



COLORADO

Department of Public Safety

*Colorado Community
Corrections Annual Report
Fiscal Year 2022 – 2023*

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Introduction

The Office of Community Corrections (OCC) is a part of the Division of Criminal Justice in the Colorado Department of Public Safety. Through regulation, innovation and collaboration, the Office of Community Corrections strives to support our community partners in delivering superior services to clients, building a stronger, safer Colorado. This report summarizes activities in community corrections programs for Fiscal Year 2023 (July 1, 2022 through June 30, 2023; denoted throughout the report as FY23).

The OCC provides funding support for community correction programs which provide residential and non-residential supervision and treatment throughout Colorado. The OCC works collaboratively with many agencies, including community corrections providers, community corrections boards in the various judicial districts, the Colorado Department of Corrections, the Colorado State Judicial Branch and the Office of Behavioral Health. As part of its duties, the OCC audits and monitors community corrections boards and programs to ensure compliance with contracts, federal grant requirements and with the [2022 Colorado Community Corrections Standards](#).

Per Colorado Revised Statute, [C.R.S. 17-27-108](#), the OCC is responsible for a variety of duties with regard to all community corrections facilities in the state. The PACE and the Core Security audit teams work directly with programs and program staff to evaluate practices at the facilities for compliance with and implementation of the 2022 Community Corrections Standards.

The OCC is also responsible for the distribution and expenditure of state and federal funds, the administration of community corrections contracts, community corrections-related data collection in the Community Corrections Information and Billing system (CCIB), and the preparation of reports to the Colorado General Assembly, the federal government and the public.

Subject matter experts in the OCC provide essential technical assistance and training throughout the year to community corrections programs related to the use of evidence-based practices aimed at helping clients identify their criminogenic needs and to reduce their risk for recidivism. These practices align with the Eight Guiding Principles for Risk and Recidivism Reduction as well as Implementation Science literature. Program staff have opportunities throughout the year to attend trainings on the Standardized Offender Assessment-Revised (SOA-R) and other skills to support them in helping their clients successfully complete community corrections.

Community Corrections in Colorado

Community Corrections Programs

Colorado community corrections serves as an alternative to incarceration in prison and operates in partnership with local supports for governance, employment and client treatment. Services are designed to promote productive reintegration of clients back into the community. Community corrections provides:

- Services for clients convicted of offenses who are diverted from prison



- Services for clients in transition between prison and parole
- Services for parolees released by the Colorado Board of Parole
- Specialized treatment for clients with a history of substance use and/or mental illness
- Short-term stabilization services for clients on probation

During FY23, there were twenty-two local Community Corrections Boards within the twenty-two Judicial Districts statewide in Colorado. During that time, twenty-seven programs, seven of which are operated by units of local or state government. For-profit and non-profit agencies operate the remaining programs. Two programs in the state served female clients exclusively, thirteen programs served male clients exclusively, and thirteen serve both male and female populations.

Figure 1 is a summary of the community corrections programs and their average daily population (ADP) through FY23. Monies are allocated to judicial districts without community corrections facilities so that they may house clients from their jurisdiction in judicial districts that have facilities.

Figure 1 – FY23 Programs, Overall Residential and Non-residential Average Daily Population (Census)

Program, Judicial District (JD) & Location	Overall Residential ADP FY23	Overall Non-Residential ADP FY23
ICCS - Jefferson (Kendall), 1st JD, Lakewood	149.1	51.6
Project: Elevate, 2nd JD, Denver	33.9	1.6
CoreCivic - Dahlia, 2nd JD, Denver	86.6	11.0
Independence House Pecos, 2nd JD, Denver	71.7	N/A
Independence House-North Non-Residential, 2nd JD, Denver	N/A	11.7
Peer I, 2nd JD, Denver	39.4	54.9
The Haven, 2nd JD, Denver	8.9	N/A
IMPACT Center, 2nd JD, Denver	23.1	0.0
No Program, 3rd JD,	N/A	N/A
ComCor, Inc, 4th JD, Colorado Springs	236.0	37.0
GEO - Community Alternatives of El Paso County, Inc., 4th JD, Colorado Springs	170.9	39.5
No Program, 5th JD	N/A	N/A
Southwest Colorado Community Corrections Center - Hilltop House, 6th JD, Durango	43.8	5.0
Advantage Treatment Center-Montrose, 7th JD	69.9	34.8
Larimer County Community Corrections, 8th JD, Fort Collins	251.6	140.2
Garfield County Community Corrections, 9th JD, Rifle	38.4	4.0
ICCS-Pueblo, 10th JD, Pueblo	89.0	14.6
No Program, 11th JD	N/A	N/A
Advantage Treatment Center-Alamosa, 12th JD, Alamosa	80.2	14.1
Advantage Treatment Center-Sterling, 13th JD, Sterling	101.2	5.2



No Program, 14th JD	N/A	N/A
Advantage Treatment Center-Lamar, 15th JD, Lamar	36.9	9.0
No Program, 16th JD	N/A	N/A
CoreCivic-Adams Transitional Center, 17th JD, Adams County	73.4	28.8
CoreCivic-Commerce Transitional Center, 17th JD, Commerce City	56.2	16.5
ICCS-Adams, 17th JD, Henderson	119.5	35.7
CoreCivic-Arapahoe Community Treatment Center, 18th JD, Englewood	87.0	27.3
CoreCivic-Centennial Corrections Transition Center, 18th JD, Englewood	66.4	20.5
GEO-Arapahoe County Residential Center, 18th JD, Littleton	107.8	14.9
ICCS-Weld, 19th JD, Greeley	150.5	47.5
ICCS-Boulder, 20th JD, Boulder	30.7	8.1
CoreCivic-Longmont Community Transition Center, 20th JD, Longmont	27.1	13.8
Mesa County Community Corrections, 21st JD, Grand Junction	143.1	48.9
No Program, 22nd JD	N/A	N/A
TOTAL Average Daily Population	2392.3	696.2

Statistical Overview

Statistics derived for this annual report represent a summary of all community corrections clients who discharged from residential, non-residential, Intensive Residential Treatment (IRT), and Residential Dual Diagnosis Treatment (RDDT) programs during the 2022-2023 fiscal year (July 1, 2022 - June 30, 2023). When available and appropriate, some measures report data from previous fiscal years. For the purposes of this report, fiscal years noted in this report are FY09, FY10, FY11, FY12, FY13, FY14, FY15, FY16, FY17, FY18, FY19, FY20, FY21, FY22 and FY23.

The Division of Criminal Justice/Office of Community Corrections (DCJ/OCC) utilizes an internet-based data collection and management system for all programs statewide. The Community Corrections Information and Billing (CCIB) system helps track monthly expenses for Boards and programs, helps track and disperse treatment funds to boards and programs, and tracks a vast array of information related to the clients serving time in the Colorado community corrections system.

CCIB collects data relevant to each client's demographic information, as well as their current crime and service data relevant to each client's current community corrections stay. This data includes fiscal information (e.g., earnings, taxes, restitution and child support paid), standardized assessment outcomes, treatment services provided, and termination reasons. The database contains real-time information, as programs are required to enter client demographic information within five working days of a client's entry into or discharge from the program. The programs enter the remaining service related data throughout the client's stay or within thirty working days of a client's termination from the program.

Some issues arise when analyzing discharge information of this nature. The report focuses on discharged clients, and as a result data may over-represent clients who were discharged after short lengths of stay and under-represent clients with longer lengths of stay. Furthermore, the data may



not represent the characteristics of the current population, since information collected is after a client discharges from a program. DCJ/OCC staff periodically review the data contained in CCIB for accuracy and ask programs to make corrections where necessary. When appropriate, DCJ/OCC staff have reviewed and corrected data within the CCIB system before exporting it for this report.

Please note some tables contained in this report use the measure of the median (the center number in the range) to describe the data as it is not as sensitive to extreme ranges like the mean. The mean is the average value in a set of numbers, and some tables contained in this report utilize this measure as well.



Section I - Residential Community Corrections

The purpose of the residential phase of community corrections is to provide clients with the knowledge and skills necessary to be emotionally, cognitively, behaviorally and financially prepared for reintegration into the community. Residential programs strive to accomplish this rehabilitative task by a variety of means with an emphasis on evidence-based practices.

Through evidence-based and assessment-driven individual treatment plans, programs attempt to match client risks and needs with the most appropriate treatment modality. Clients are assisted in obtaining regular employment, attending treatment for their assessed risks and needs and encouraged to participate in educational and vocational services. Programs monitor the payment of restitution, court fines, court-ordered child support and useful community service requirements. Program staff carefully monitor clients in the community to enhance client accountability and to address public safety concerns.

Client Types

Community Corrections mainly serves adult clients who have been convicted of felony offenses. There are two major groups of community corrections clients: Diversion and Transition. Diversion clients are sentenced directly to community corrections by the courts, as a diversion from a prison sentence. In some instances, clients have been sentenced to community corrections as a condition of their probation. For the purposes of this report these clients are classified as diversion clients unless otherwise specified.

Transition clients are returning to the community after serving a Department of Corrections (DOC) prison sentence. These clients include parolees and clients in the Intensive Supervision Program (ISP). Transition clients are referred to community corrections boards and programs from the DOC. Condition of Parole clients are referred from the parole board or the local parole offices as a condition of the client's period of parole. ISP clients are referred to community corrections as a condition of their ISP placement. Unless otherwise noted, all DOC clients are referred to as "Transition" clients in this report.

During FY23, residential community corrections programs discharged a total of 4,391 clients, whereas in FY22 a total of 4,493 clients were discharged. This is a 2.3% decrease in the number of discharges from FY22 to FY23. Clients may have been transferred from one residential facility to another, or discharged more than once from a residential facility. For this reason, a single client may be counted more than once in this data.

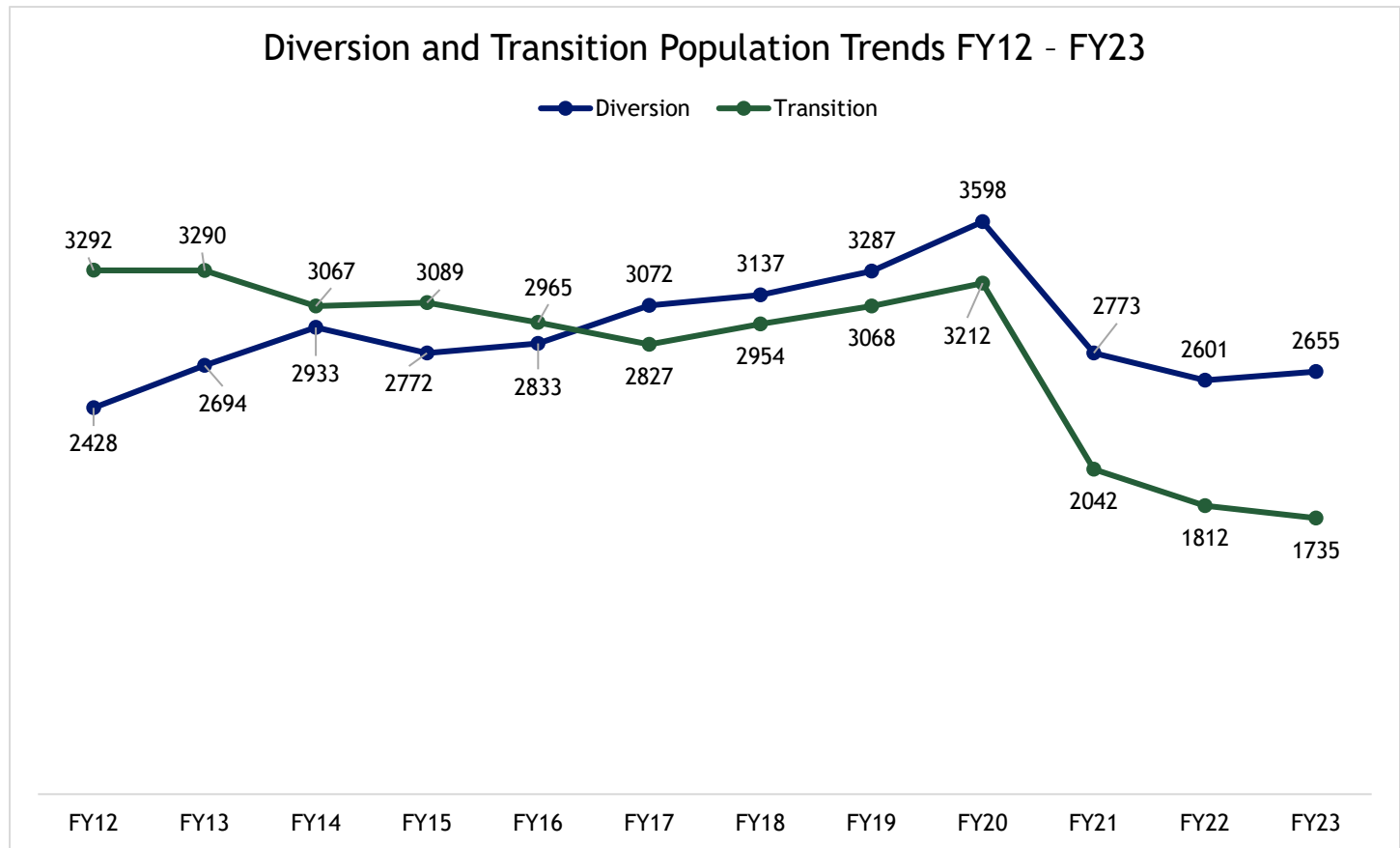
In FY23, 60.5% of all residential community corrections clients were diversion/condition of probation clients, and 39.5% were transition/parole/ISP clients. This population breakdown is similar to the data reported in FY22 (58.9 % diversion and 41.1% transition).

The FY23 diversion population total was composed up of 3.1% condition of probation placements and 57.4% direct sentence/diversion clients. The FY23 transition population included 4.8% condition of parole clients, 34.7% transition clients and two ISP clients.



Between FY12 and FY19, the diversion population in community corrections grew steadily to its highest point in FY20. Conversely, the transition client population saw a steady decline between FY12 and FY17. However, due to legislation passed in early June 2018, the number of clients coming from DOC began to grow again. The legislation passed dealt with the referral of clients from DOC to community corrections, which helped sustain the new growth of this population. The decrease in both client populations starting in FY20 was due to the COVID-19 pandemic. Figure 2 shows the population trends for diversion and transition clients in community corrections since 2012.

Figure 2 - Diversion and Transition Population trends FY12 – FY23



Demographics

The majority of community corrections clients in Colorado are: male, White, between the ages of 26 and 40 and have a high school diploma or GED. In FY23, the typical client was serving a sentence for a class four felony, were unemployed when entering community corrections, and successfully completed residential community corrections. Figure 3 presents demographic data on gender, age, ethnicity, education level at entry to the program and their current felony crime class.



Figure 3 – Community Corrections Residential Client Demographics FY22 & FY23

Gender	FY22	FY23
Male	80.5%	81.0%
Female	19.4%	18.9%
Transgender	n/a	0.1%
Age		
18-20	1.7%	1.3%
21-25	10.7%	10.8%
26-30	19.0%	17.6%
31-35	19.0%	19.9%
36-40	17.8%	18.1%
41-45	11.9%	13.1%
46-50	11.9%	7.9%
51+	12.1%	11.3%
Ethnicity		
Caucasian	54.9%	52.8%
Hispanic	29.9%	30.7%
African American	10.5%	11.2%
Native American / Alaskan Native	2.2%	2.1%
Asian American / Pacific Islander	1.2%	n/a
Asian	n/a	0.8%
Native Hawaiian / Other Pacific Islander	n/a	0.3%
Other	1.3%	0.3%
Education Level at Entry		
Less than 8th Grade	2.8%	3.0%
9th through 11th Grade	19.2%	20.2%
High School Diploma or GED	55.0%	49.5%
Vocational/Some College	12.3%	12.2%
Undergraduate Degree or Higher	2.1%	2.2%
Unknown	8.6%	12.9%
Current Crime Felony Class		
F1 - F3	11.2%	10.0%
F4 - F6	75.1%	79.3%
Unclassified Felony	n/a	0.6%
DF1 - DF2 (Drug Felony)	3.8%	3.1%
DF3 - DF4 (Drug Felony)	9.8%	7.1%

Criminal History

Most community corrections clients in FY23 were serving sentences for mid-level felony offenses (F4, F5). The most common types of offenses committed by diversion clients were drug-related offenses, burglary/trespass and assault/menacing. The most common types of offenses committed by transition clients were assault/menacing, drug-related offenses, and burglary/trespassing charges. Figure 4 depicts the five most frequent convictions for which community corrections clients were serving sentences.



Figure 4 – Top Felony Conviction Offense Types for Clients in Community Corrections FY23

Crime Type	N	Population %
Assault/Menacing	832	18.9%
Burglary/Criminal Trespass	728	16.6%
Controlled Substance	587	13.4%
Motor Vehicle	450	10.2%
Driving/HTO/DUR/Eluding	423	9.6%

Of the top four crimes clients were serving sentences for in FY23, the class or seriousness of the crime varied somewhat between the four. Figure 5 shows the crime class with the highest rate of sentence for each of the top four crimes.

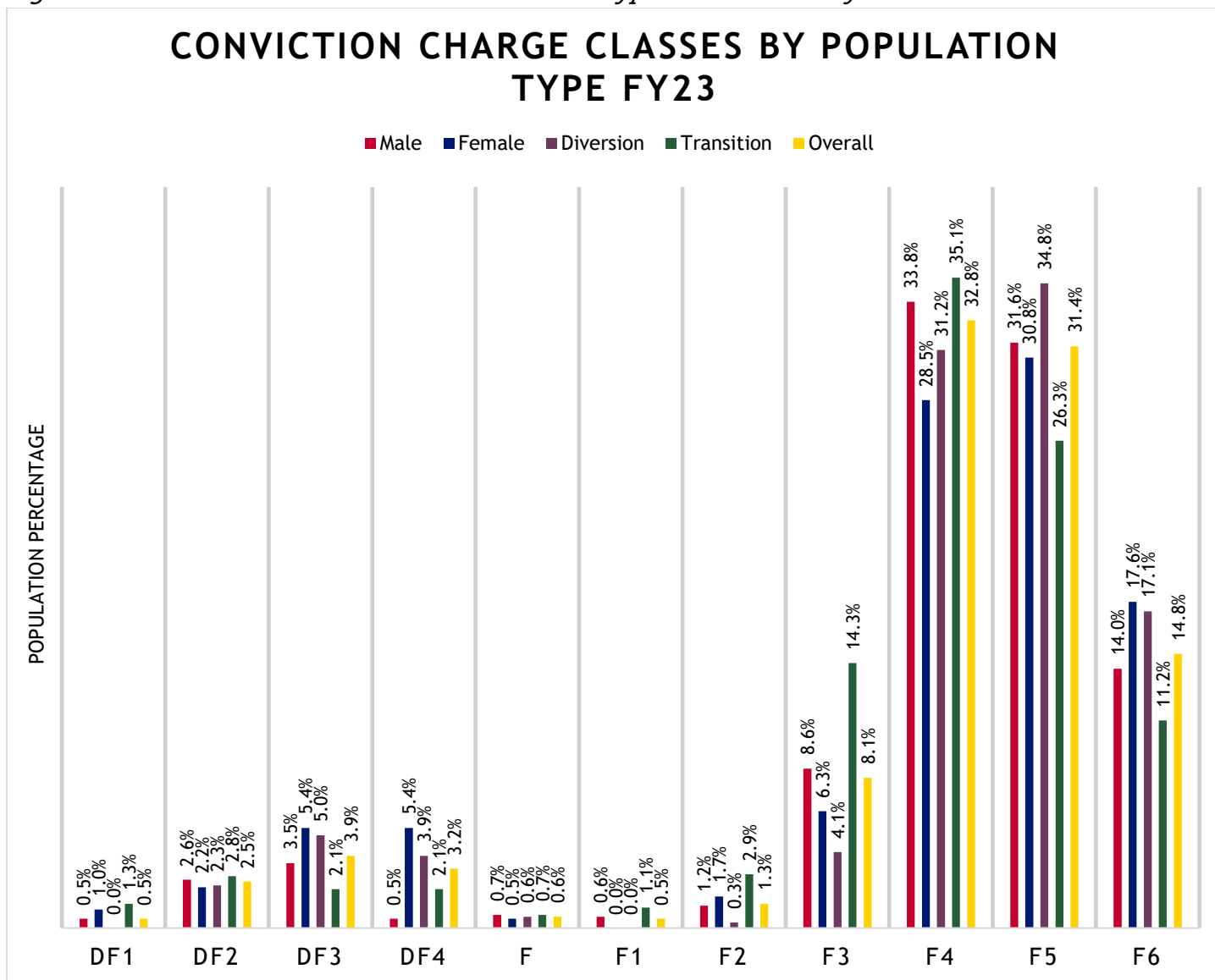
Figure 5 – Top Offense Crime Class Distinctions in Community Corrections FY23

Crime Type	Crime Class	Population %
Assault/Menacing	F5	48.10%
Burglary/Criminal Trespass	F5	40.20%
Controlled Substance	DF3	28.60%
Motor Vehicle	F5	39.60%
Driving/HTO/DUR/Eluding	F4	63.60%

In the CCIB system, programs can enter all cases for which a client is serving time. The data reported here identifies the most severe offense for each client stay as entered by program staff. According to the data, 79.0% of clients were serving sentences for either a class 4, 5 or 6 felony and 9.9% were serving time for either a class 1, 2 or 3 felony during FY23. Figure 6 depicts the current felony class of both diversion and transition clients and male and female clients, as well as the overall totals.



