cannabinoids through PSA’s partnership with the DC Office of the Chief Medical Examiner. CSP offender urine samples are tested by PSA and results provided back to CSP within 48 hours after the sample is taken. FY 2015 offender drug testing activity decreased below FY 2014 levels yet represents a significant increase above the FY 1999 testing levels reported at the Agency’s inception.

In September 2015, 23.82 percent of offender samples, and 30.79 percent of tested offenders, tested positive for at least one tested drug (including alcohol; excluding synthetic drugs). This a slight decrease from September 2014 when illicit substances were detected in 25.75 percent of tested offender samples.

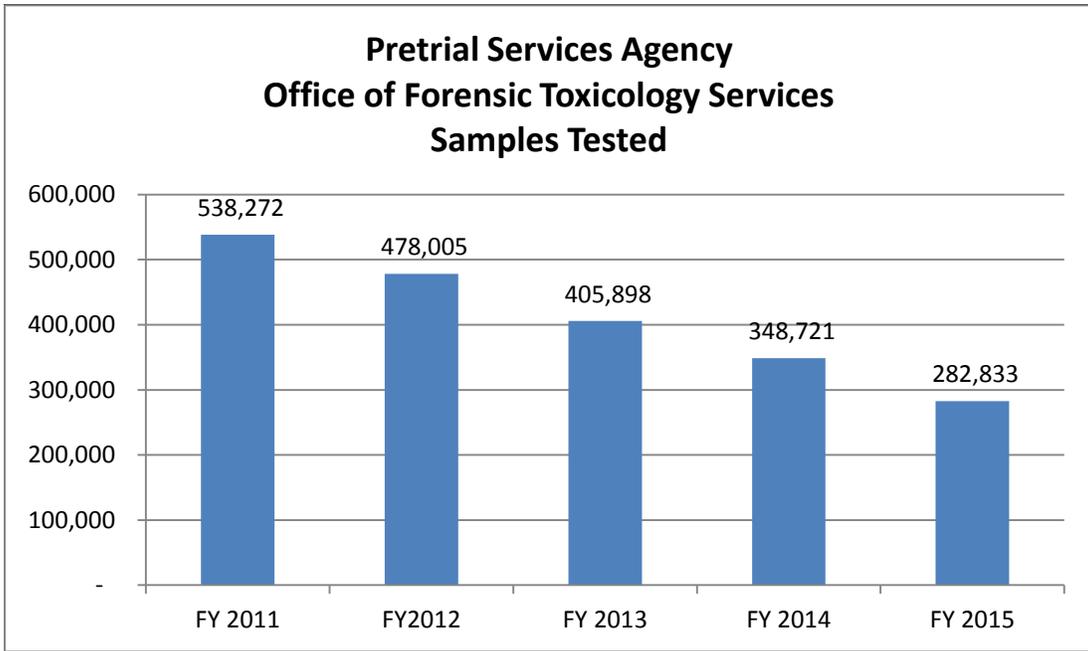
Community Supervision Program
Average Monthly Offenders and Samples Tested
Fiscal Years 1999 and 2007 - 2016



PSA conducted initial and follow-up drug tests on 17,211 defendants during FY 2015, with about 28.2 percent (4,861) recording at least one non-compliant drug test result.

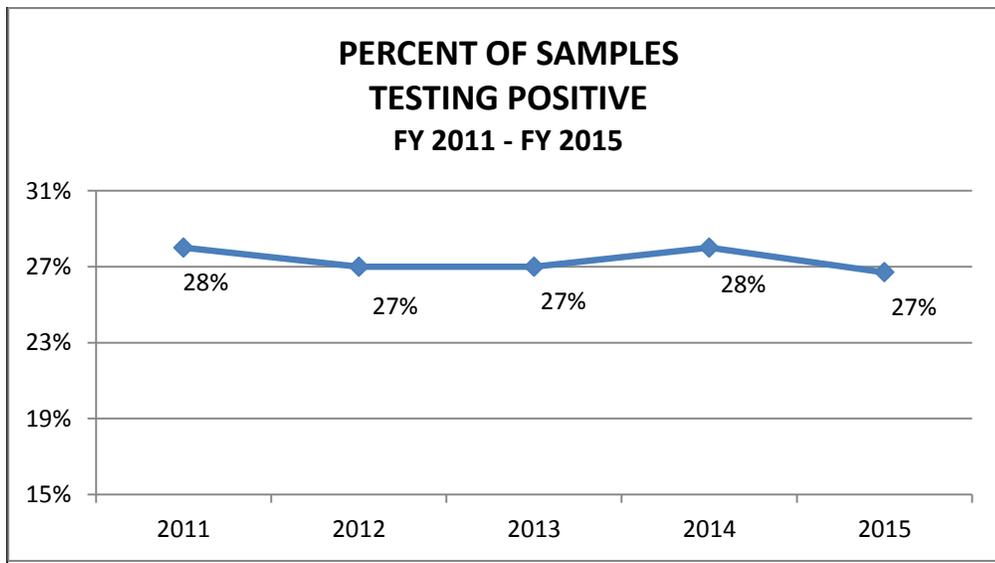
36. How many drug samples are processed by PSA’s Office of Forensic Toxicology Services (OFTS)?

In FY 2015, the OFTS conducted 2,245,958 drug tests on 282,833 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 eight 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 2015, approximately 26.7 percent of the defendant samples tested had at least one positive test.

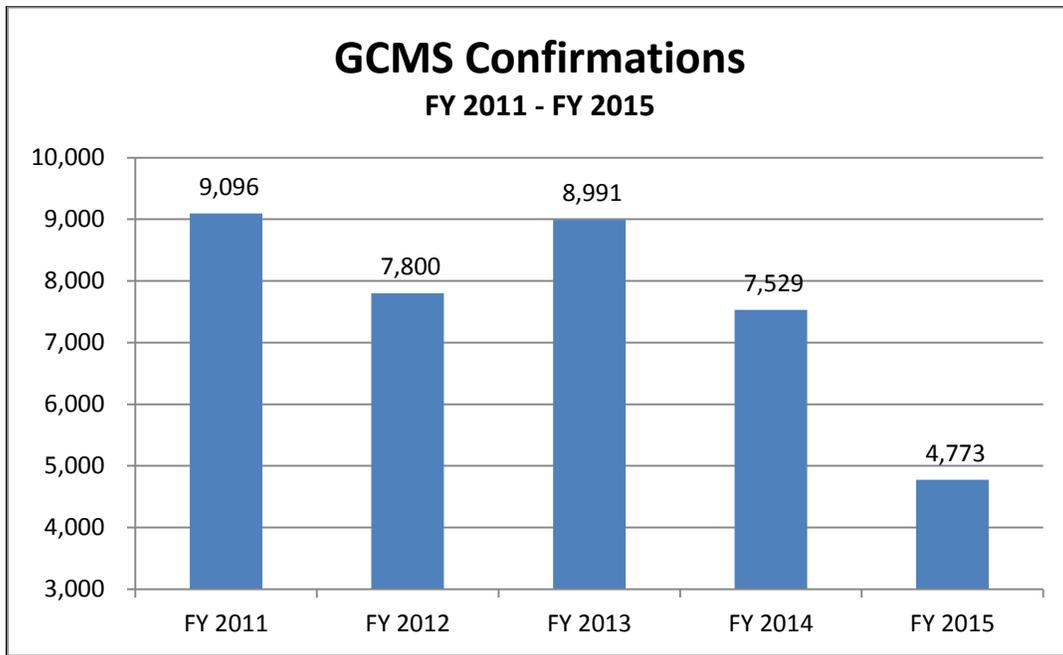


38. What is the procedure when a drug test result is disputed?

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 14,244 levels analyses which aid in the determination of continuing drug use and performed 4,773 GC/MS confirmation tests in FY 2015.



39. 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.

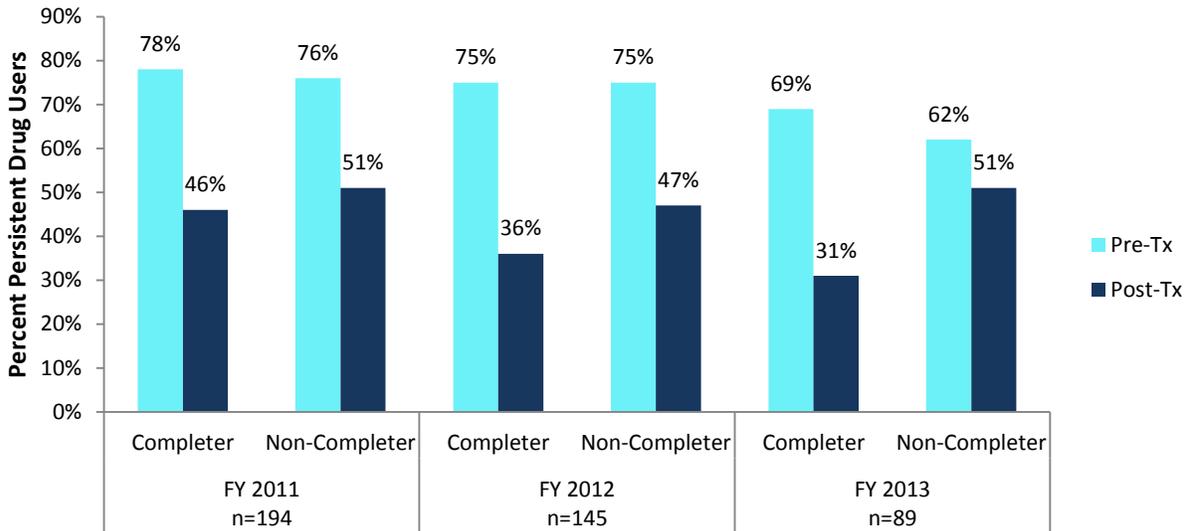
- I. CSP's Office of Research and Evaluation examined the extent to which completion of substance abuse treatment services reduced offender drug use and found that participation in treatment was related to decreases in future chronic substance use.