Figure 6 – Current Crime Classes for All Offense Types in Community Corrections FY23



Standardized Client Assessments and Treatment

In community corrections, all clients are screened and assessed upon intake with the Standardized Offender Assessment-Revised (SOA-R) process. The purpose of the SOA-R battery is to measure a client's level of recidivism risk and criminogenic needs. The assessment process also detects, and subsequently measures, the severity of substance use and provides a treatment recommendation based on a client's level of risk and severity of substance use. Four separate instruments comprise the SOA-R battery, two of which are described below. The remaining two components are described starting on page 14.

The Level of Supervision Inventory (LSI, Score Range 0-54) is a 54-item assessment instrument that is administered by a trained professional using a semi-structured interview. The LSI asks about a variety of areas in the client's life that may have a positive or negative impact on their risk for recidivism. Clients score higher on the LSI as their risk of recidivism increases. The LSI is administered at intake and again at six-month intervals to measure the degree of change in recidivism risk. The LSI scores reported in the following figures (11 - 15) are the entry LSI and the most recent LSI. Since the LSI scores are updated at six-month intervals, the updated score reflects changes from a minimum stay of six months or longer.

The Simple Screening Instrument (SSI-R, Score Range 0-14), a self-report questionnaire, is used to screen for alcohol and other drug involvement within the last six months. There are sixteen questions and the score from this instrument is one determining factor if a client needs the Adult Substance Use Survey- Revised (ASUS-R) assessment.

Figure 7 provides the mean LSI and SSI-R scores for male and female community corrections clients in FY22 and FY23. In comparison to male clients, female clients in community corrections generally have higher LSI scores and higher SSI-R scores.

Figure 7 - Average Assessment Scores for Males and Females in FY221 & FY23

		Initial LSI Score (mean)	Update LSI Score (mean)	SSI-R Score (mean)
FY22	Male	28.51	23.62	5.49
	Female	30.85	25.7	7.27
FY23 ²	Male	27.75	24.25	5.57
	Female	29.65	24.81	6.96

The LSI is updated once every six months and the data for the LSI update represents the most recent LSI at time of termination. During FY23, male clients, on average, experienced an 12.6% decrease in

¹ The FY22 SSI-R scores displayed in this table are different from what was originally reported in the FY22 Annual Report. A calculation error in the FY22 report caused the SSI-R scores to be erroneously inflated.

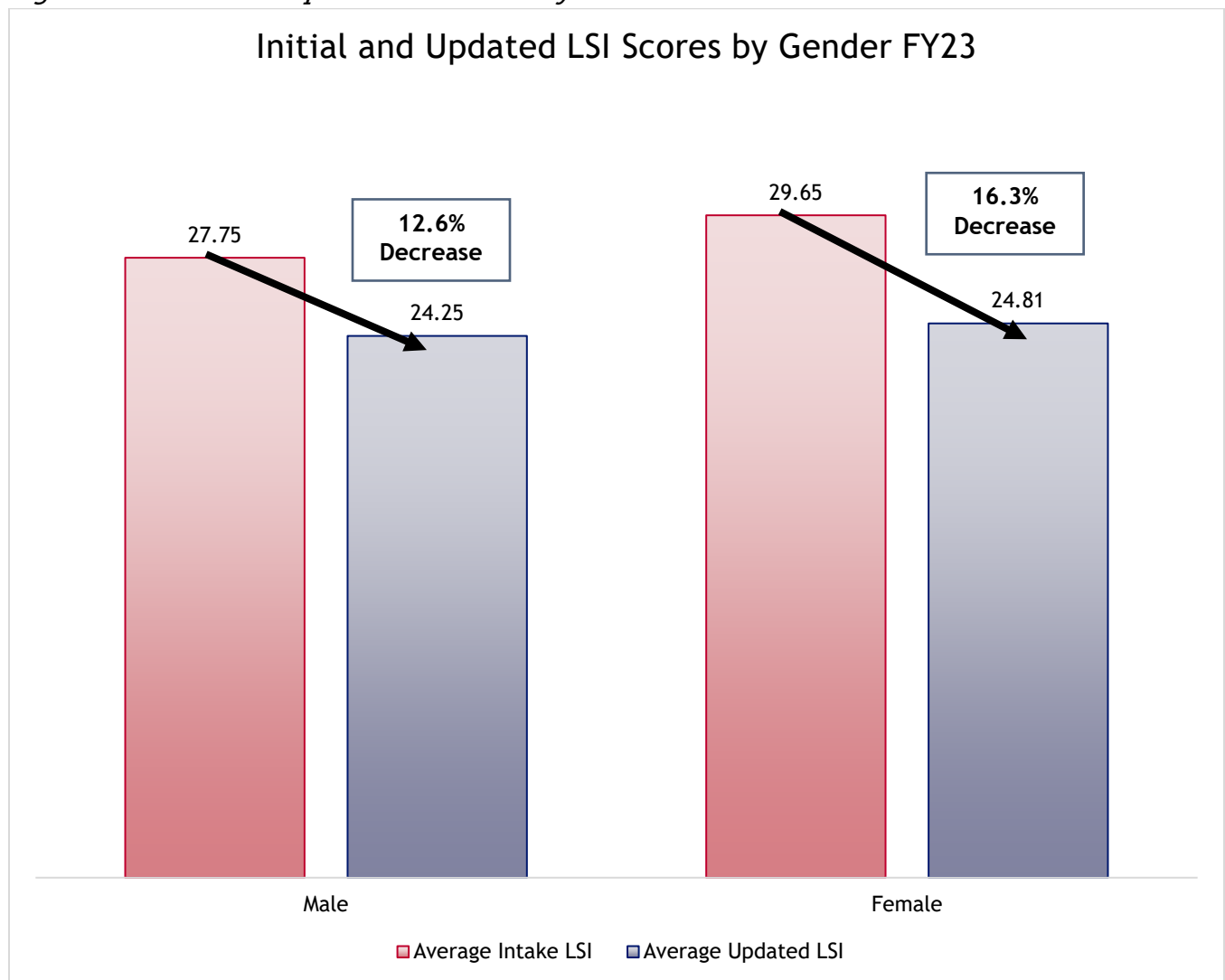
² The transgender clients noted in figure 3 (page 10) were not in community corrections log enough to receive an updated LSI score and have not been included in this table.



their LSI score from intake to their most recent update. Female clients averaged a 16.3% decrease in their LSI scores from intake to their six-month LSI update. If an LSI update was not completed, the client is not represented in the data set. This data is presented in Figure 8.

Since FY15, both males and females reduced their LSI scores each fiscal year. Based on this trend, from FY15 to FY23, the decrease for both Males and Females in LSI scores is statistically significant at the .05 level. This decrease indicates a reduction in the risk of recidivism prior to, or upon termination from residential community corrections.

Figure 8 - Initial and Updated LSI Scores by Gender FY23

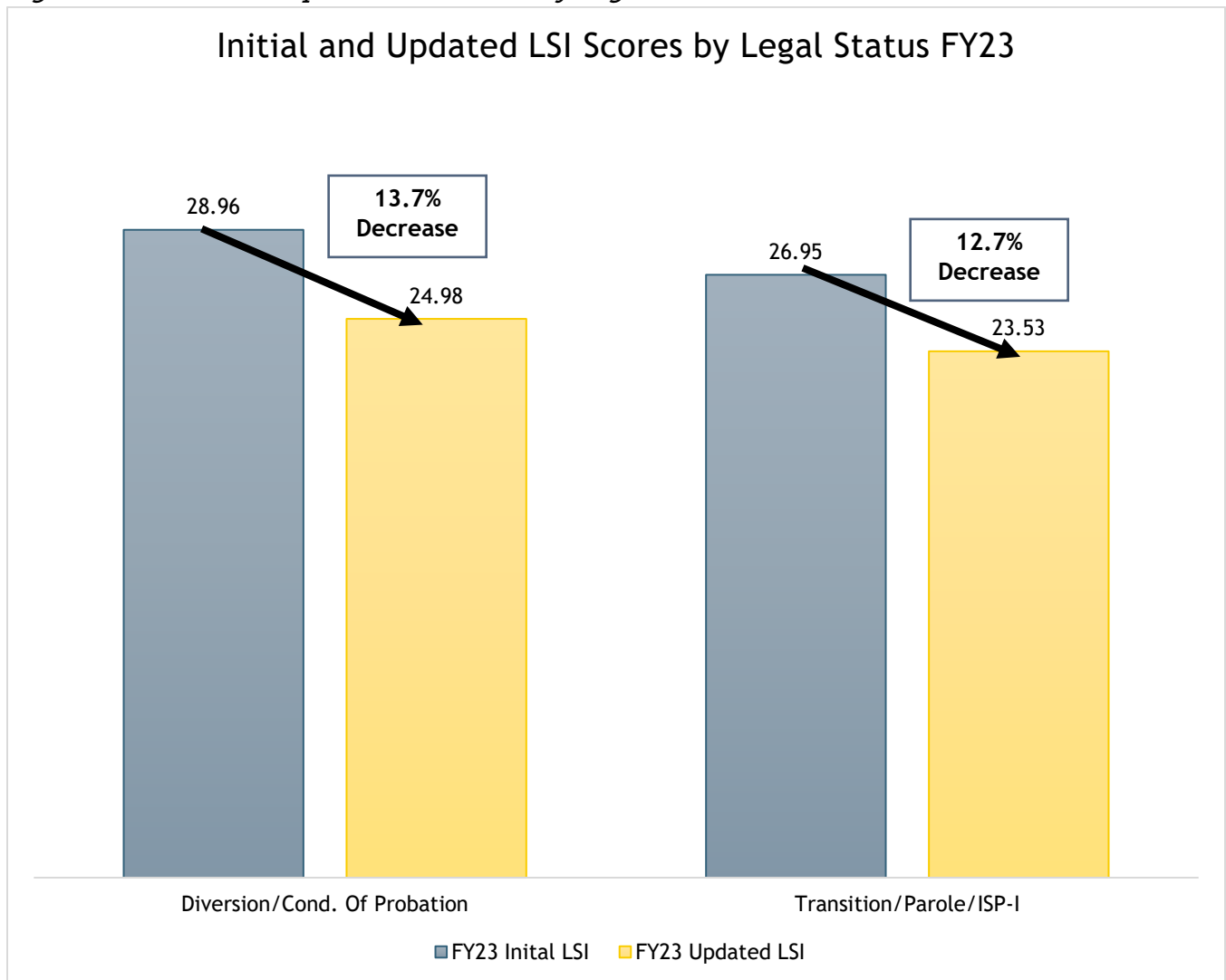


In FY23, diversion clients in community corrections reduced their LSI scores by 13.7%. Transition clients reduced their LSI scores by 12.7%. Figure 9 indicates the initial average intake LSI and 6 month updated LSI scores for diversion and transition clients.

Since FY15, both diversion and transition clients reduced their LSI scores each fiscal year. Based on this trend, from FY15 to FY23, the decrease in LSI scores for both population types is statistically significant at the .05 level. This decrease indicates a reduction in the risk of recidivism prior to, or upon termination from residential community corrections.

For the overall community corrections residential population, the data indicates a 13.3% reduction in LSI scores (28.0 to 24.3).

Figure 9 - Initial and Updated LSI Scores by Legal Status FY23



Substance Use Treatment

The ASUS-R is the third component of the SOA-R assessment battery. The ASUS-R is a self-report questionnaire that assesses substance use across several dimensions. The ASUS-R contains 15 basic scales and 3 supplemental scales. The Disruption Scale of the ASUS-R measures the degree to which alcohol and drug use has resulted in disruptive consequences and/or problems for the client. The Defensive Scale of the ASUS-R measures the degree to which a client is willing to disclose sensitive information regarding their substance use. The scores for these scales are then normed, which demonstrates if a client scores higher or lower than an average community corrections individual for the measures indicated.

The fourth assessment tool within the SOA-R battery is a standardized treatment plan for clients in community corrections (treatment recommendation worksheet or TxRW). The treatment planning details consist of eight categorical levels, the first of which incorporates the scores from the LSI, the ASUS-R and the SSI-R. Scores on the SOA-R drive placement into one of the eight substance use treatment levels. The treatment plan provides substance use education and treatment services of varying intensity depending on scores in the SOA-R. Generally, the number of hours in treatment increases as the treatment level increases. The lower end of the continuum emphasizes didactic education and the higher end of the continuum involves process-oriented therapy.

Figure 10 reports the percentage of clients in community corrections who are assessed at each level of substance use treatment during FY23. Generally, a higher proportion of clients are assessed at level 3 (weekly outpatient), and level 4a (enhanced outpatient), for substance use treatment.

Figure 10 – Overall Assessed Substance Use Treatment Needs FY23

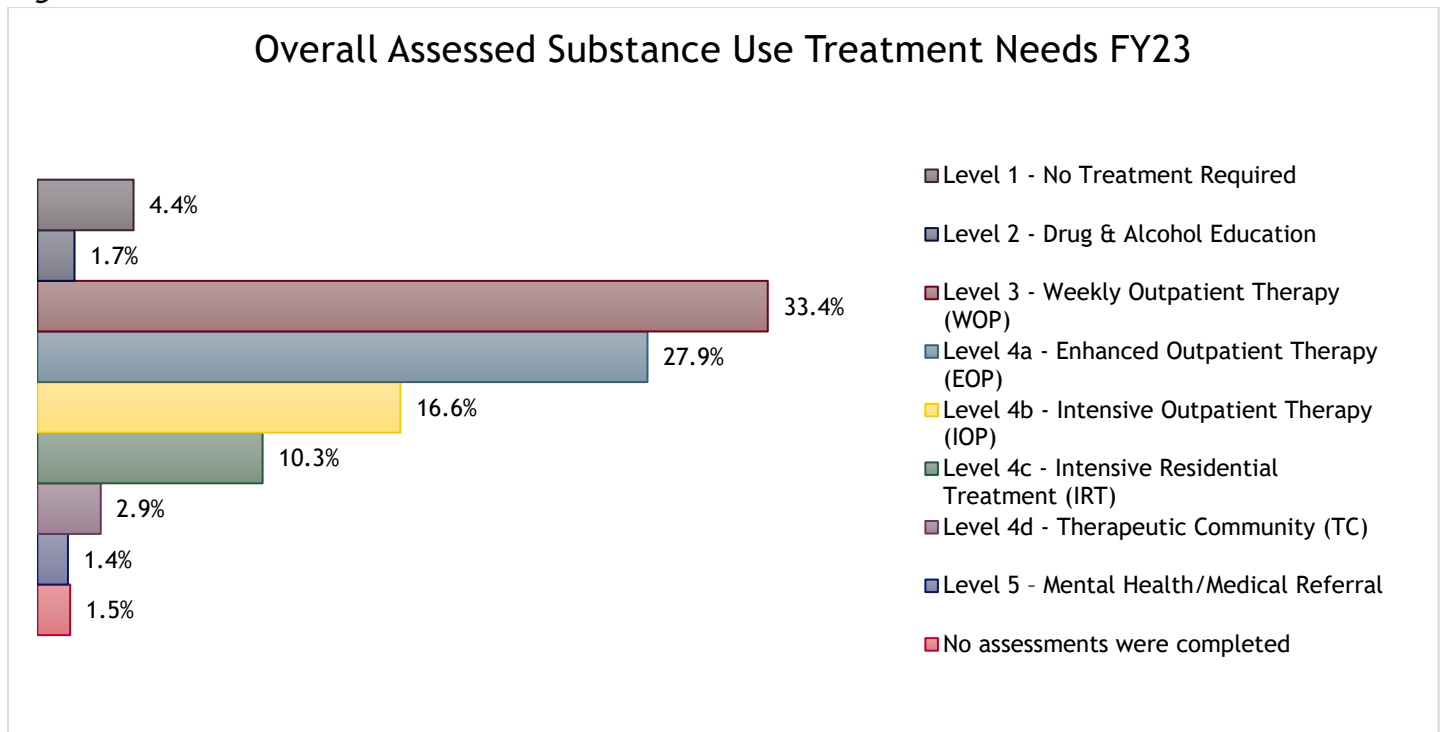
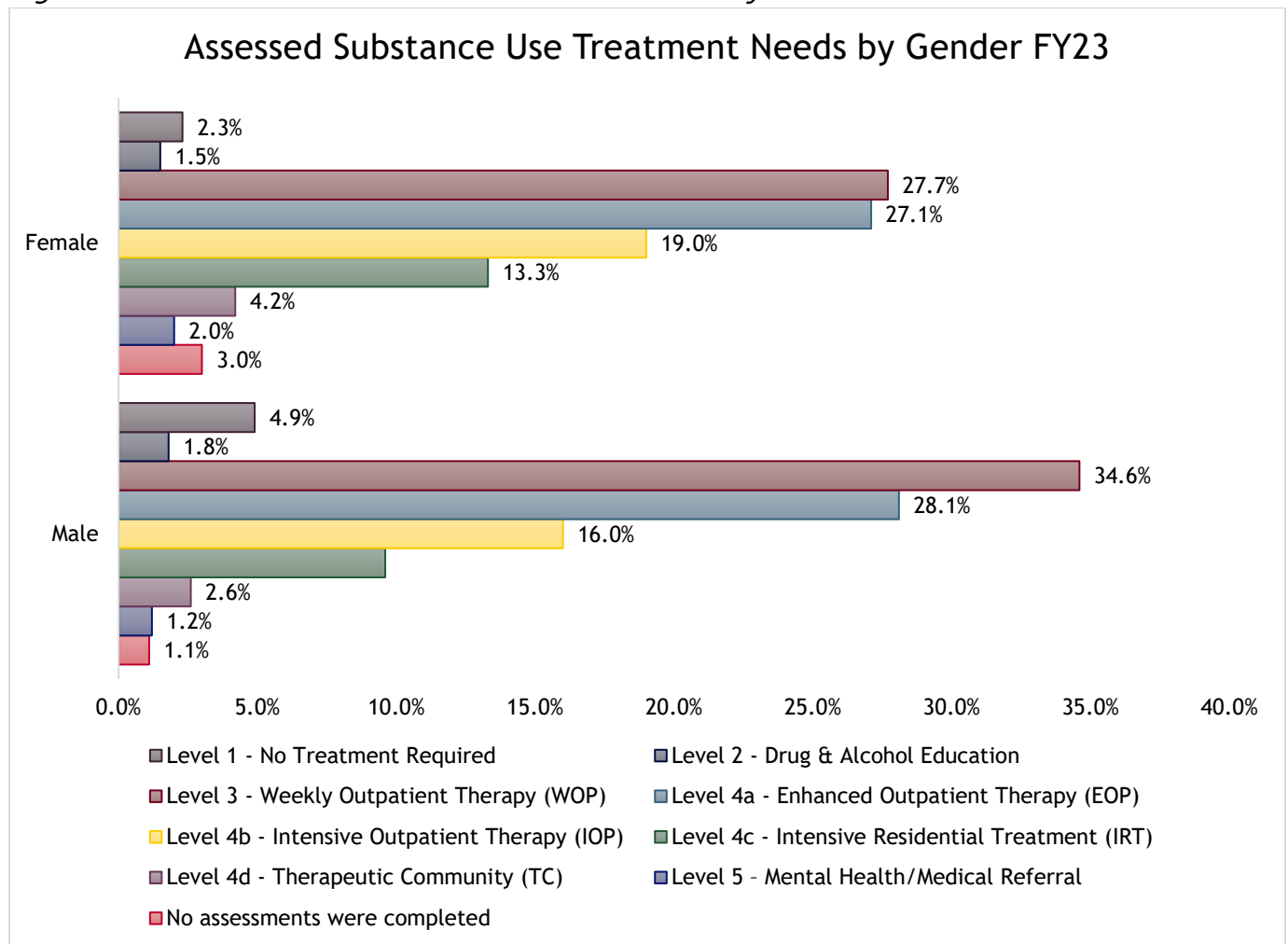


Figure 11 shows the percentage of male and female clients in community corrections assessed at each level of substance use treatment for FY23. Generally, a higher proportion of female clients are assessed as needing more intensive levels of substance use treatment (level 4a, 4b, 4c, 4d) than their male counterparts. This is consistent with data from Figure 7 showing higher risk levels and higher criminogenic needs among female community corrections clients.

Figure 11 – Assessed Substance Use Treatment Needs by Gender FY23



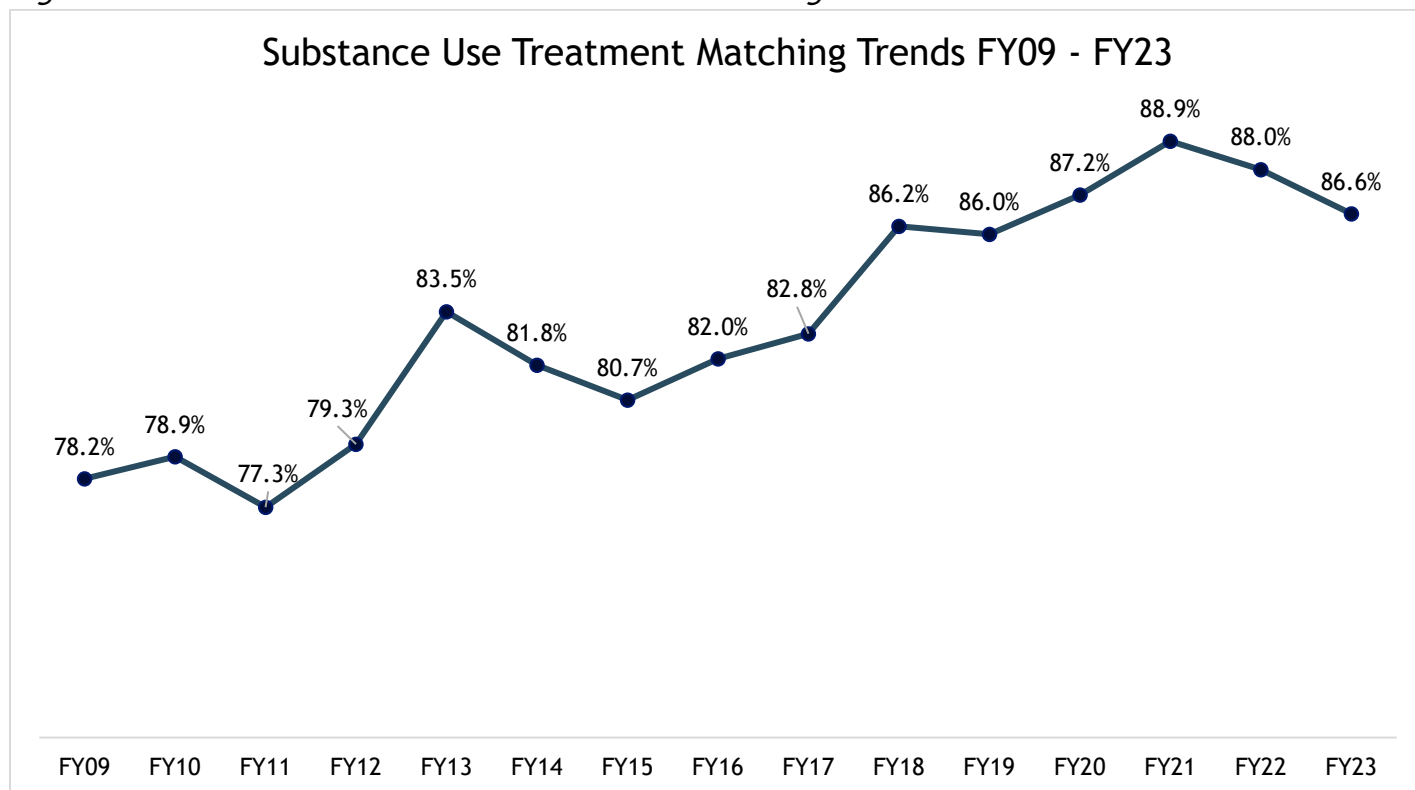
During FY23, 64% of diversion clients assessed as needing more intensive levels of substance use treatment (level 4a, 4b, 4c & 4d) than their transition counterparts. This is consistent with data demonstrating higher risk level (LSI) scores among diversion community corrections clients (Page 15, Figure 9). Conversely, 65% of transition clients assessed as needing Level 3, weekly outpatient therapy or Level 4a, intensive outpatient therapy



The percentage of clients who need weekly outpatient treatment may be somewhat inflated for two reasons: First, gaps still exist in the referral process for higher levels of treatment, especially in rural communities where higher-level levels of treatment may not be as accessible; and second, clients are sometimes placed in a lower level of treatment due to past substance use issues and/or previously completed treatment, not necessarily as a result of current treatment needs assessment.

Research³ demonstrates that when clients are referred to their assessed treatment level, they have a better outlook for successful completion of their sentence. Figure 12 demonstrates the positive trend of treatment matching for community corrections clients since 2009.

Figure 12 – Substance Abuse Treatment Levels Matching Trends FY09 – FY23



Mental Illness

Reported rates of mental illness within community corrections programs in Colorado has increased nearly every year since FY09. The overall rate of clients reporting a mental illness diagnosis in FY23 was nearly 28% as compared to 26.5% in FY22. One reason for this increase could be that mental health treatment is more accessible than it has been in the past. It could also be that the negative stigma surrounding mental health issues is changing.

³ McLELLAN, A. THOMAS Ph.D.; WOODY, GEORGE E. M.D.; LUBORSKY, LESTER Ph.D.; O'BRIEN, CHARLES P. M.D. Ph.D.; DRULEY, KEITH A. Ph.D. Increased Effectiveness of Substance Abuse Treatment: A Prospective Study of Patient-Treatment "Matching". The Journal of Nervous and Mental Disease: October 1983 - Volume 171 - Issue 10 - p 597-605



Generally, female community corrections clients have higher rates of a known or documented clinical diagnosis of mental illness. During FY23, 45% of female community corrections clients reported some type of mental illness diagnosis, while 24% of male clients reported some type of mental illness diagnosis.

Registered Sex Offenders

In FY23 there were one hundred fourteen allocated specialized sex offender beds available in community corrections. A total of two hundred twenty-two registered sex offenders discharged from community corrections in FY23. Diversion clients accounted for 47.3% of the registered sex offender population, while transition clients accounted for 52.7% of the population.

Due to the limited number of specialized treatment beds for registered sex offenders, clients needing this type of treatment can be served in a specialized sex offender treatment bed (127 clients in FY23) or in a regular residential client bed (95 clients in FY23). Diversion clients needing offense specific treatment while in a regular residential bed can request funding assistance for their treatment using the Specialized Offender Service (SOS) funds. Transition sex offenders are required to participate in sex offender treatment when they move into community corrections if they have not completed their treatment while in DOC. There are funds available for these clients' services from the Colorado Department of Corrections. During FY23, there 127 registered sex offenders terminated from an offense specific bed and 95 registered sex offenders who served time in a regular residential bed.

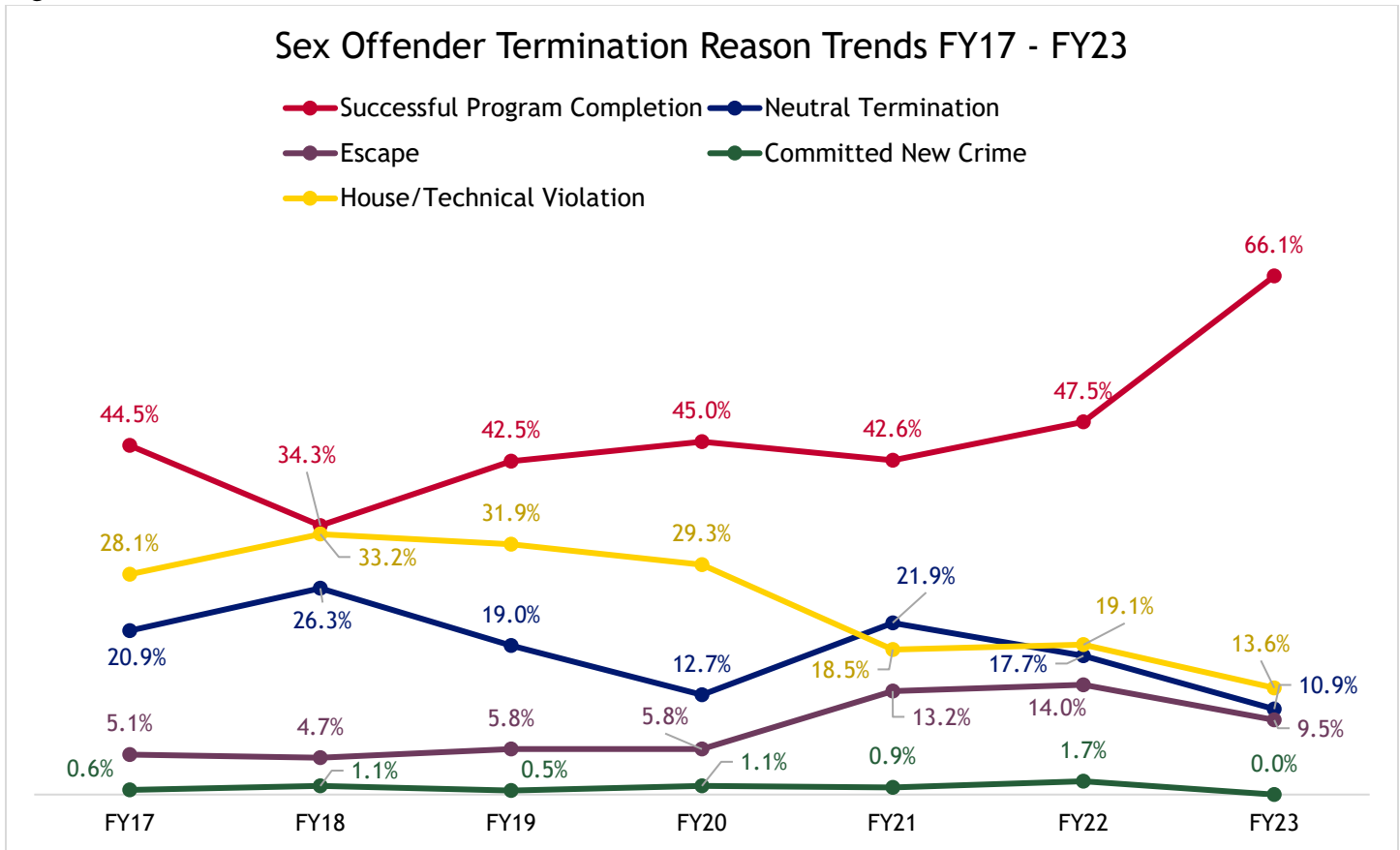
Once a sex offender has completed their offense specific treatment, they may have other identified treatment needs that are addressed as part of their individual treatment plans and/or for other cases for which they are serving time. They can be discharged from the specialized bed to complete their sentence in a regular residential bed.

Registered Sex Offender Discharges

Figure 13 demonstrates the sex offender discharge rates for each termination reason from FY17 through FY23. Clients in specialized sex offender beds, who have finished their required offense specific treatment, transfer to a regular residential bed to complete their sentence. This type of termination is considered neither a positive or negative termination and is grouped into the category Neutral Termination along with other, similar termination reasons (transfer to intensive residential treatment, outstanding warrant/pending crime, reject after accept, continuous stay, other).



Figure 13 – Sex Offender Termination Reason Trends FY17 - FY23



Community Corrections Services

Clients in community corrections are required to participate in a variety of treatment-oriented services. Case managers work closely with their clients to develop case plans that address their assessed treatment needs, life skills training, drug and alcohol education, money management assistance, and educational and vocational guidance.

The top three treatment plan elements are identified as part of the on-going case plans that clients work through, with assistance from their case manager and, in conjunction with, their assessed treatment needs. The frequency of each identified treatment plan elements for FY23 are listed in Figure 14.

Figure 14 – FY23 Identified treatment Plan Element Rates

	Tx Plan Element 1	Tx Plan Element 2	Tx Plan Element 3
Attitudes/Thoughts/Beliefs	30.9%	20.5%	15.0%
Treatment Needs	28.4%	17.7%	20.6%
Low Imp Cont/Hx Antisocial Bx	18.3%	24.0%	18.1%



Antisocial Companions	11.1%	16.5%	19.0%
Education/Employment	6.8%	13.1%	14.2%
Leisure/Recreation	2.2%	3.2%	5.7%
Family/Marital	2.0%	4.7%	6.9%

In many cases, clients access services in the community beyond those provided by the program. There two funds available to assist clients with the costs associated with treatment. Correctional Treatment Funds can be used for substance use and dual diagnosis treatment for residential clients. The Specialized Offender Services fund, administered by the Office of Community Corrections, can help diversion clients who assess as needing other services such as such as sex offender and domestic violence treatment.

Figure 15 demonstrates the percentage of clients who received the top ten types of treatment service before they were discharged from community corrections in FY23.

Figure 15 – Top Ten Treatment Types Received by Community Corrections Clients in FY23

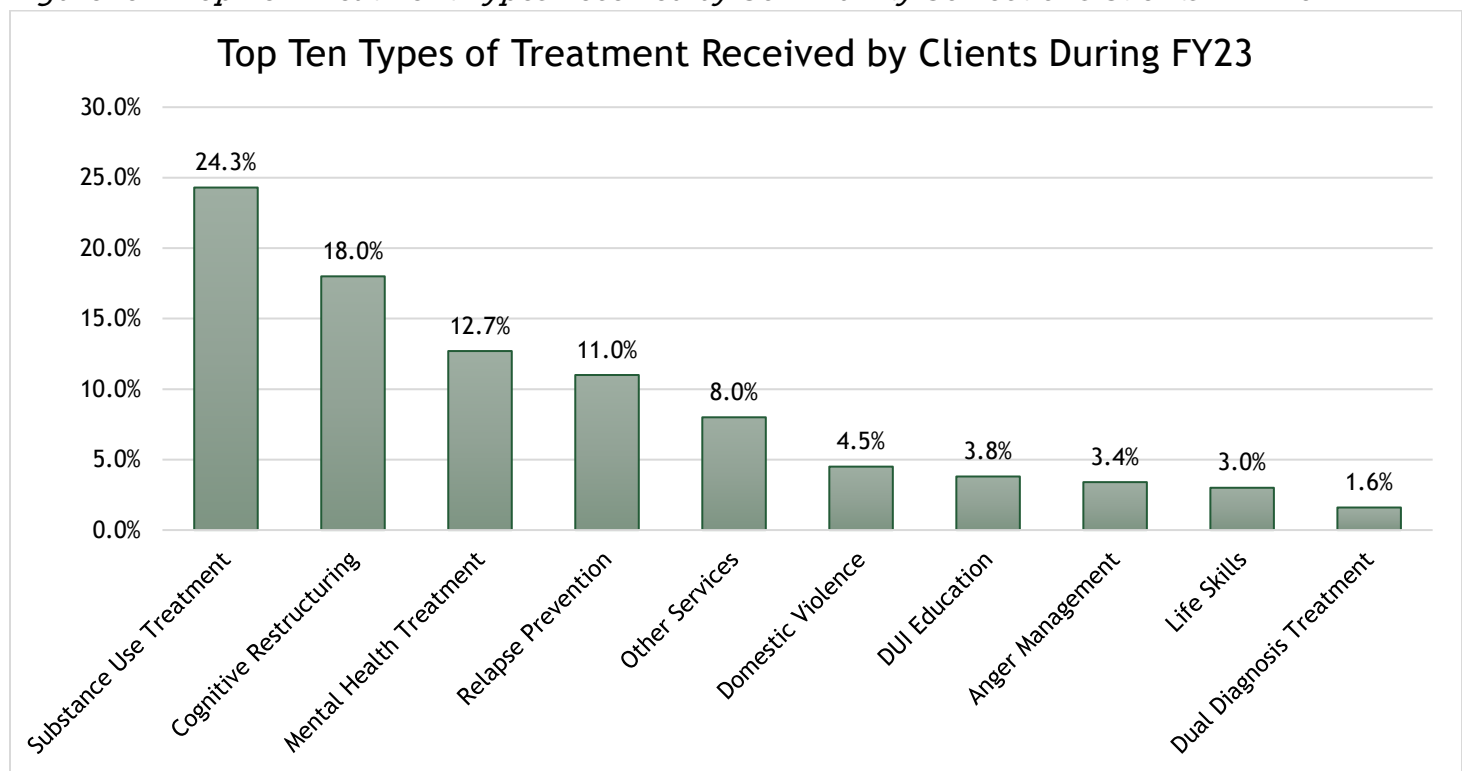
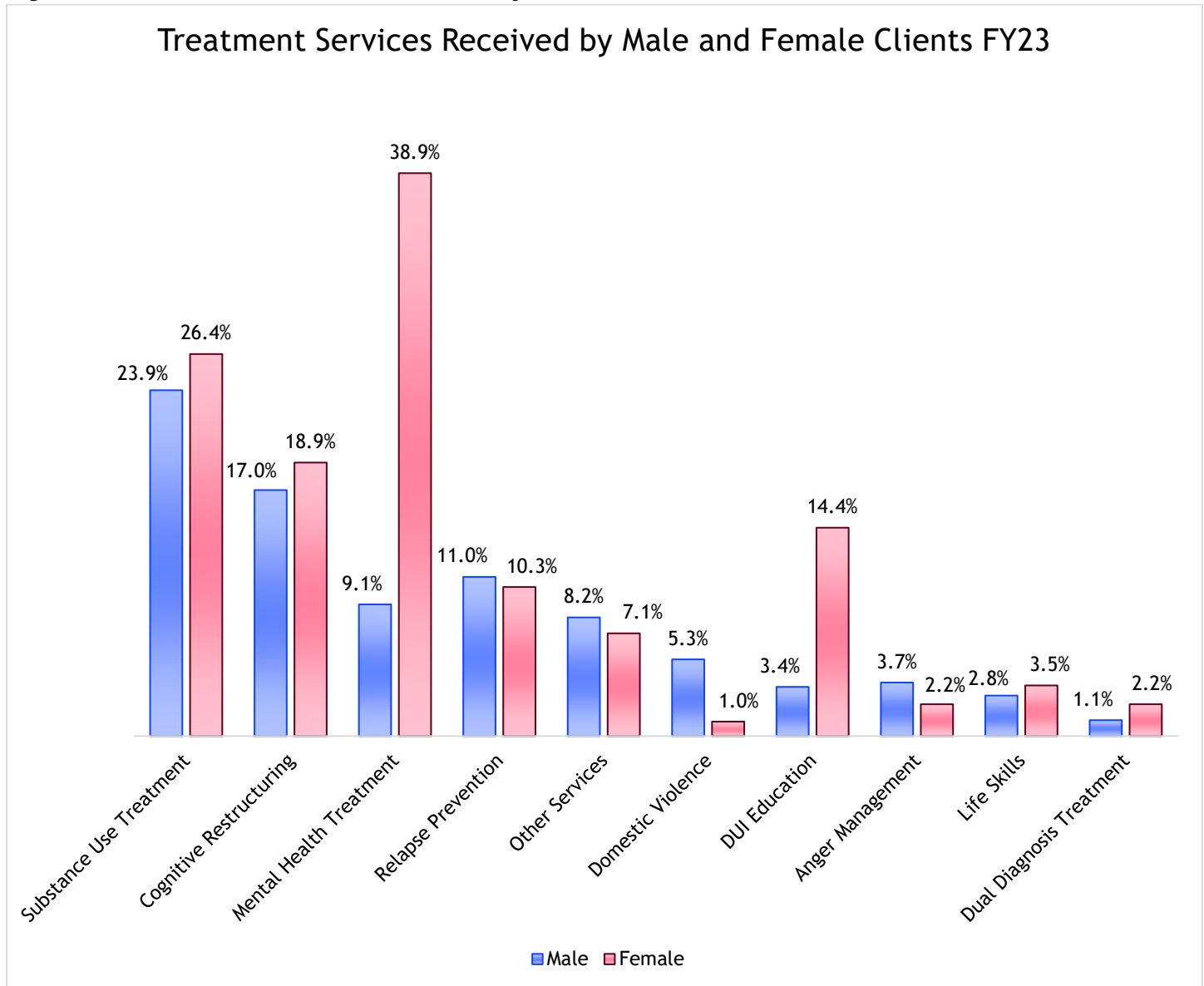


Figure 16 displays the services received by the male and female client populations during their time in community corrections. The treatment needs for each individual client are identified through the assessments and as their case plans are developed with their case manager. Generally, females receive a higher proportion of mental health services while in community corrections as compared to



their male counterparts. This is consistent with assessment data from Figure 7 that demonstrates, that based on their LSI and SSI-R scores, females have higher risks to recidivate and higher treatment needs than men. They also report higher rates of mental illness diagnoses as compared with male clients in community corrections.

Figure 16 – Treatment Services Received by Male and Female Clients FY23



Discharges

Clients are discharged from community corrections residential programs when they complete the length of their sentence, are transferred to another residential program, progress to a non-residential program, or when they violate program rules rendering them not amenable to continue

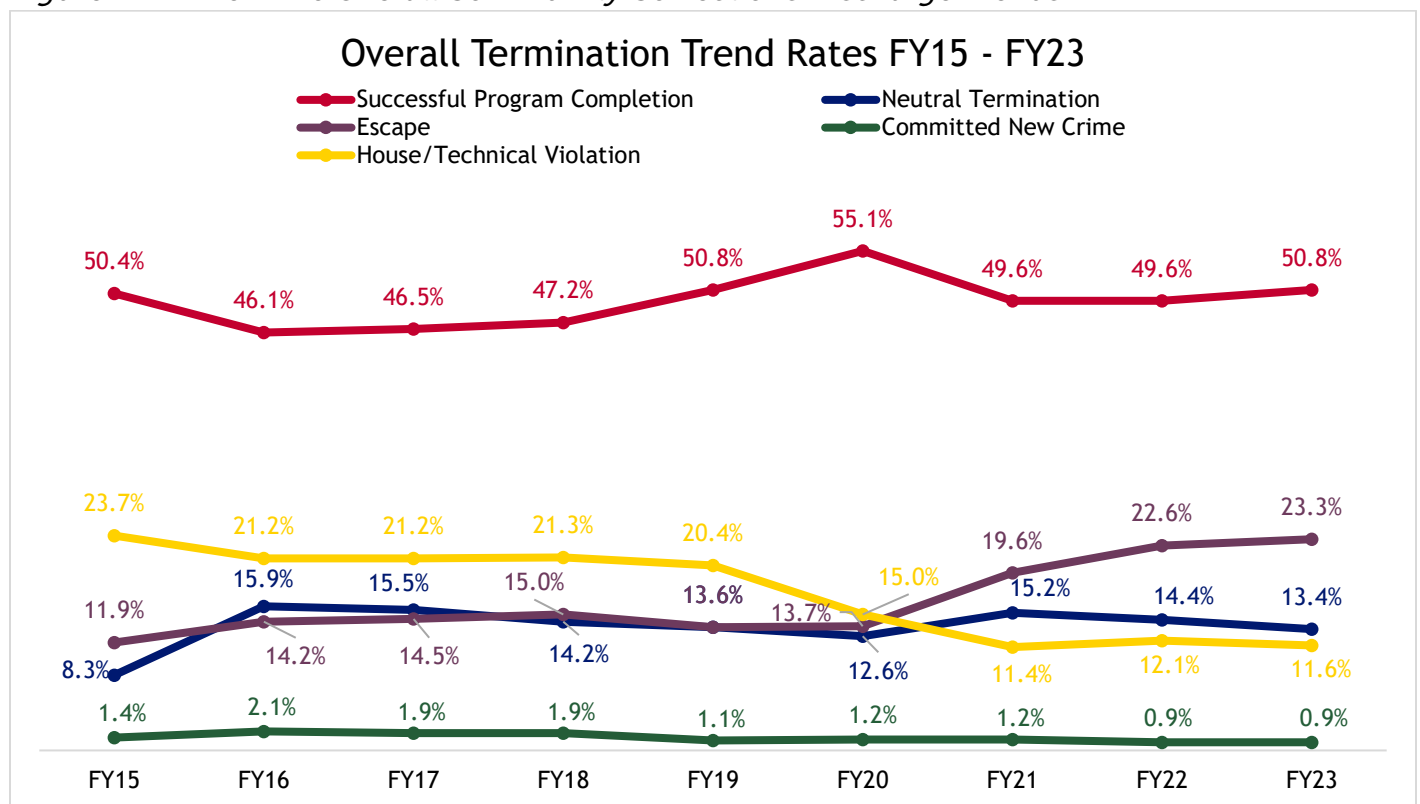


their sentence in community corrections. In FY23, 50.8% of community corrections clients successfully completed their residential placement and 12.5% of all discharges were for technical violations, including the commission of new crimes. Escapes were slightly higher than FY22 (22.6%) and accounted for 23.3% of discharges during FY23.