In FY 2013, when compared to their use before treatment, 56 percent fewer offenders who completed multiple drug treatments were deemed persistent drug users¹³ after completing their prescribed treatment continuum. For offenders who participated in treatment, but did not

¹³ 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.

complete all treatment successfully, 17 percent fewer offenders were considered chronic drug users after unsuccessfully discharging from treatment. Findings were similar for offenders in FYs 2011 and 2012 as well, suggesting that - although full treatment completion is ideal - some treatment is better than no treatment.

Participation in CSOSA's Contract Substance Abuse Treatment Programs and Persistent Drug Use



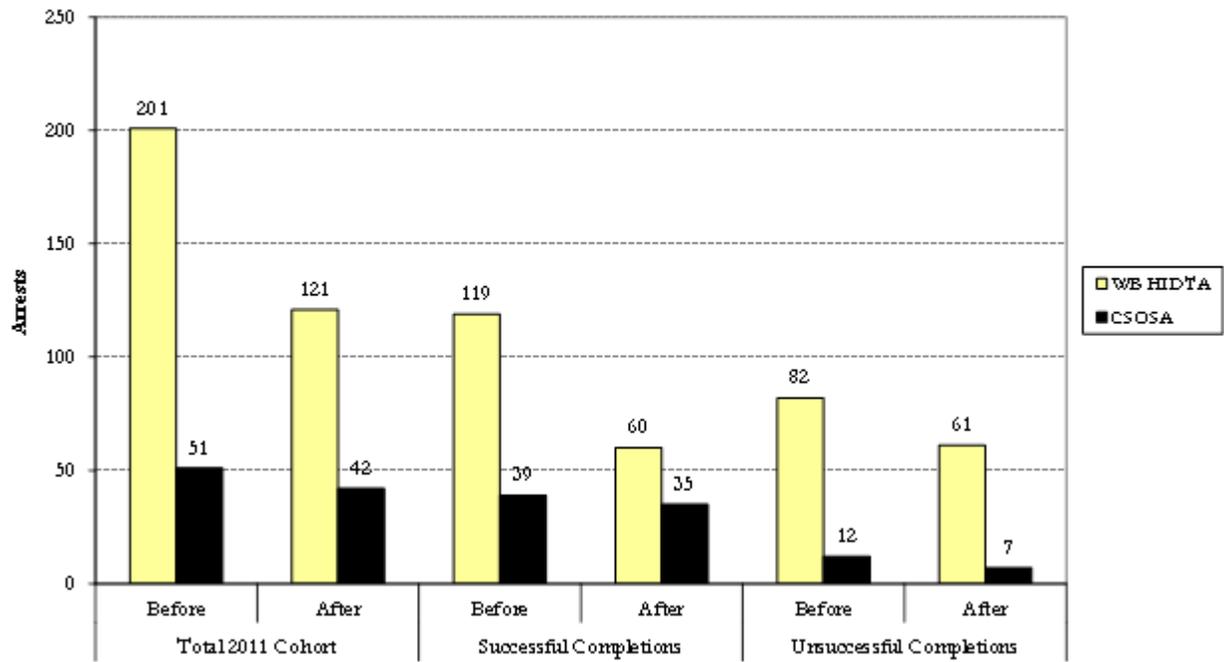
II. A study by the Institute for Behavior and Health¹⁴ found that CSOSA offenders and defendants who participated in the Agency’s Re-entry and Sanctions Center (RSC) program and successfully completed post –RSC drug treatment funded by the Washington/Baltimore (W/B) HIDTA were less likely to be arrested after completing the program. CSOSA is one of eleven jurisdictions within the W/B HIDTA area that received grant funding to support drug treatment in calendar year 2011. CSOSA uses W/B HIDTA funding to support post-RSC contract treatment for offenders/defendants meeting HIDTA eligibility criteria.

In 2011, the overall number of participants arrested in the *entire* W/B HIDTA drug treatment program, including CSOSA offenders/defendants, dropped 44.0 percent from 201 arrested in the one year period before HIDTA treatment to 121 in the one year after treatment. The decrease in arrests is even more pronounced for those participants who successfully completed the treatment program; a 50.0 percent decrease from 119 arrested in the one year prior to treatment to 60 participants arrested in the one year after treatment.