It is important to note that the termination categories considered neutral terminations have been grouped together here and throughout this report. These neutral terminations include transfer to another community corrections facility, transfer to intensive residential treatment, outstanding/warrant pending crime, reject after accept, and other (e.g. detainment by a federal agency or other causes for termination outside of the normal termination reasons). Neutral terminations are preserved in the data set to provide greater transparency in reporting. There were 588 clients termed for one of these neutral reasons. When these terminations are removed from the data set, the overall successful program completion rate is 58.7%.

Figures 17 demonstrates the community corrections discharge rate trends from FY15 through FY23 for the overall residential population.

Figure 17 – FY15-FY23 Overall Community Corrections Discharge Trends

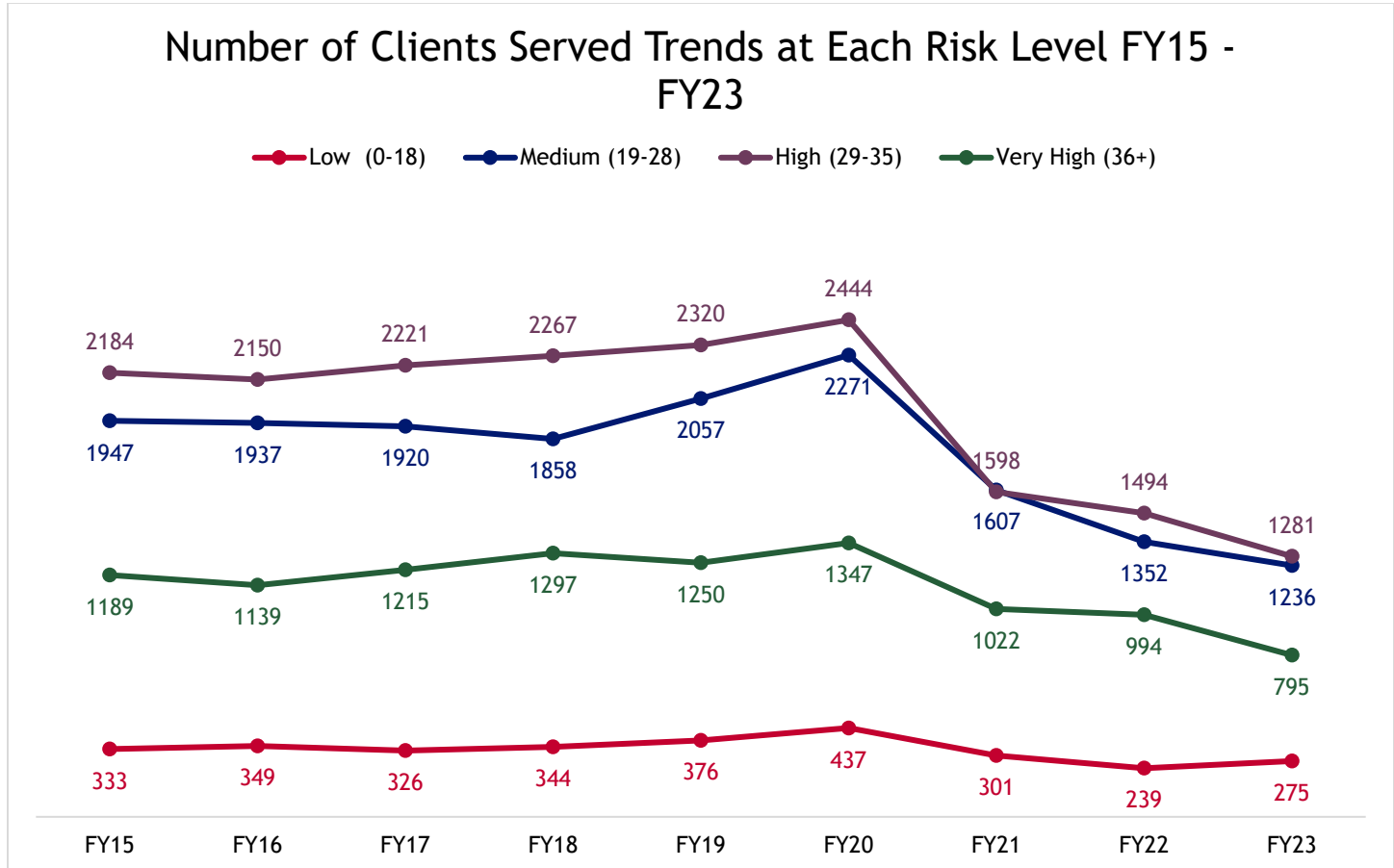


Although successful program completion cannot be predicted in community corrections, using a client's LSI score provides insight into the likelihood of successful discharge from a community corrections program. LSI scores are divided into four categories: low risk (LSI 0-18), medium risk (LSI 19-28), high risk (LSI 29-35) and very high risk (LSI 36 and higher). The statewide mean LSI score



(29.3 in FY23) placed the average community corrections client in the high-risk category. Figure 18 demonstrates the number of clients served at each risk level from FY15 through FY23.

Figure 18 – Number of Clients at Each Risk Level Served in FY23



The risk level breakdown of diversion and transition clients during FY23 are displayed below in Figures 19 and 20.

Figure 19 – Percentage of Diversion Clients Served at Each Risk Level During FY23

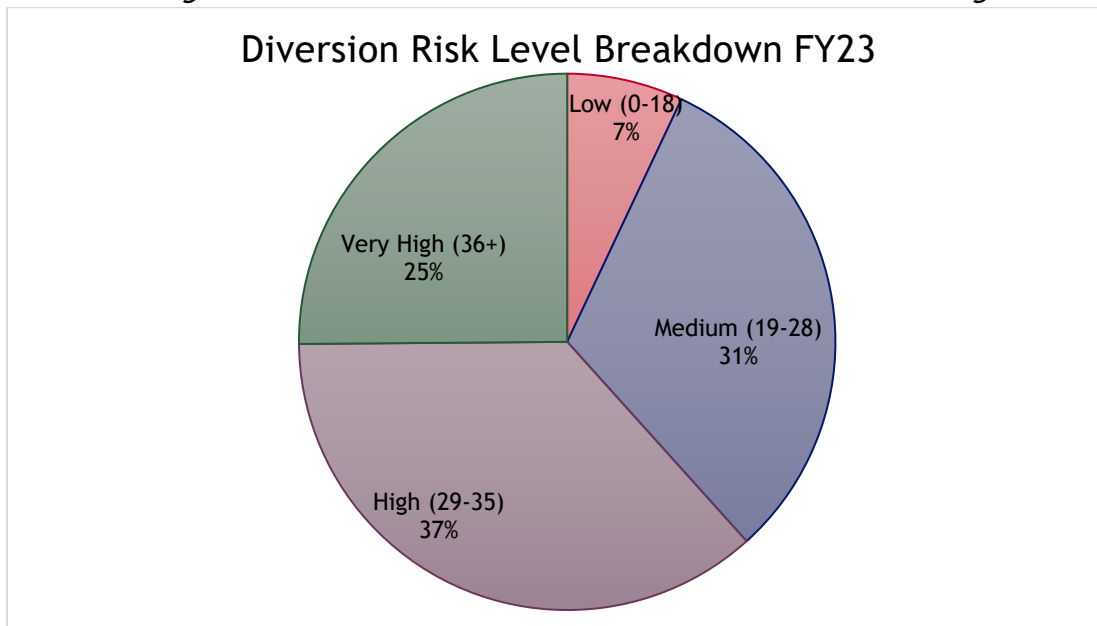
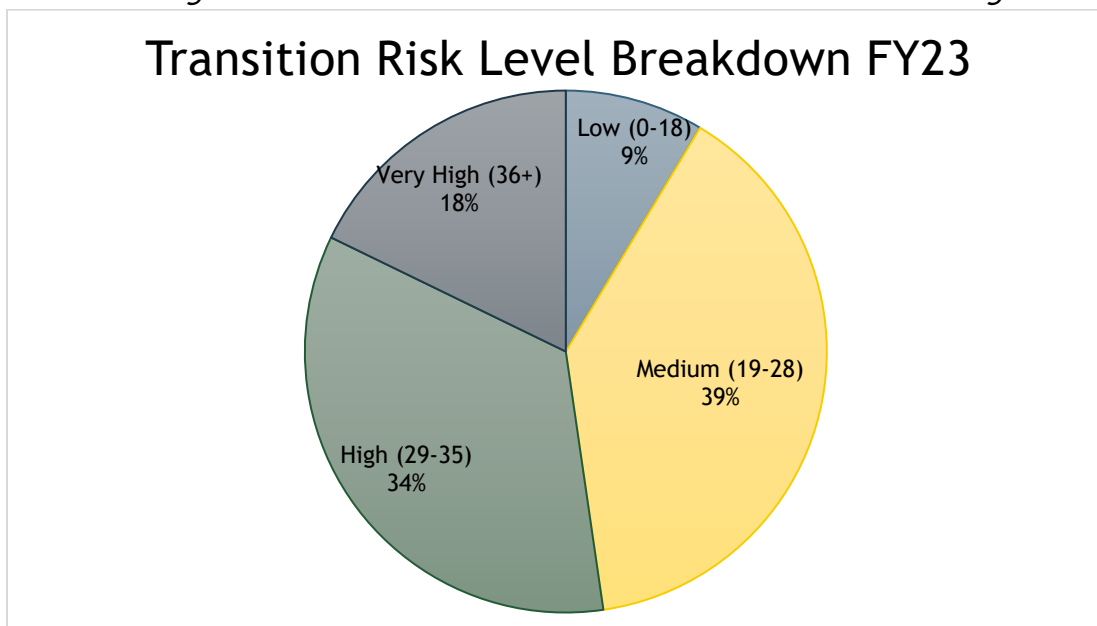


Figure 20 – Percentage of Transition Clients Served at Each Risk Level During FY23

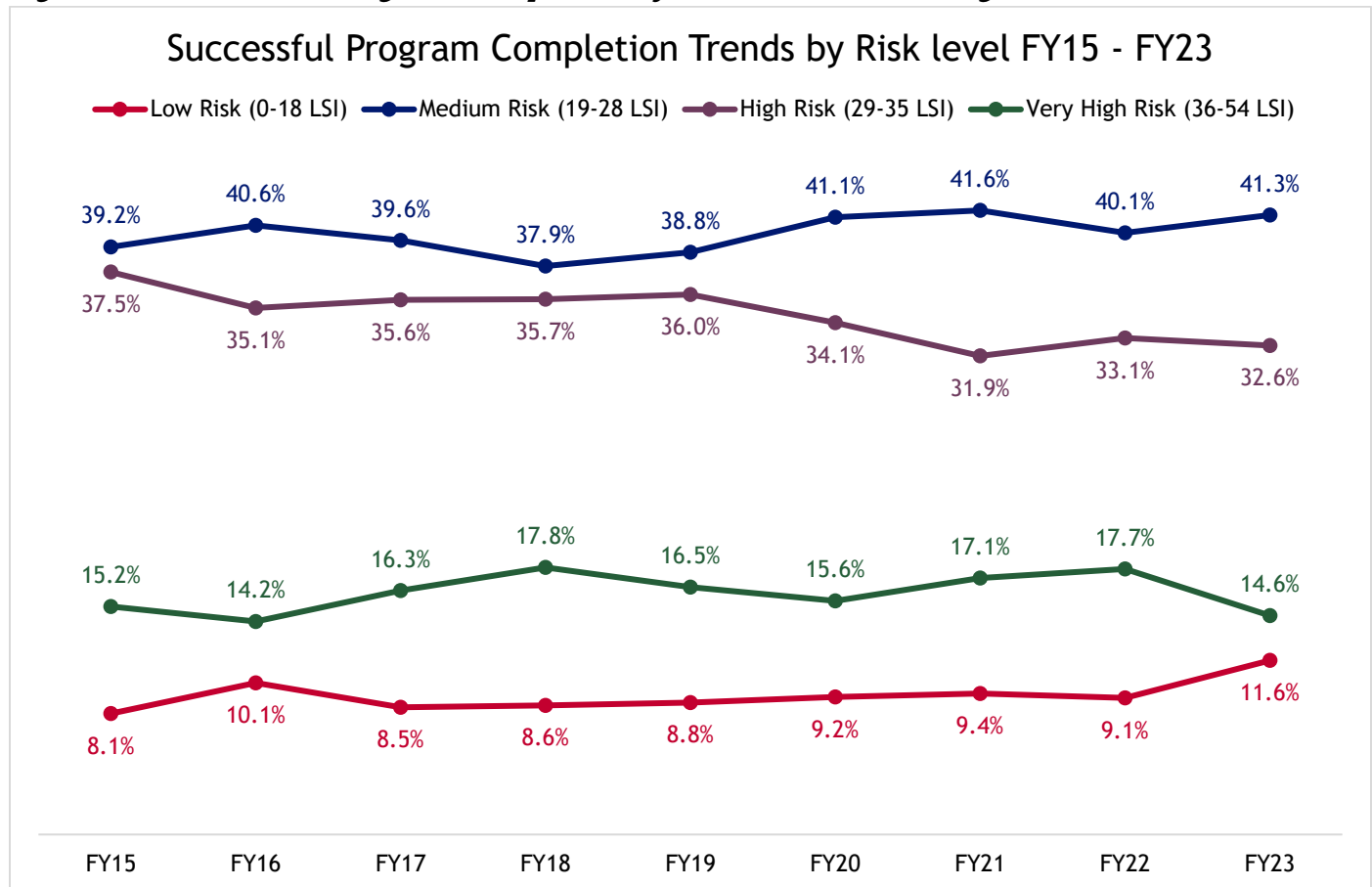


The higher a client's risk, the more treatment and skills they need to complete community corrections successfully. Figure 21 reports the successful completion discharge rate trends between



FY15 and FY23 for clients at each risk level. As noted earlier in this report (Figure 12), matching a client's assessed treatment needs with the treatment they are referred to is one way in which clients with higher risks and needs can work toward successful completion of their community corrections program.

Figure 21 – Successful Program Completion by Risk Level FY15 through FY23



Technical Violations

Technical violation discharges reflect the client's behavior and actions and/or substance use or possession while residing in the facility. Examples of these different behaviors include unaccountable time in the community, failure to participate in treatment, failure to follow the program rules/policies, use of alcohol or other drugs, and possession of contraband in the facility.

Clients are usually not terminated from community corrections for just a single violation, but rather the whole of their behavior while serving their sentence. To capture this more complete picture, the new Community Corrections Information and Billing system (CCIB 2.0) collects the data for this type of termination differently than was done in the old system. For FY23 technical violation discharges, programs were asked to list the recent major write-ups received by the client and the decision



factors that led to their termination from the program. The numbers presented below do not represent a single termination reason for each client but rather a description of the different violations made by clients during FY23.

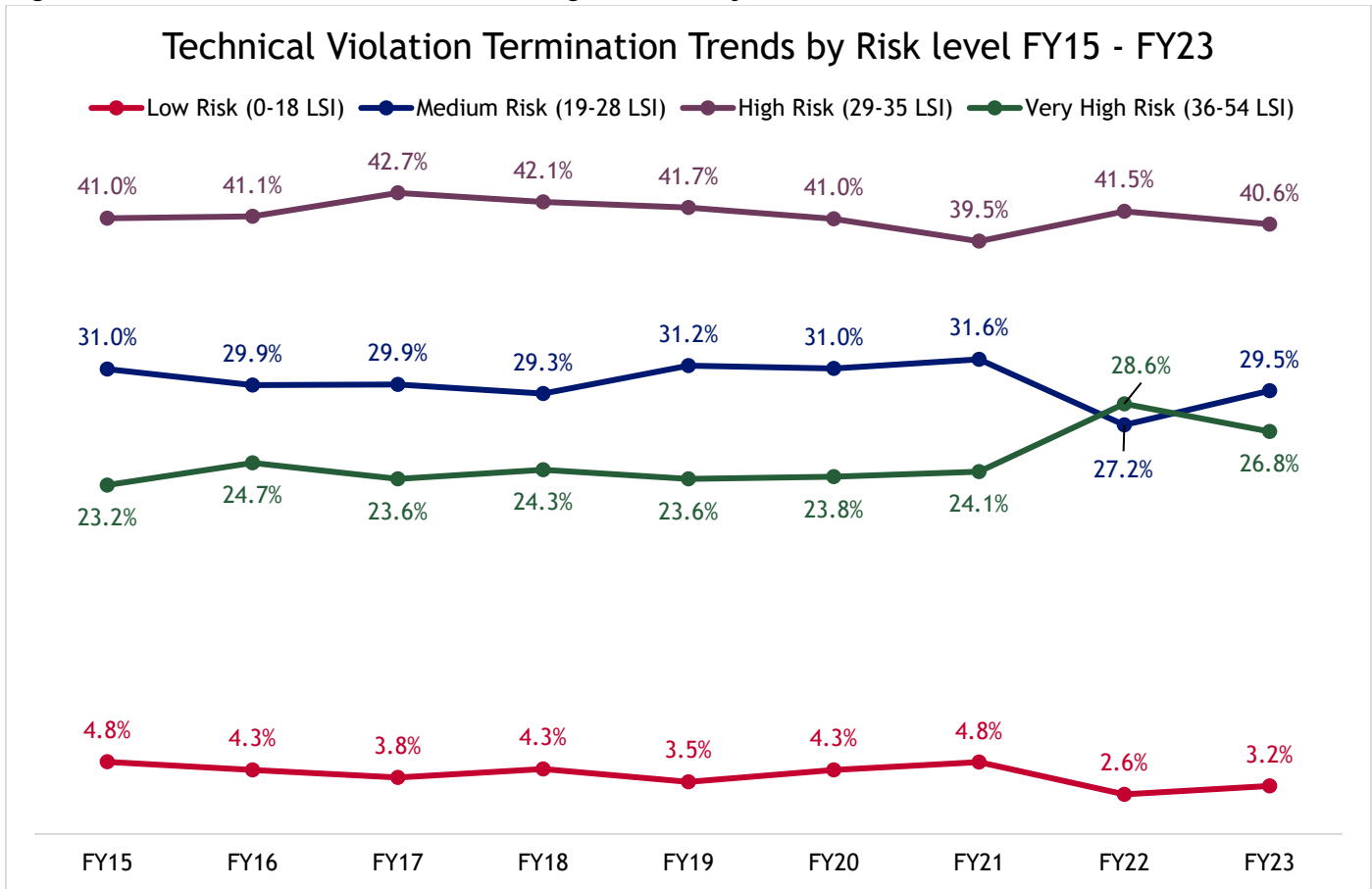
511 clients were discharged in FY23 due to technical violations. The categories below are a summary of the violations associated with technical violation discharges as noted by case managers in CCIB.

- 232 clients were reported as having repeated substance use/positive urinalyses tests.
- 192 clients were reported as being non-compliant with program rules, treatment, behavior or other rules and regulations.
- 143 clients were reported as being unaccounted for in the community during their stay.
- 99 clients were reported as bringing contraband into the facility. Contraband can be classified as drugs, cell phones, unapproved food or anything prohibited by the rules and regulations for the program.
- 73 clients were discharged for aggressive and/or harassing behavior against facility staff, other clients or both.
- 47 clients were reported as having received new law violations while serving their time in the program.
- Other issues listed as decision factors for technical violation terminations included issues with gaining/retaining employment (6), violations the Prison Rape Elimination Act (PREA) (4) and clients choosing to self-regress (3). There were fewer of these decision factors than those noted above.

Clients classified as medium risk and high risk are more likely to be discharged due to technical violations than very high or low risk classified clients. As noted above, technical violation discharges are not generally based on just one offense but on all the events that led up to the client's discharge from the program. Figure 22 demonstrates the technical violation discharge rate trends between FY15 and FY23 for residential clients at each risk level.



Figure 22 – Technical Violation Discharge Trends by Risk Level FY15 - FY23



Escapes/Unauthorized Absence

Discharges by unauthorized absence (formally termed escape) made up 23.3% of client terminations during FY23. Reducing the number of these absences and otherwise increasing success rates for community corrections clients is a top priority around the state. Early identification and intervention can help to reduce the risk of unauthorized absence in community corrections programs. During FY23, 1,022 clients were terminated from community corrections without finishing their sentence due to unauthorized absence.

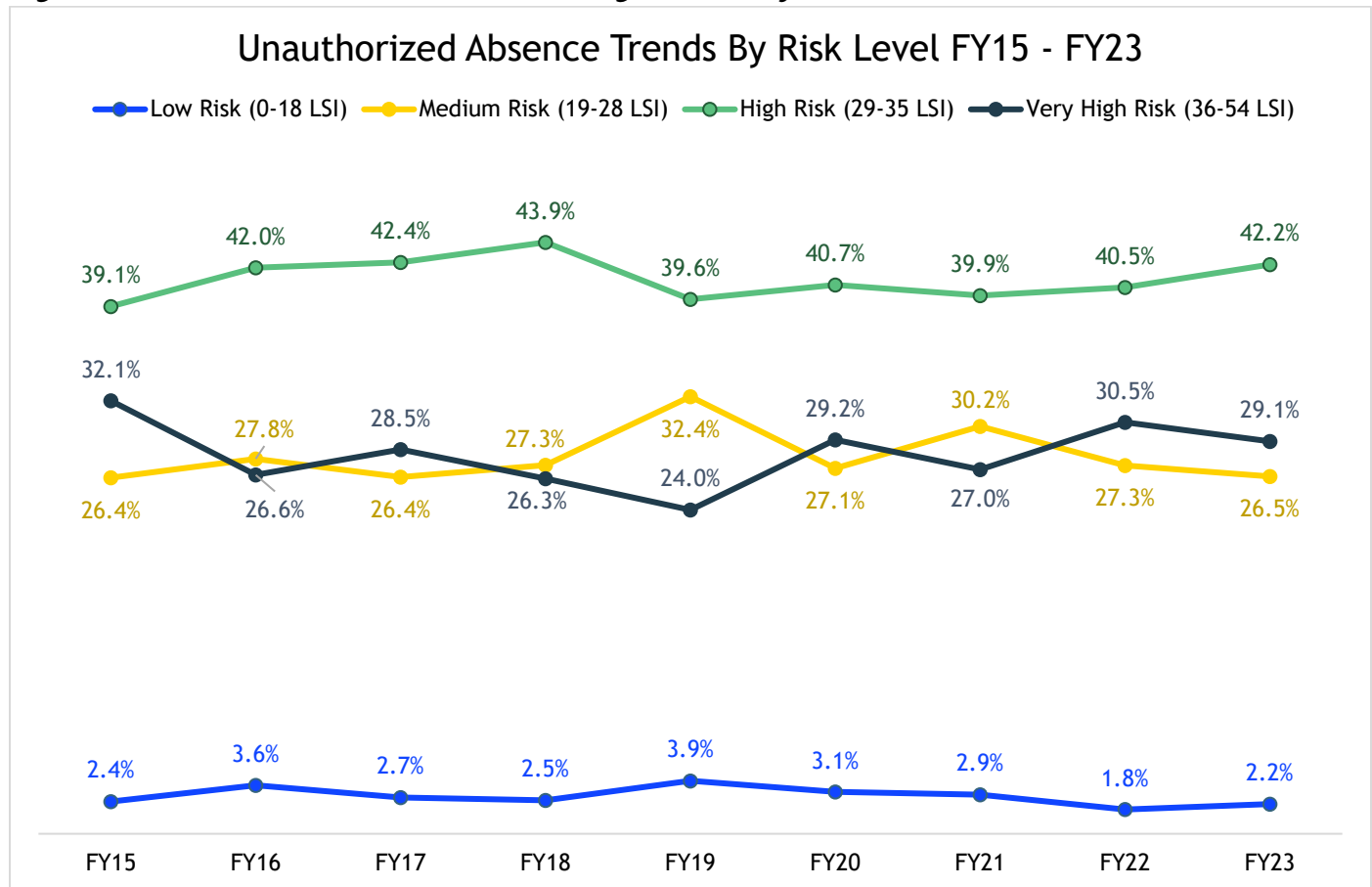
The overall average length of stay for a client who terminated as an unauthorized absence from their program in FY23 was 71.1 days. Diversion clients, on average, stayed in community corrections for 65 days while transition clients stayed for 84 days before they were terminated. When looking at the average length of stay for males and females who were discharged because of an unauthorized absence, men stayed an average of 73 days while women stayed 62 days. The majority of clients who were discharged from their programs due to an unauthorized absence in FY23 were between the ages of 26 and 35 and were sentenced for F4-F6 felonies.

Clients who discharged due to unauthorized absence from community corrections programs during FY23 have slightly higher average LSI score (31.9), than the overall residential population (29.7).



They reported slightly higher rates of chronic unemployment (43.7% as compared to 40.8% for the overall residential population). Unauthorized absence discharge trends by risk level are reported in Figure 23 below.

Figure 23 – Unauthorized Absence Discharge Trends by Risk Level FY15 - FY23



Employment at Termination

Many community corrections clients are able to obtain employment while under supervision and evidence suggests that employment plays an important role in a client's successful reintegration into the community. In many cases, diversion clients come into community corrections already employed, while the majority of transition clients start the process of obtaining employment.

Per the 2022 Community Corrections Standards⁴ (CD-190), clients receive an instrument-based job readiness assessment as part of their intake to the facility. This assists the program in determining a

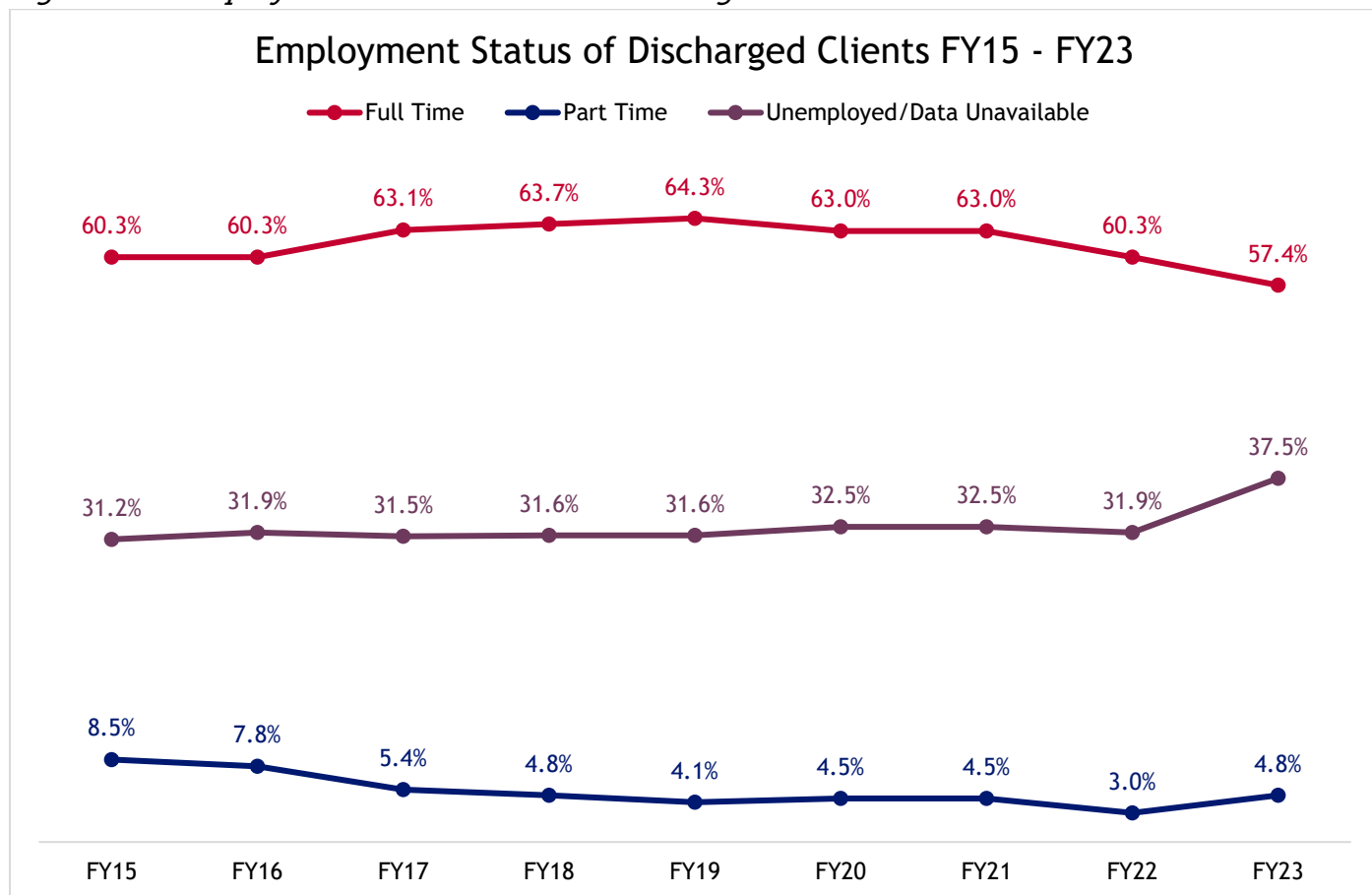
⁴ [2022 Colorado Community Corrections Standards](#)



client's job search readiness for the Individualized Employment Plan (IEP). The IEP identifies client's strengths and needs, specifies job readiness goals, and outlines job search expectations.

Figure 24 outlines clients' employment status at the time of their termination since 2015. During FY23, 2522 clients discharged with full-time jobs, 211 clients discharged part time jobs and 1,658 clients discharged unemployed (includes those that are disabled and unable to work) or their employment data was not available.

Figure 24 – Employment Status Trends of Discharged Clients FY2015 – FY2023



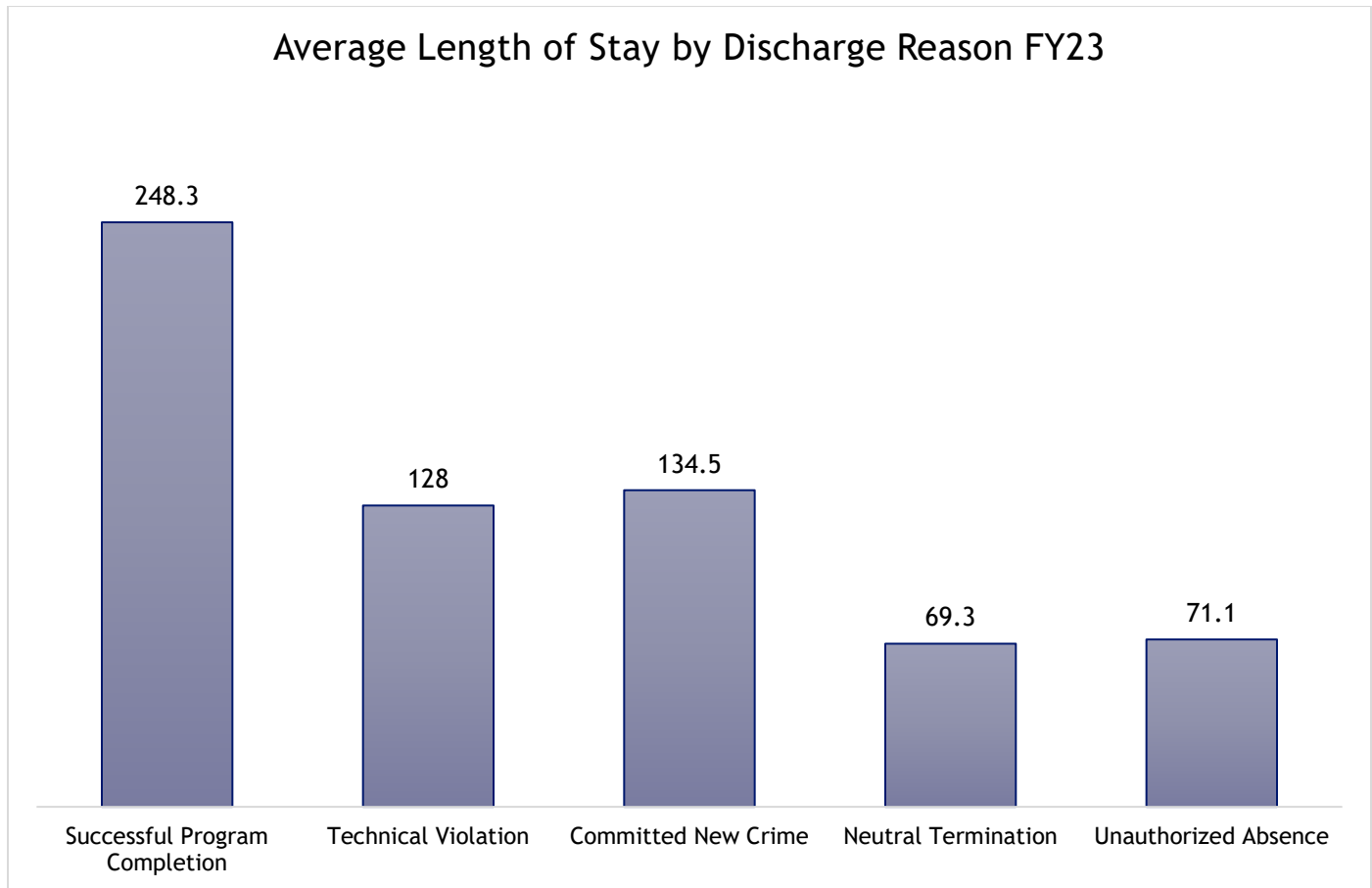
Length of Stay (LOS)

During FY23, the average length of stay for residential clients in community corrections was 168.1 days or 5.5 months. The average length of stay for diversion clients was 161.3 days; transition clients stayed approximately 178.4 days. Female clients stayed in community corrections an average of 144.7 days, transgender clients 90 days and male clients an average of 173.7 days

Figure 25 outlines the variations in length of stay in days by termination reason. On average, clients who are terminated for unauthorized absence, walk away from the program within the first 71 days. Clients who successfully complete the program, do so in approximately eight months.



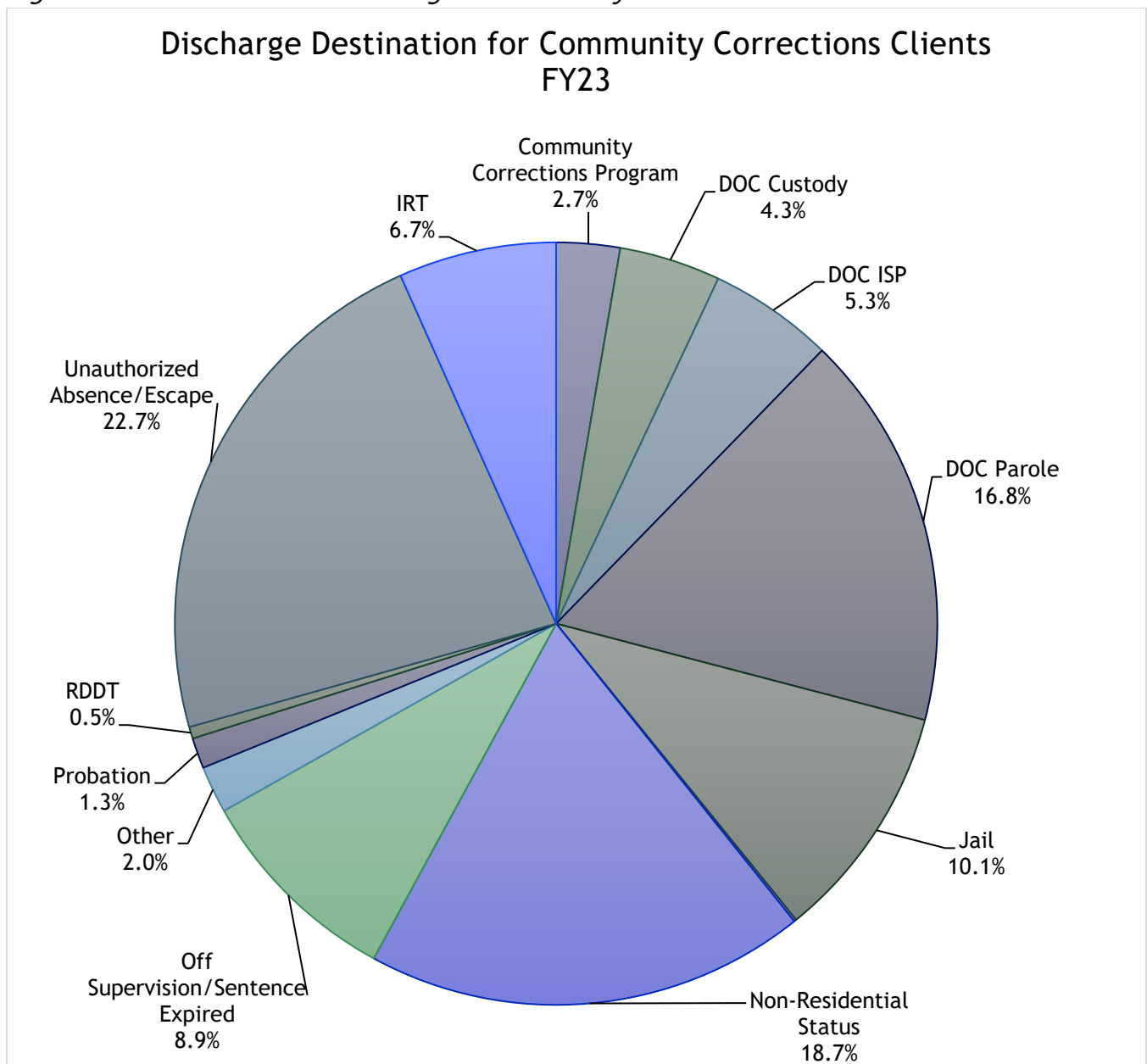
Figure 25 – Average Length of Residential Stay in Community Corrections by Discharge Reason FY23



Once a diversion client successfully discharges from the residential phase of community corrections, they typically complete the remainder of their sentence under different types and levels of non-residential supervision. This is generally determined by the length of the client’s sentence and/or their progress in the program. A transition client, when ready to progress to the next stage of supervision, can be granted parole or transferred to the Intensive Supervision Parole Inmate (ISP-I).

Figure 26 reveals that 65.7% of all clients discharged from residential community corrections in FY23 received additional supervision after their release.

Figure 26 – Destination of Discharged Community Corrections Clients FY23



Recidivism

According to a study published in April 2018 by the Division of Criminal Justice Office of Research and Statistics, 55.0% of residential community corrections clients who terminated in 2014 through 2016 discharged successfully from the program. One year after release from community corrections, 19.9% of diversion clients and 21.7% of transition clients had new charges filed in court. Below are links to the most recent recidivism report for community corrections, as well as the community corrections dashboard where the public can see community corrections data.

[Community corrections in Colorado: Program outcomes and recidivism Terminations January 2014-December 2016](#)

<https://ors.colorado.gov/ors-recidivism>

<https://ors.colorado.gov/ors-commcorr>



Section II – Equity, Diversity and Inclusion in Community Corrections

Community Corrections Population Based on Ethnic Group

Between FY15 and FY23, there was a statistically significant difference between White Clients and Clients of Color for condition of probation, diversion, parole, and ISP at the .05 level. There was not a statistically significant difference between White Clients and Clients of Color for transition at the .05 level. Figures 27 and 28 display the legal status trends for Clients of Color and White Clients between FY15 and FY23

As stated earlier in this report, condition of probation and diversion clients are sentenced to community corrections by the judge overseeing their cases. Parole and ISP clients have been released from the Department of Corrections and are completing their sentences as a condition of their release. Transition clients are still considered inmates of the Department of Corrections and are beginning their transition out of DOC custody and back into their communities.

It is important to note that condition of probation, parole, and ISP have small sample sizes and this can artificially create statistical significance. Something to consider regarding transition, between FY15 and FY23 the numbers of clients who are transition from DOC are fairly equal between White Clients and Clients of Color. Whereas between the same period, more White Clients are diversion clients than Clients of Color.