In 2011, the number of CSOSA offenders/defendants arrested dropped 18.0 percent from 51 arrested in the one year period before HIDTA treatment to 42 in the one year after treatment.

¹⁴ The Effect of W/B HIDTA-Funded Substance Abuse Treatment on Arrest Rates of Criminals Leaving Treatment in Calendar Year 2011. Institute for Behavior and Health, Inc., Draft June 18, 2013.

**Individuals Arrested One-Year Before and One-Year After
Completing Treatment Funded by Washington/Baltimore HIDTA (2011
Cohort)**



40. What were some characteristics (gender, race, education, age, criminal charge) of the offenders under CSP supervision during FY 2015?

As shown in the table below, offenders under CSP supervision in FY 2015 were primarily male, African-American, and ages 35 or younger. About three out of five 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; one-fifth were charged with public order offenses and violent offenses.

Characteristics of the FY 2015 CSP Total Supervised Population (18,427 Offenders)

| | Percent |
|--|---------|
| Gender | |
| Male | 83% |
| Female | 17% |
| Race | |
| African American | 89% |
| Caucasian | 5% |
| Hispanic | 5% |
| Other/Unknown | 1% |
| Educational Level¹ | |
| Less than High School | 32% |
| High School Diploma/GED | 44% |
| Above High School | 19% |
| Missing/Unknown | 5% |
| Age | |
| 25 and Under | 23% |
| 26 to 35 | 28% |
| 36 to 45 | 20% |
| 46 to 55 | 19% |
| 56 to 65 | 9% |
| 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) | 21% |
| <u>Drug Offenses</u> (Charge Category: Drug Abuse) | 10% |
| <u>Property Offenses</u> (Charge Categories: Arson, Burglary, Larceny-Theft, Embezzlement, Fraud, Forgery & Counterfeiting, Motor Vehicle Theft, Stolen property, Vandalism) | 16% |
| <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) | 21% |
| <u>Release Condition Violations</u> (Charge Categories: Parole and Probation Violations) | 28% |
| <u>Other Offenses</u> (Charge Categories: Drunkenness, Licensing & Regulation Issues, Other Offenses, Unknown) | 4% |

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 September 30, 2015 (n=3,390).

³ Charge Categorization taken from the Bureau of Justice Statistics

41. How is PSA addressing the use of synthetic drugs within the DC criminal justice populations?

PSA remains at the forefront of trend analysis and identification of emerging drugs of abuse within the DC criminal justice population. As the patterns of substance use within the testing population have changed, PSA’s testing program has evolved to keep pace with emerging trends. Presently, PSA is faced with the need to identify and appropriately respond to the use of two new classes of drugs being used within the District of Columbia: synthetic cannabinoids¹⁵ and synthetic cathinones¹⁶. The DC Courts, city officials, local law enforcement partners, and the Office of National Drug Control Policy support PSA’s effort to implement a comprehensive drug testing program to address the use of synthetic drugs. PSA has conducted extensive scientific research to develop strategies to meet this challenge.

During FY 2015, through its partnership with the DC Office of the Chief Medical Examiner (OCME), PSA tested an average of 100 *highly suspicious* urine samples per month for synthetic cannabinoids. Samples were collected from individuals supervised by PSA and CSP and selected for OCME analysis due to suspected use of synthetic cannabinoids (internally referred to as *highly suspicious samples*). The testing results confirmed that about 44% of the highly suspicious samples collected from PSA’s supervised population tested positive for synthetic substances.

| | |
|---|-----|
| Number of total PSA samples | 572 |
| Number of samples confirmed positive for synthetic cannabinoids | 252 |
| Percentage of positive samples | 44% |

PSA has requested additional funding in its FY 2017 budget to cover the costs for expanding its drug testing capabilities to better detect synthetic substances beginning in FY 2017. However, due to the urgency of the issue, PSA has temporarily allocated existing FY 2015 and FY 2016 financial resources to purchase reagents to begin limited screening for synthetic cannabinoids beginning October 1, 2015.

Limited screening for synthetic cannabinoids in FY 2016 is a first step, and represents only a portion of the testing that is planned to address the use of synthetic drugs in the District. PSA has also purchased the necessary liquid chromatograph-tandem mass spectrometry (LC-MS/MS) instrumentation which will be used to conduct the confirmatory step of detecting synthetic compounds in urine specimens. With this instrumentation, PSA will establish an in-house confirmation testing capability.

¹⁵ Synthetic cannabinoids are a new class of synthetic designer drugs that are being used as popular substitutes for marijuana. They mimic some of the effects of marijuana but, even at low doses, may result in serious adverse effects on users. They are referred to by a variety of names, including “Black Mamba,” “K2” and “Spice.”

¹⁶ Synthetic cathinones are a class of drugs containing an amphetamine-like stimulant that naturally occurs in the khat plant. Synthetic cathinones are known by a number of aliases, including “bath salts.”