Figure 27 Legal Status Trends for Clients of Color FY15-FY23

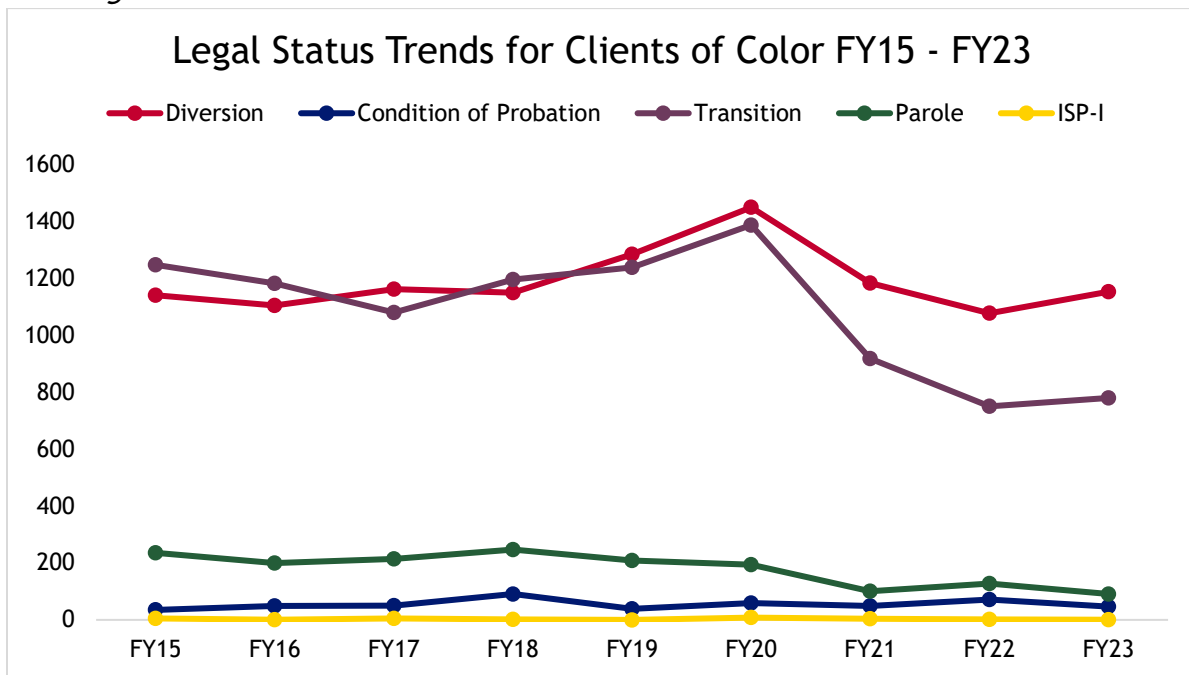
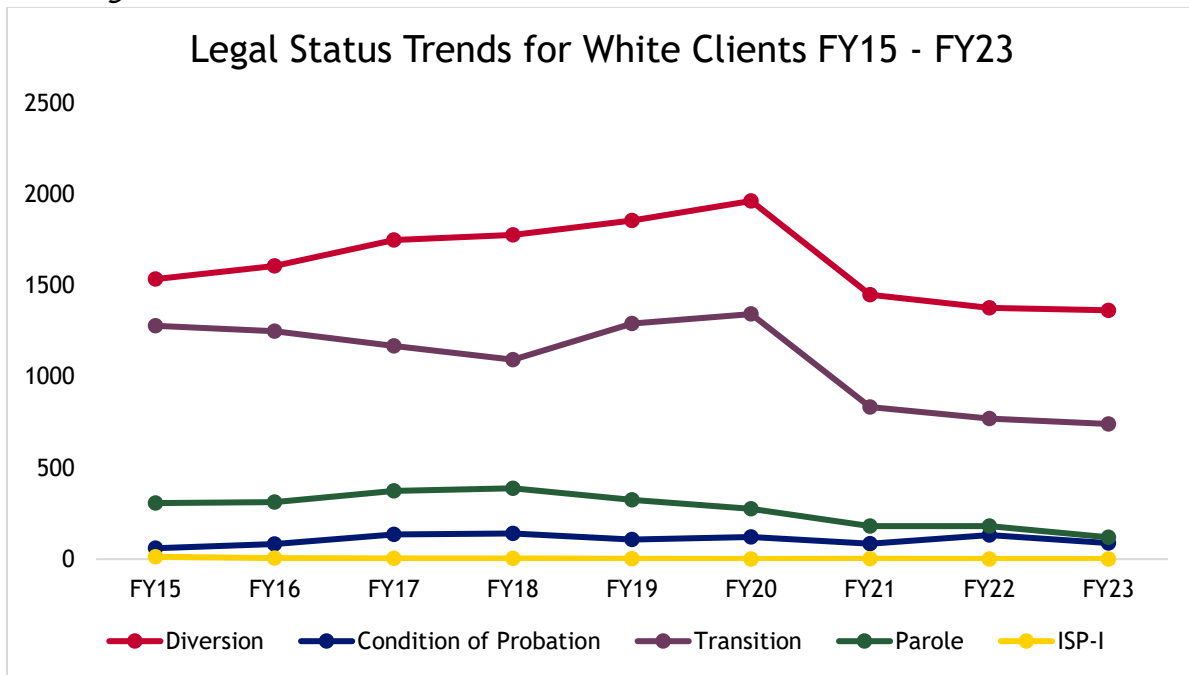


Figure 28 Legal Status Trends for White Clients FY15-FY23



Community Corrections Discharges Based on Ethnic Group

Between FY15 and FY23, those clients identifying as White represent 56% of the population of community corrections, whereas Clients of Color represent 44% of the community corrections population (Figure 29). Of successful completions between FY15 and FY23 White Clients represented 58% of all successful completions, whereas Clients of Color represented 42% of all successful completions (Figure 30).

Figure 29 Average Community Corrections Population General Ethnicity FY15-FY23

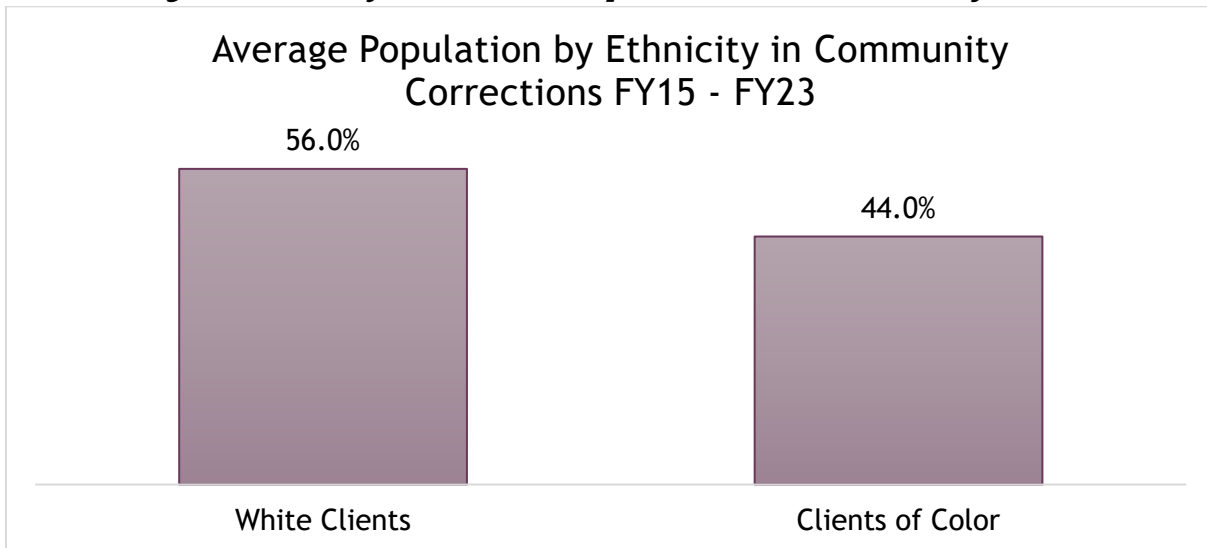
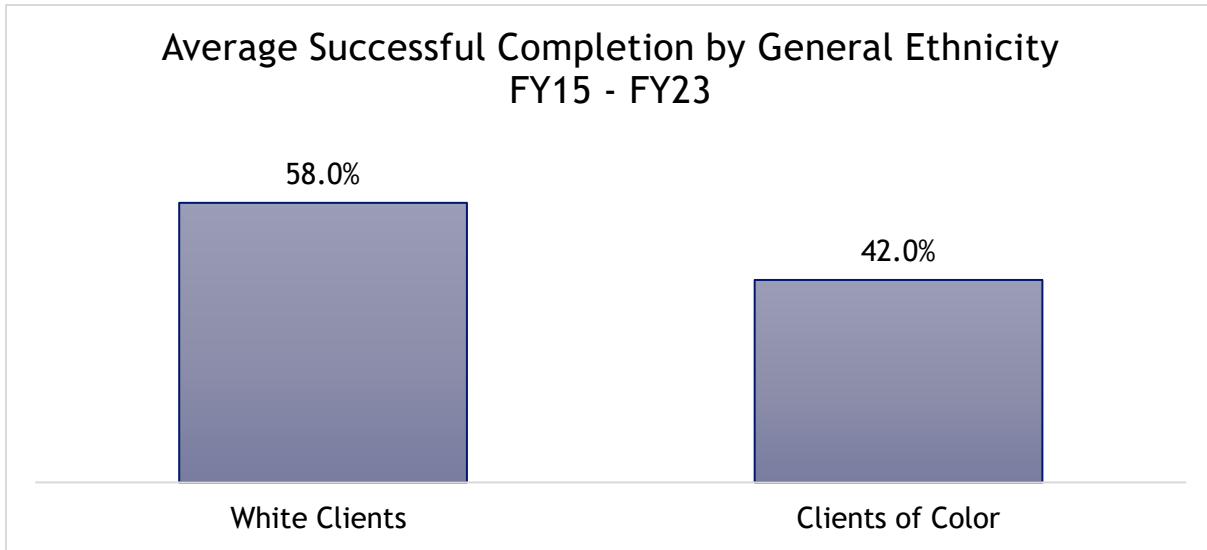
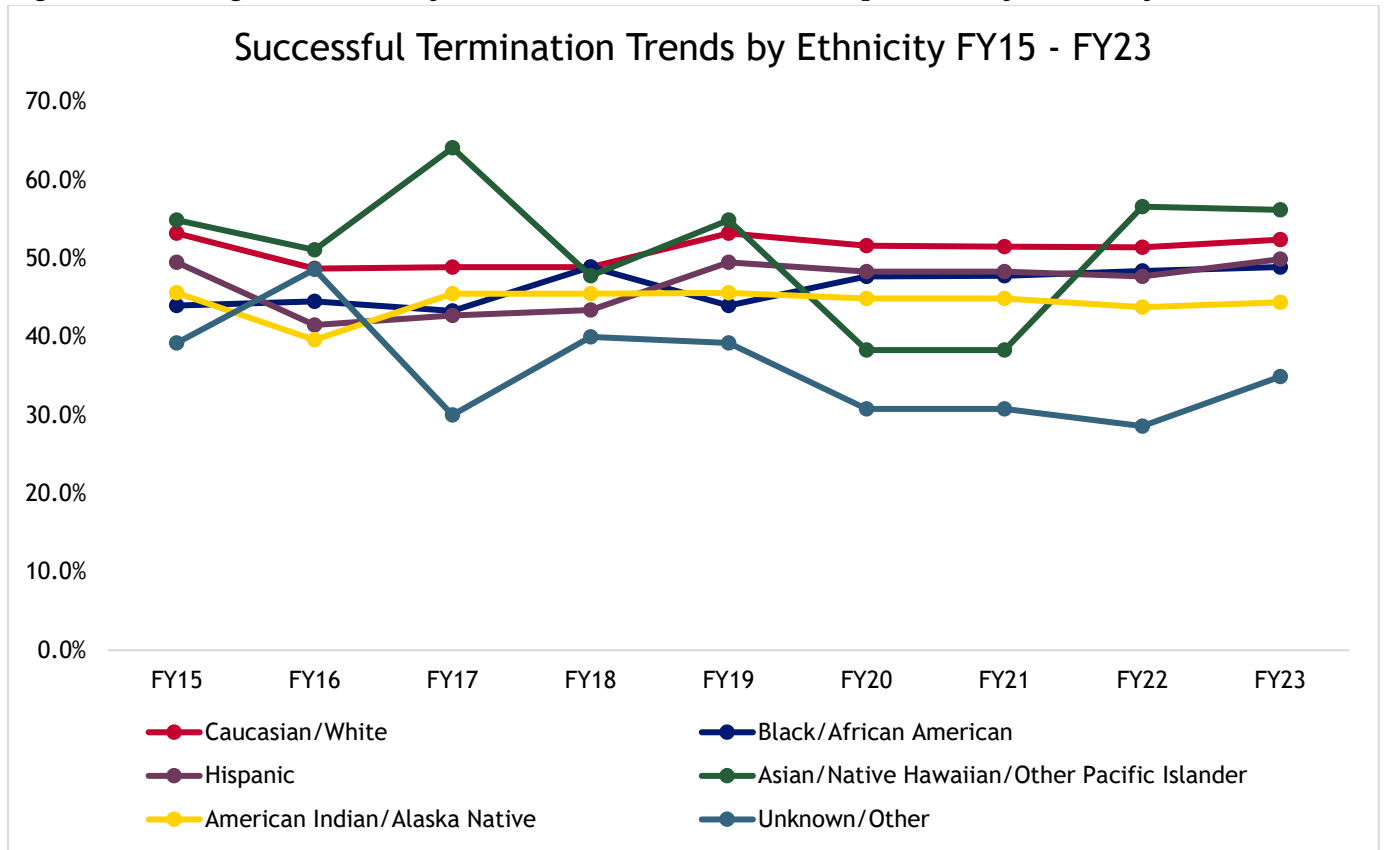


Figure 30 Average Community Corrections Successful Completion by General Ethnicity FY15-FY23



For the majority of community corrections clients, successful termination rates have been fairly stagnant since FY15. For comparison with Figure 30 above, Figure 31 demonstrates the successful termination trends by specific ethnic groups since FY15.

Figure 31 Average Community Corrections Successful Completions by Ethnicity FY15-FY23



Section III - Non-Residential Community Corrections

The non-residential phase of community corrections is designed to assist in the transition of stabilized, diversion clients back into the community with a gradual decrease in supervision. These clients have conducted themselves well in a highly structured residential setting. Through their case plans with their case manager, they have addressed criminogenic risk areas, progressed in or completed treatment, managed their finances appropriately, and obtained a suitable independent living arrangement.

While on non-residential supervision, clients are required to meet with case management staff to continue addressing criminogenic and non-criminogenic risk areas, participate in treatment and/or support services, retain employment, honor their financial responsibilities and remain drug and alcohol free. Non-residential clients are also subject to random monitoring of their living situations and employment verifications. Depending on supervision and treatment needs, a client may be transferred back to a residential community corrections program for additional services or stabilization. These transfers back to residential programs are not necessarily punitive, but in many cases may help the client continue on a successful path. For this reason, clients may be counted more than once in this data.

Demographics

833 non-residential discharges occurred in FY23 from 24 separate non-residential programs. The demographics of these non-residential clients are similar to those of the residential clients (see Figure 3, page 10). Most non-residential clients during FY23 were male, white, between the ages of 26 and 40 and have a high school diploma or GED. They were typically serving a sentence for assault/menacing or driving offenses (40.6% of the non-residential population) and the majority of the crimes were classified between class four and class six felonies (78.0% of the non-residential population). Figure 32 presents demographic data on gender, age, ethnicity, education level at entry to the program and their current felony crime class.



Figure 32 – Non-Residential Client General Demographics FY22 and FY23

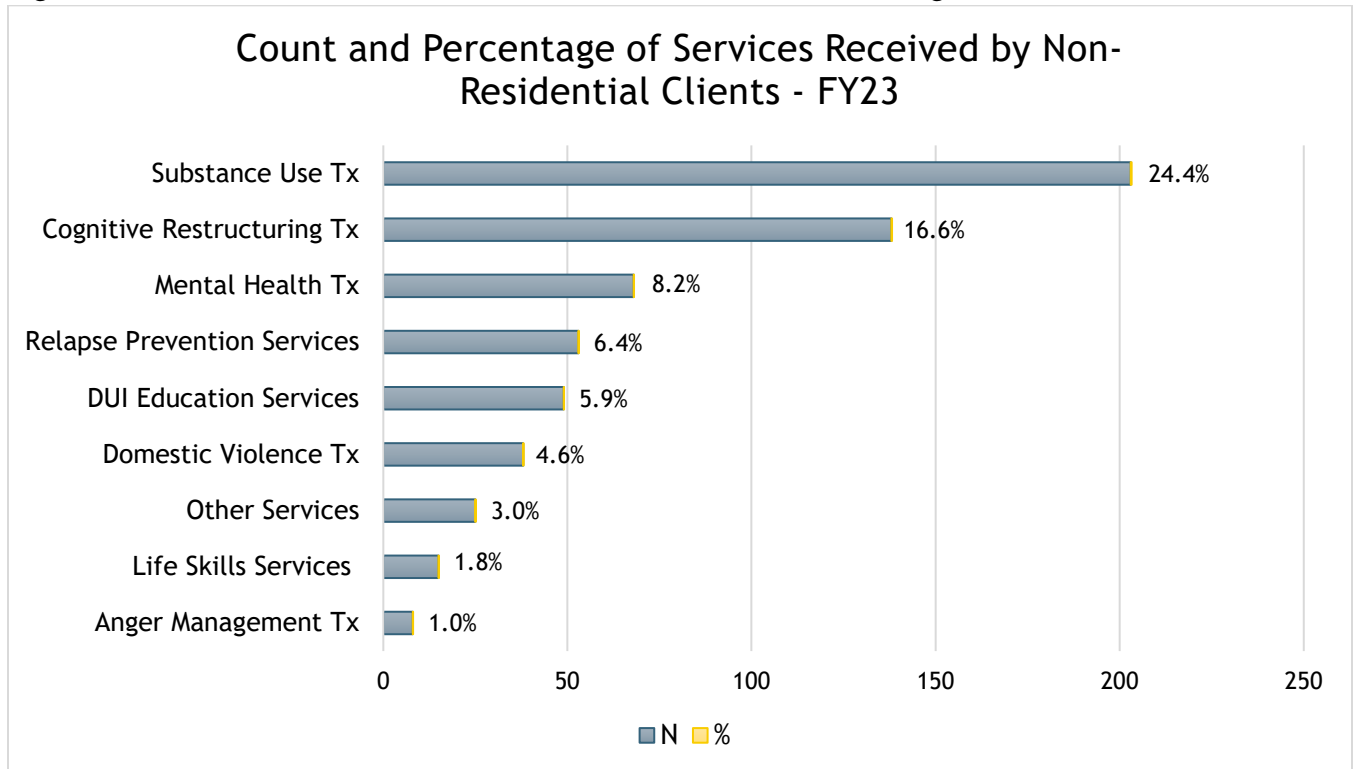
NON-RESIDENTIAL CLIENT DEMOGRAPHICS	FY22	FY23
Gender		
Male	82.0%	82.2%
Female	18.0%	17.5%
Transgender	n/a	0.2%
Age		
18-20	0.1%	0.7%
21-25	8.0%	6.8%
26-30	14.1%	15.8%
31-35	15.1%	16.3%
36-40	18.4%	21.4%
41-45	14.4%	14.6%
46-50	10.0%	9.5%
51+	19.9%	14.8%
Ethnicity		
Caucasian	60.2%	57.9%
African American	7.9%	8.4%
Hispanic	26.3%	31.2%
Asian/Native Hawaiian/Pacific Islander	1.6%	1.0
Native American/Alaskan Native	2.9%	1.2%
Other/Unknown	1.1%	0.4
Education Level at Entry		
8th Grade or Less	1.5%	2.6%
9th through 11th Grade	13.7%	15.4%
High School Diploma or GED	63.1%	53.2%
Vocational/Some College	14.8%	19.3%
Undergraduate Degree or Above	3.8%	2.6%
Unknown	3.1%	6.8%
Current Crime Felony Class		
F1 - F3	7.3%	7.7%
F4 - F6	73.4%	78.0%
DF1 - DF2 (Drug Felony)	4.9%	4.4%
DF3 - DF4 (Drug Felony)	14.4%	8.2%



Non-Residential Community Corrections Services

Clients in non-residential community corrections programs are required to participate, or continue to participate, in a variety of treatment-oriented services. Depending on the client's assessed needs, these services may include employment assistance, life skills training, cognitive restructuring, alcohol and drug treatment, anger management, etc. Non-residential clients are often required to access these services in the community and are financially responsible for them. The continuity of these services (if needed) once a client has progressed to non-residential status is an important aspect of their stabilization out in the community. Figure 33 reports the percentage and number of clients who participated in specific treatment types while in a non-residential program.

Figure 33 – Non-Residential Treatment Services Received During FY23



Non-Residential Risk Reduction

The average LSI score for clients upon entry into non-residential placement during FY23 was 22.5 (as compared to the general residential intake average score of 29.7). Figure 30 illustrates the average LSI scores of clients from their entry into residential programming (29.7) to their discharge from non-residential programming (21.5). The overall LSI reduction was 27.6%. This figure demonstrates a reduction in the risk of client behaviors that could lead them to re-offend. By working through their case plans and attending treatment from the start of their community corrections stay, clients learn skills and strategies that help them be successful upon discharge from community corrections.



Figure 34 LSI Score Reduction from Residential Entry to Non-Residential Discharge FY23

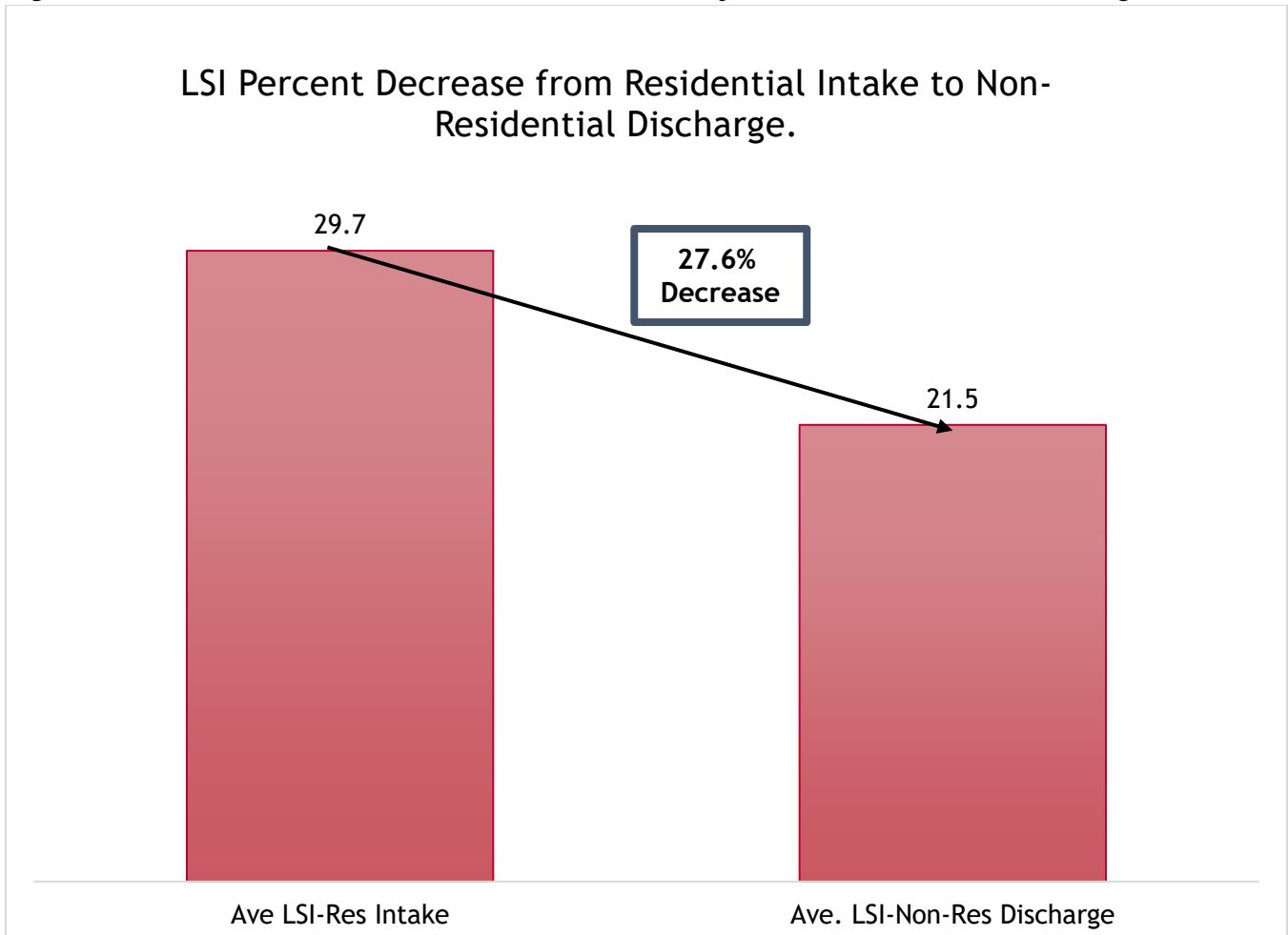
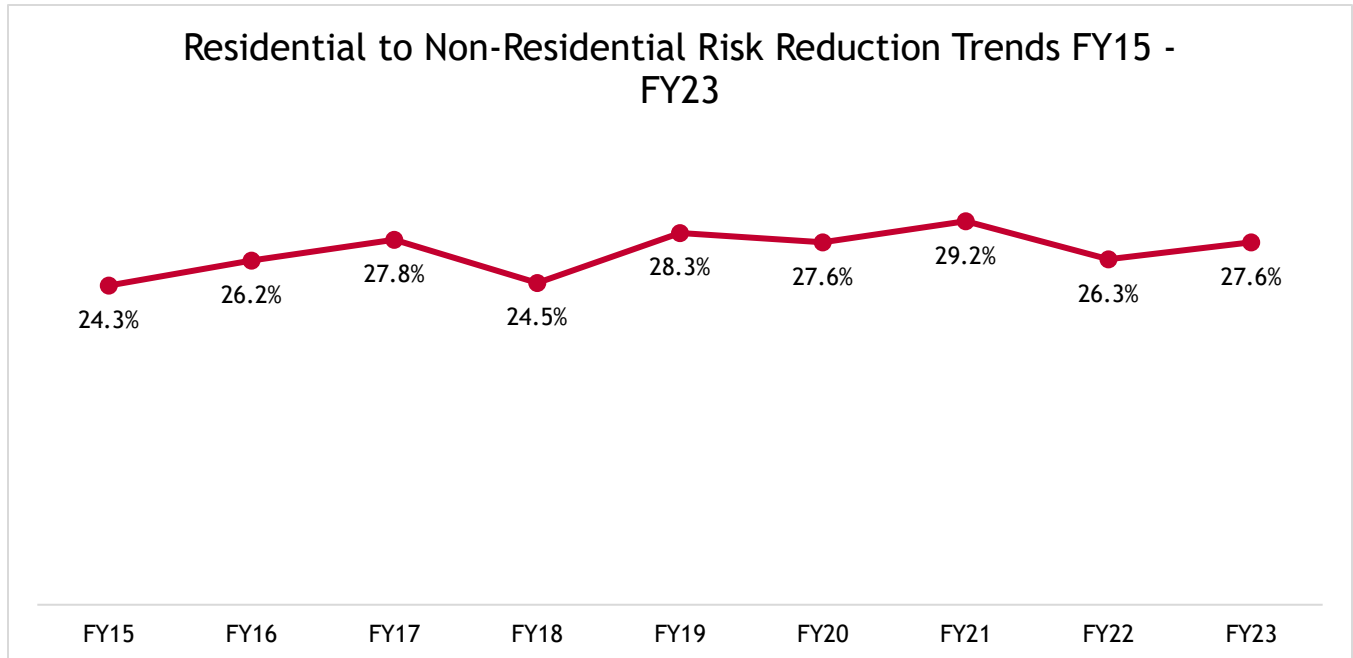


Figure 35 demonstrates the risk reduction trends of community corrections clients from their intake into residential through their completion of non-residential since FY15. Overall, these figures represent an average risk reduction of 26.9% for the last nine years. Through treatment and support, community corrections clients have the ability to reduce their risk factors to re-offend by participating in their assessed case plans in both the residential and non-residential phase of their sentence.

*Figure 35 LSI Score Reduction trends from Residential Entry to Non-Residential Discharge
FY15 - FY23*



Employment

Most clients in community corrections are required to obtain gainful employment prior to being eligible for non-residential status. Of the 687 clients whose employment information was reported, 96.2% of clients were employed full-time and 3.5% were employed part-time when they discharged from their non-residential programs in FY23. During FY23, 87.0% of the 484 clients who successfully terminated from their non-residential stay, were employed full-time or part-time.

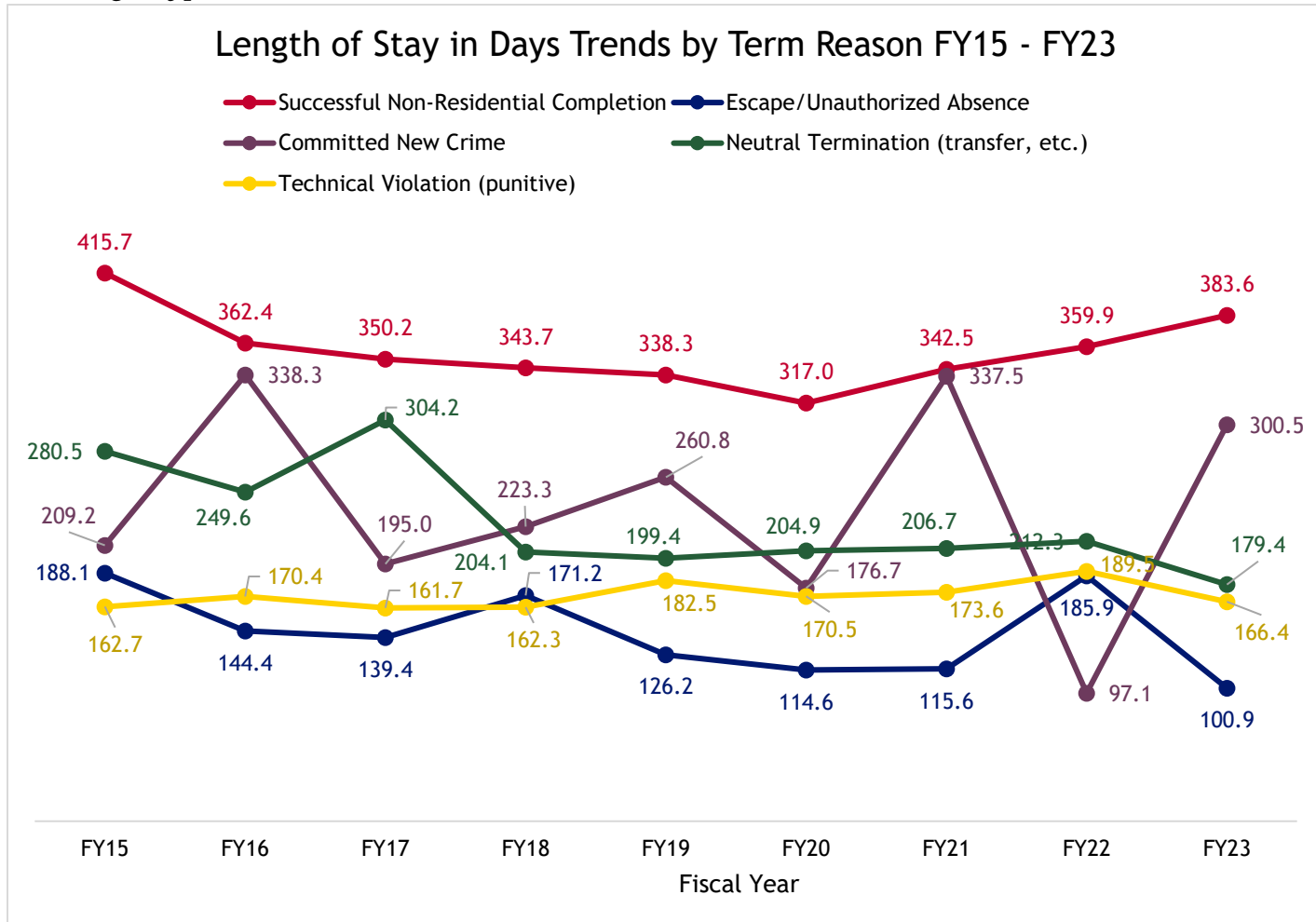
Length of Stay

The average non-residential length of stay for clients in FY23 was 297.1 days. Community corrections clients with longer sentences can spend more time in their non-residential program to fulfill their sentence requirements, as the average residential length of stay is shorter at 168.1 days. Clients length of stay can be impacted by earned time credits (time credits can be earned by following their case plans, facility rules, and maintaining employment and/or training) and also early termination of their sentence as ordered by a judge.

Figure 36 depicts the average length of stay trends of non-residential clients by their discharge reason between FY15 and FY23.



Figure 36 – Average Length of Stay Trends (in Days) For Non-Residential Clients by Discharge Type FY15 – FY23



Non-Residential Discharges

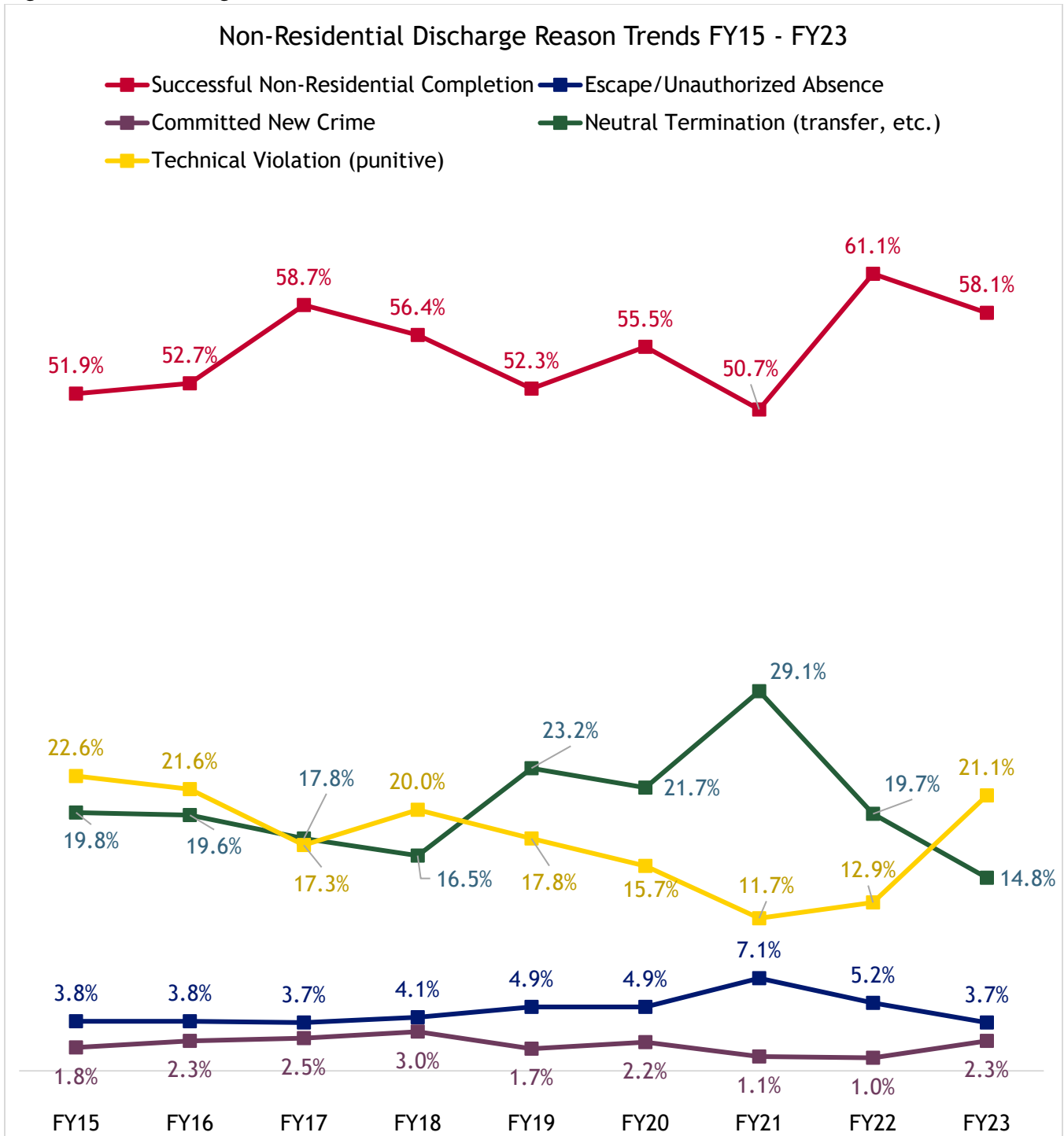
58.1% of clients successfully discharged from non-residential placement in FY23 as compared to 61.1% in FY22. This positive type of discharge generally involves sentence completion or, in some cases, sentence reconsideration.

As clients are still under supervision during their non-residential placement, they are subject to substance use testing and other monitoring by their case managers and program staff. The rate of these monitoring activities is less frequent than when they were in residential. Discharges due to the commission of a new crime, an escape, or a return to residential placement as a punitive action make up 27.1% of negative discharges in FY23.

Two examples of the neutral terminations noted in the below trend graph (Figure 37) are clients that transferred to a different program for treatment or some other reason and clients that returned to residential status for stabilization (non-punitive).



Figure 37 - Discharge Trends for Non-Residential Clients FY15 - FY23



Section IV - Intensive Residential Treatment (IRT)

Intensive Residential Treatment (IRT) is an inpatient correctional treatment program for individuals with serious substance use problems and is structured to accommodate persons with disorders related to prolonged substance use.

IRT programs last 90 days and clients participate in forty hours of therapeutic treatment per week. The purpose of IRT is to provide a brief, intense treatment intervention. Due to the intensive nature of IRT, clients do not leave the facility, seek employment, or address other community needs while in the program. Throughout the IRT program, the clients' focus is primarily on substance use and any mental or physical health concerns that must be addressed in order for them to be successful in future community placements.

There were six IRT programs in the Colorado community corrections system and 862 IRT client discharges in FY23. IRT, like the other service types, primarily served male clients (72.5%), while, two hundred thirty-six female clients (27.4%) served time in the IRT programs during FY23. The overall demographics of IRT clients are similar to that of clients in regular residential community corrections programs (Figure 3, page 10).

Referral Source/Legal Status

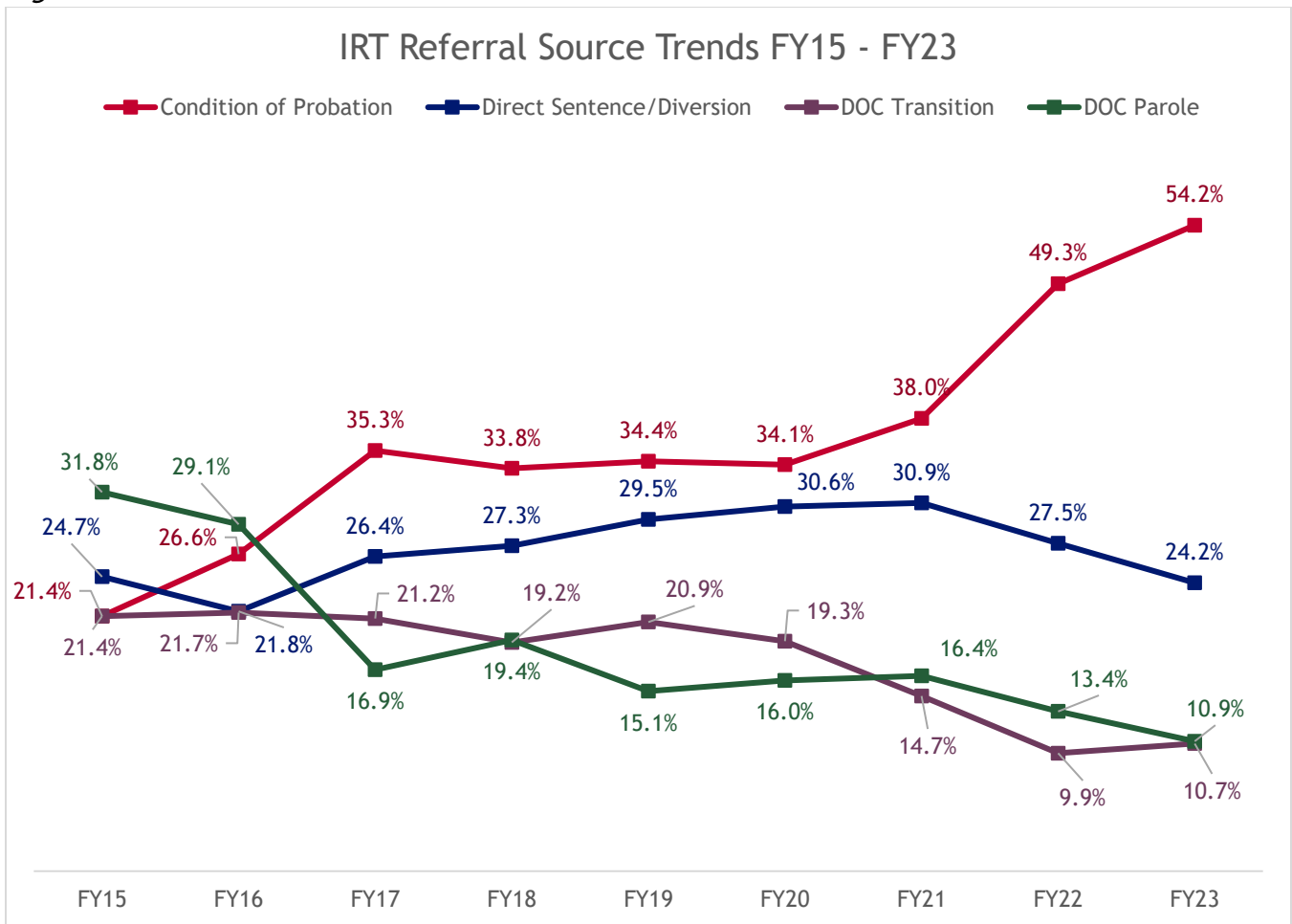
Clients in need of IRT treatment are assessed and referred from several sources. Referrals can come from probation, DOC, or if a residential community corrections program determines, through routine assessments, that a client needs intensive substance use treatment.

After successful completion of IRT treatment, clients may transfer to a residential community corrections program, or return to their original supervisory agency (probation, parole). As part of their discharge, they are also referred to outpatient continuing care.

Condition of Probation clients had the largest rate of referral to IRT treatment during FY23, at 54.2%. These clients are sentenced to complete the IRT program as a condition of their probation and typically do not transfer into a regular residential program once they complete their IRT treatment. Direct Sentence (diversion) clients represented 24.2% of the IRT population during FY23, while DOC clients (transition and parole) represented 21.6% of the IRT client population. Figure 38 displays the IRT referral trend rates from the different referral sources since FY15.



Figure 38 – Referral Source Trends of IRT Clients FY15 - FY23



Previous Substance Use and Treatment

During FY23, 74.1% of IRT clients in community corrections had participated in some form of prior substance use treatment. The levels are intended to address the different severities of substance use disorders. The reported levels of prior treatment are listed below.

- Substance Use Education
- Substance Use Outpatient Treatment
- Substance Use Inpatient Treatment
- Substance Use Inpatient and Outpatient Treatment

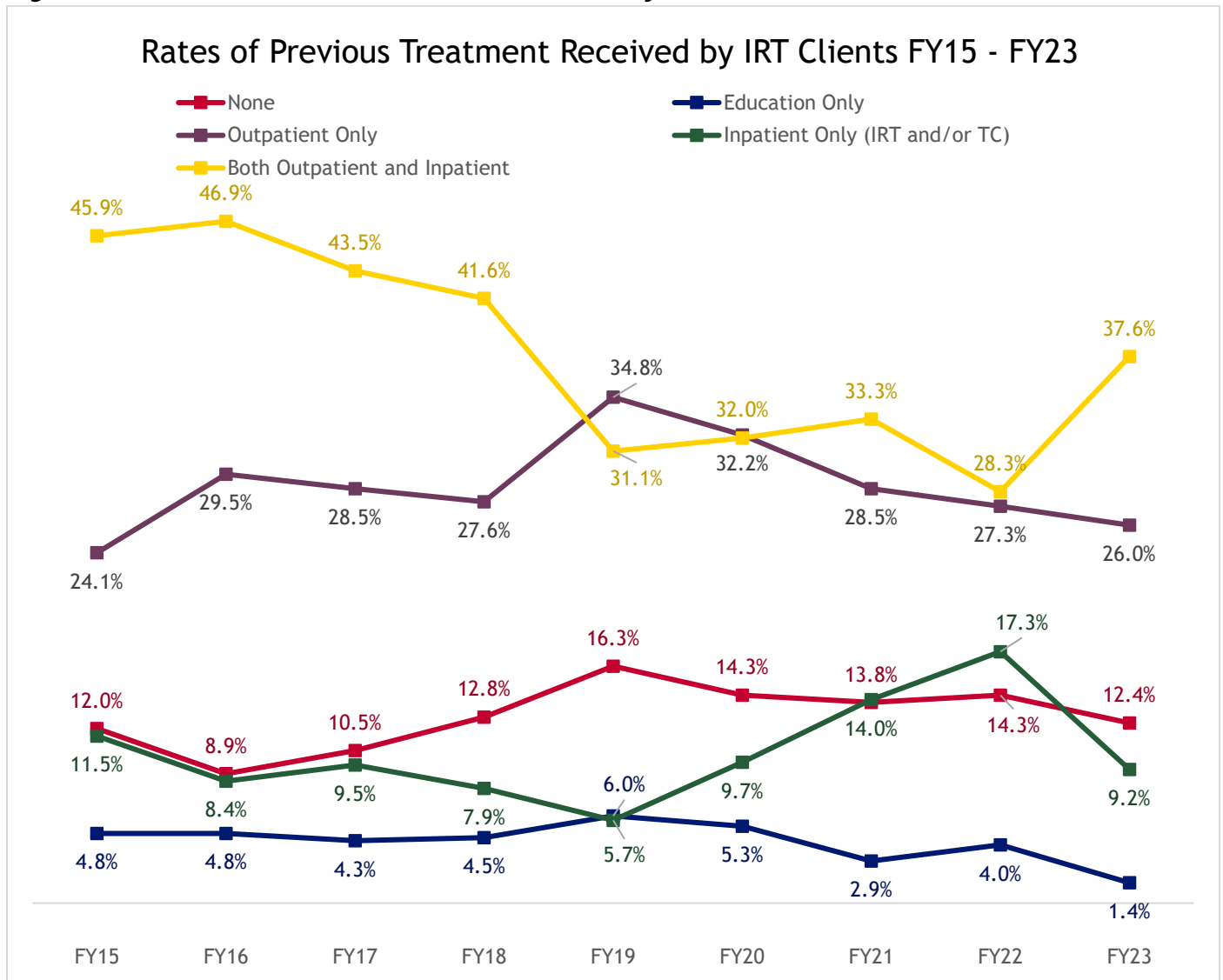
The overall reported age of first substance use in FY23 was approximately 14 years old. Male & female clients and transition & diversion clients also reported an average of 14 years of age for their first substance use.

As described earlier, IRT clients have a serious substance use disorder and need more intensive treatment. Many of them have participated in some form of treatment previous to their referral to



IRT. Figure 39 below demonstrates the rates of prior Substance Use Disorder treatment for the overall IRT population between FY15 and FY23.

Figure 39 – Rates of Previous Treatment Received by IRT Clients FY15 - FY23



Standardized Offender Assessment and Treatment

As described in the Residential section of this report, the SOA-R consists of a battery of instruments that measures a client's risk of recidivism, relapse risk, and other criminogenic needs. The LSI and ASUS-R assessments in the SOA-R battery speak specifically to IRT clients' substance use disorder and can help their case manager prescribe treatments that align with their identified risks and needs. Figure 40 displays the average LSI score for all IRT clients as well as the averages for male and female IRT clients. It also reviews the ASUS (Adult Substance Use Survey) subscales, the possible score ranges, the domains that are measured by each scale and the average scores for IRT clients (overall, male and female). Female IRT clients reported higher perceived consequences with alcohol or drug (AOD) use, higher perceived benefits of AOD use and more emotional disturbance than their male counterparts.

Figure 40 - Average LSI and ASUS-R Assessment Scores of IRT Clients FY23

Instrument	Score Range	Measure	Overall	Male	Female
LSI Total Score	0-54	Risk of Recidivism/ Criminogenic Needs	34.7	34.5	34.9
ASUS-R - AOD Involvement 1	0-40	Lifetime Involvement with Drugs/Alcohol	16.7	16.3	17.9
ASUS-R - AOD Disruption	0-80	Disruptive Consequences of Drugs/Alcohol	31.1	29.9	35.1
ASUS-R - AOD 6-Month	0-150	6-month Involvement/Disruption	21.1	19.8	25.3
ASUS-R - AOD Benefits	0-30	Perceived Benefits of Drugs/Alcohol Use	15.2	14.4	17.5
ASUS-R - AOD Social Non-Conforming	0-33	Antisocial/Rebellious Thoughts, Attitudes, and Beliefs	13.1	13.3	12.5
ASUS-R - AOD Legal Non-Conforming	0-42	Lifetime Antisocial/Rebellious Behaviors	19.6	19.8	18.9
ASUS-R - AOD Legal Non-Conforming 6 Months	0-33	6 Month Antisocial/Rebellious Behaviors	7.7	7.1	9.7
ASUS-R - AOD Emotional/Mood	0-30	Emotional Disruption/ Mood Problems	12.1	11.4	14.1
ASUS-R - Global AOD Psychosocial 1	0-180	Overall Measure of Relapse Risk	67.2	63.7	77.9



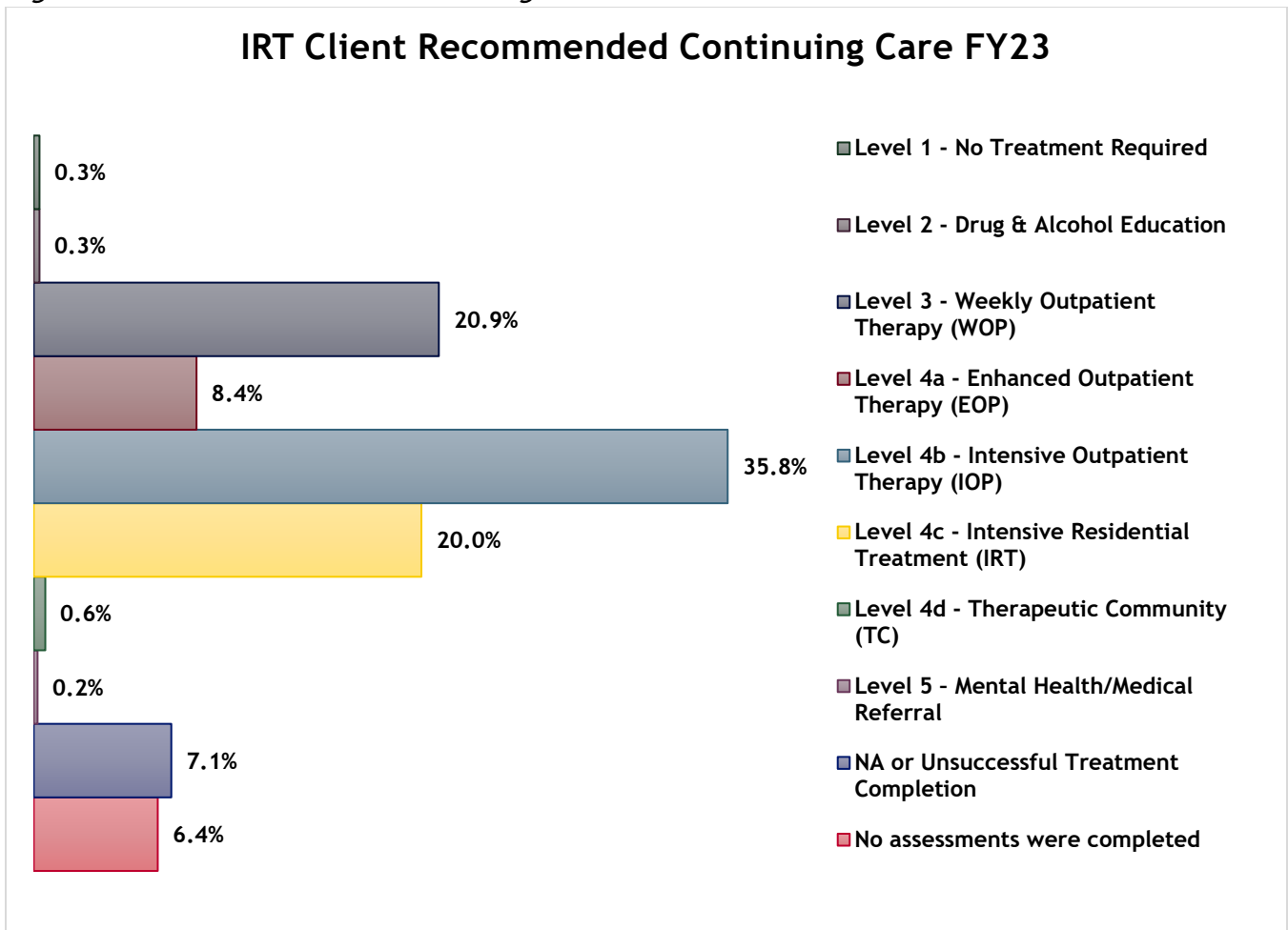
ASUS-R - Global AOD Psychosocial 2	0-192	Overall Measure of Relapse Risk	70.5	66.0	86.5
ASUS-R - Defensive	0-21	Defensiveness/ Guardedness	9.4	9.5	9.1
ASUS-R - Motivation	0-21	Motivation for Change	15.1	14.9	15.8
ASUS-R - Strengths	0-27	Perceived Strengths	15.0	15.0	15.0
ASUS-R - Rater	0-18	Rater's Evaluation of Offender's Involvement and Disruption	15.4	14.5	17.9
ASUS-R - AOD Involvement 2	0-40	Lifetime Involvement with Drugs/Alcohol	16.4	16.0	17.6
ASUS-R - AOD Disruption 2	0-80	Disruptive Consequences of Drugs/Alcohol	30.6	29.4	34.9
ASUS-R - Behavioral Disruption	0-24	AOD Disruption of Behaviors	8.5	8.0	9.8
ASUS-R - Psycho-Physical Disruption	0-40	AOD Disruption of Psychological and Physical Issues	15.3	14.5	17.7
ASUS-R - Social Role	0-16	AOD Disruption of Offenders Social Role & Environment	7.8	7.4	8.9

Continuing Care

Upon successful completion of an IRT program, clients are reassessed for their substance use treatment needs and a recommendation for their continuing care is made. Continuing care is substance use treatment the client will continue to attend once they are discharge from IRT. It is designed to support the client's recovery as they move to a less restrictive form of supervision. Most recommendations for continuing care for the 862 IRT clients who discharged in FY23 are in the form of intensive outpatient therapy (IOP) or weekly outpatient therapy (WOP) as shown below in Figure 41.



Figure 41 - Recommended Continuing Care for IRT Clients FY23



Discharges

Figure 42 displays the discharge reason trends for IRT clients from FY15 - FY23. Overall, 66.2% of IRT clients were reported as completing the program successfully and 10.9% of clients were discharged due to unauthorized absence during FY23.

Male and female IRT clients had similar successful termination rates during FY 23, 66.4% and 66.1% respectively. Male IRT clients had a lower rate of unauthorized absence (7.8%) terminations as compared to females, whose unauthorized absence termination rate during FY23 was 18.6%



Figure 42 Discharge Reason Trends for IRT Clients FY15 - FY23

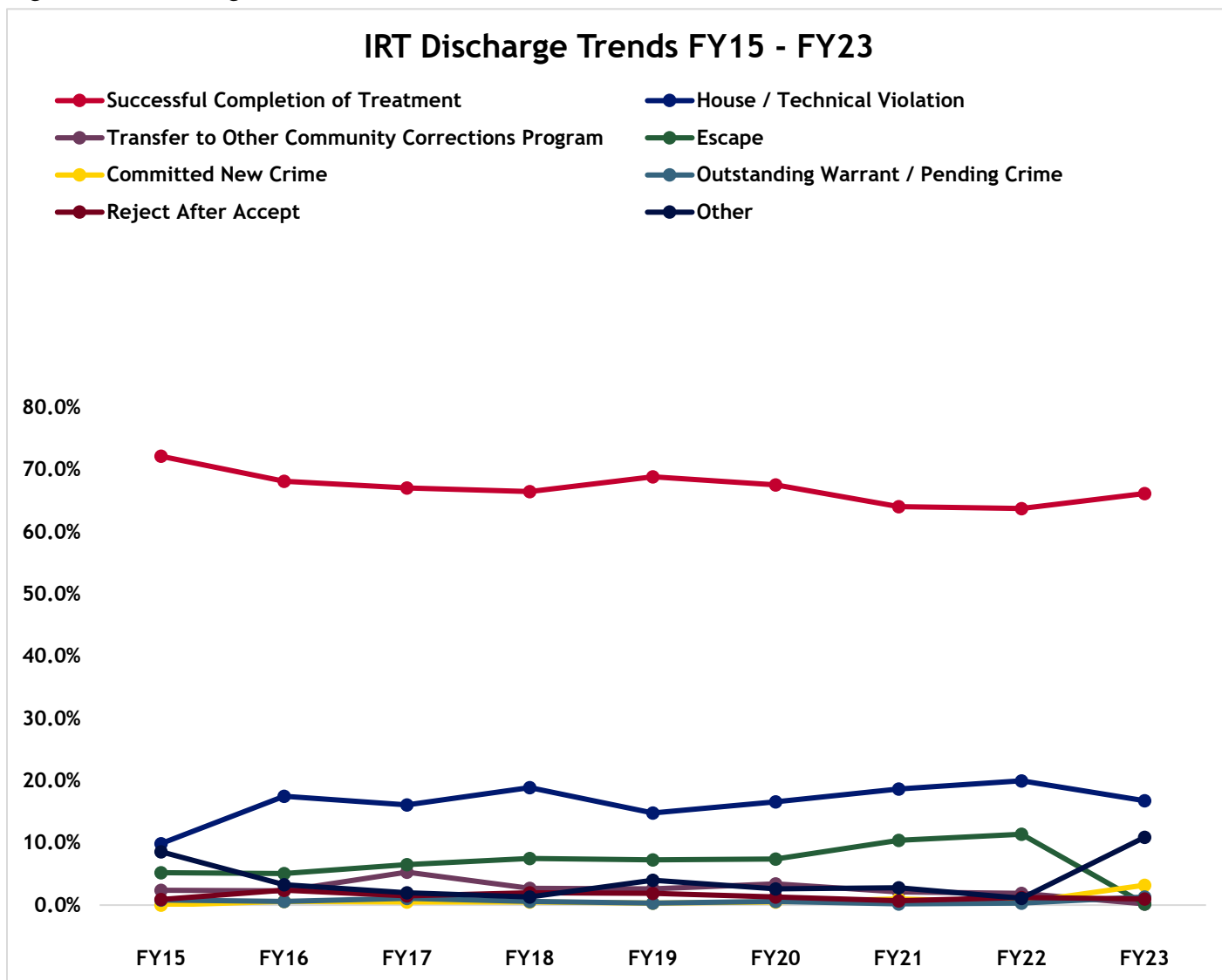
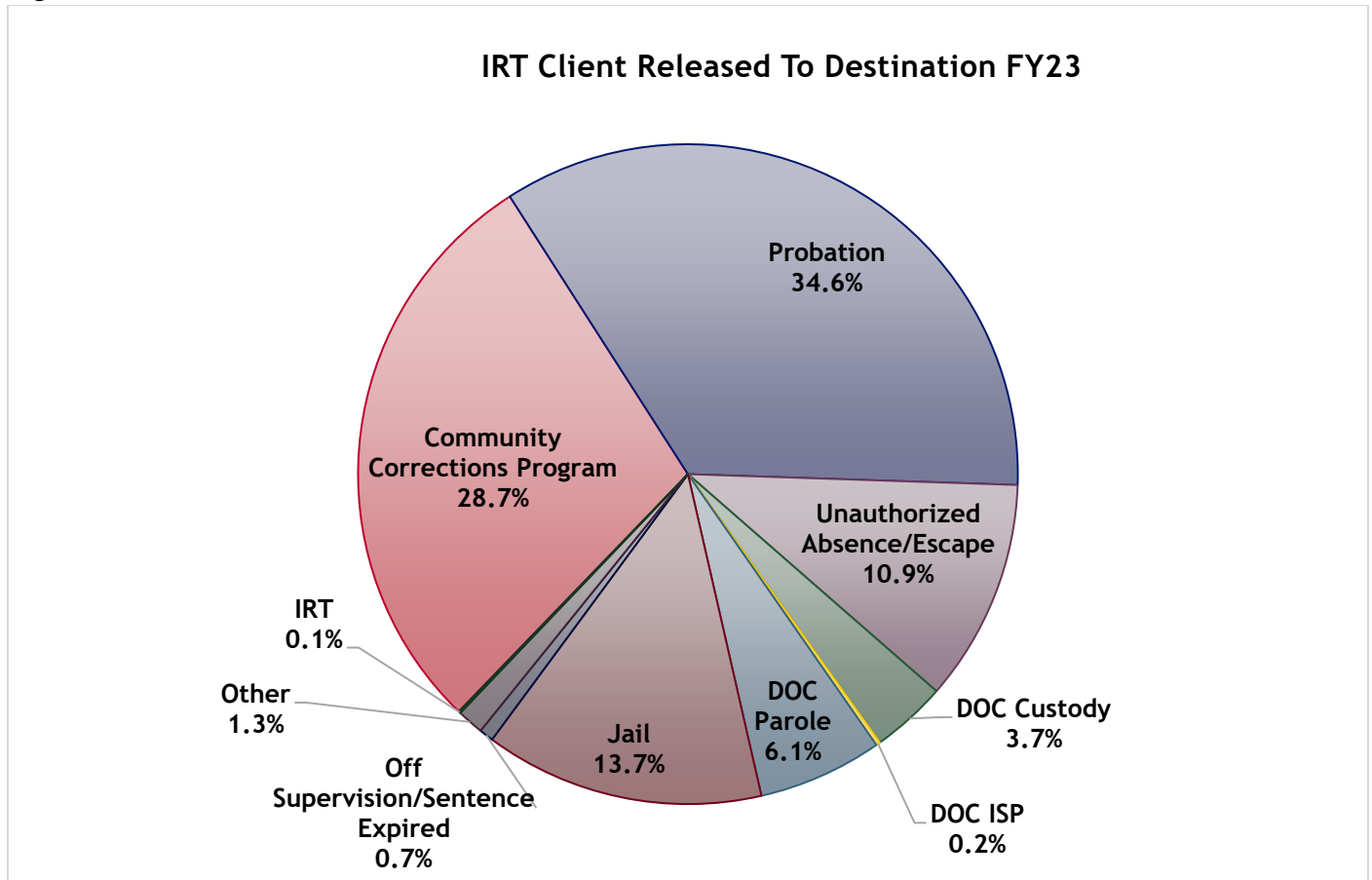


Figure 43 illustrates that in FY23 28.7% of all IRT clients were released back to residential community corrections programs, while 6.1% returned successfully to parole and 34.6% discharged successfully to probation.

Figure 43 – IRT Client Released To Destination FY23



Section V - Residential Dual Diagnosis Treatment (RDDT)

The population of clients with co-occurring substance use and mental health disorders has been increasing in the Colorado criminal justice system. These persons require extensive psychiatric and mental health services as well as substance use treatment in order to manage their risk to public safety. Residential Dual Diagnosis Treatment (RDDT) is a program designed for these individuals in order to address co-occurring substance use and mental health disorders while building positive support systems and increasing their overall ability to function in the community.

RDDT programs are professionally supervised therapeutic environments geared toward drug and alcohol abstinence, improved mental health and desistance from continued criminal conduct. Generally, the treatment program is aimed at clients with both significant substance use disorder and mental illness, including those whose previous treatment failures necessitate more intensive measures.

During FY23, 265 clients were discharged from eight RDDT programs in the Colorado community corrections system. Compared to the regular residential population, there is a higher percentage of female clients in the RDDT programs (33.2% in RDDT as compared to 18.9% in regular residential). The general demographics for the RDDT population in FY22 & FY23 are shown in Figure 44.

Figure 44 - General Demographics of RDDT Clients FY22 & FY23

RDDT Client Demographics FY20 & FY21	FY22	FY23
Gender		
Male	74.5%	66.8%
Female	25.5%	33.2%
Age		
18-20	1.0%	0.5%
21-25	13.3%	11.5%
26-30	20.0%	16.5%
31-35	17.4%	22.5%
36-40	17.9%	17.9%
41-45	15.4%	12.4%
46-50	5.6%	9.2%
51 +	9.2%	9.6%
Ethnicity		
Caucasian	60.5%	30.0%
African American	10.7%	8.7%
Hispanic	25.5%	28.3%
Asian American / Pacific Islander	0.8%	1.1%
Native American / Alaskan Native	1.2%	1.1%



Other/Unknown	1.2%	0.8%
Education Level at Entry		
8th Grade or Less	3.8%	3.0%
9th through 11th grade	21.9%	25.7%
High School Diploma or GED	51.9%	47.9%
Vocational/Some College	11.8%	11.3%
Undergraduate Degree or Higher	2.5%	2.6%
Unknown	8.0%	9.4%
Current Crime Felony Class		
F1 - F3	6.7%	4.5%
F4 - F6	81.2%	86.8%
DF1 - DF2 (Drug Felony)	1.7%	1.5%
DF3 - DF4 (Drug Felony)	10.5%	6.8%

Assessments

Figure 45 provides the average LSI and SSI scores for RDDT clients in FY23. In comparison to residential clients, RDDT clients have higher average scores on the initial LSI, the updated LSI, and the SSI-R.

Figure 45 – Average Assessment Scores for RDDT Clients FY23

FY23 Assessment Scores	Initial LSI	6 Month LSI Update	SSI Score
Overall	35.04	34.79	7.64
Male	35.31	35.11	7.10
Female	34.52	34.18	8.70

Despite having higher overall risk scores compared to other residential community corrections clients, RDDT clients were able to slightly lower their LSI scores at the time of their last updated LSI while participating in dual-diagnosis treatment. This reduction, while at a slower pace than regular residential clients, indicates they are able to address their risks and needs even if they have struggled in the past.

Addressing co-occurring substance use and mental health disorders is the primary purpose of RDDT programs and clients who are placed in these programs often have long histories of disruption because of these disorders. One of the subscales of the LSI measures emotional/personal elements including interference and mental health treatment. Nearly twenty-eight percent (27.5%) of RDDT clients assessed as experiencing severe interference in this realm. In this same subscale, seventy-seven percent (77.4%) of RDDT clients had assessed as having mental health treatment in the past, with 51.5% currently receiving mental health treatment upon entry into the RDDT program.



Substance Use Treatment

As noted in the introduction of this section, many RDDT clients have previously participated in substance use treatment. Figure 46 shows the types of substance use treatment received by RDDT clients prior to their intake.

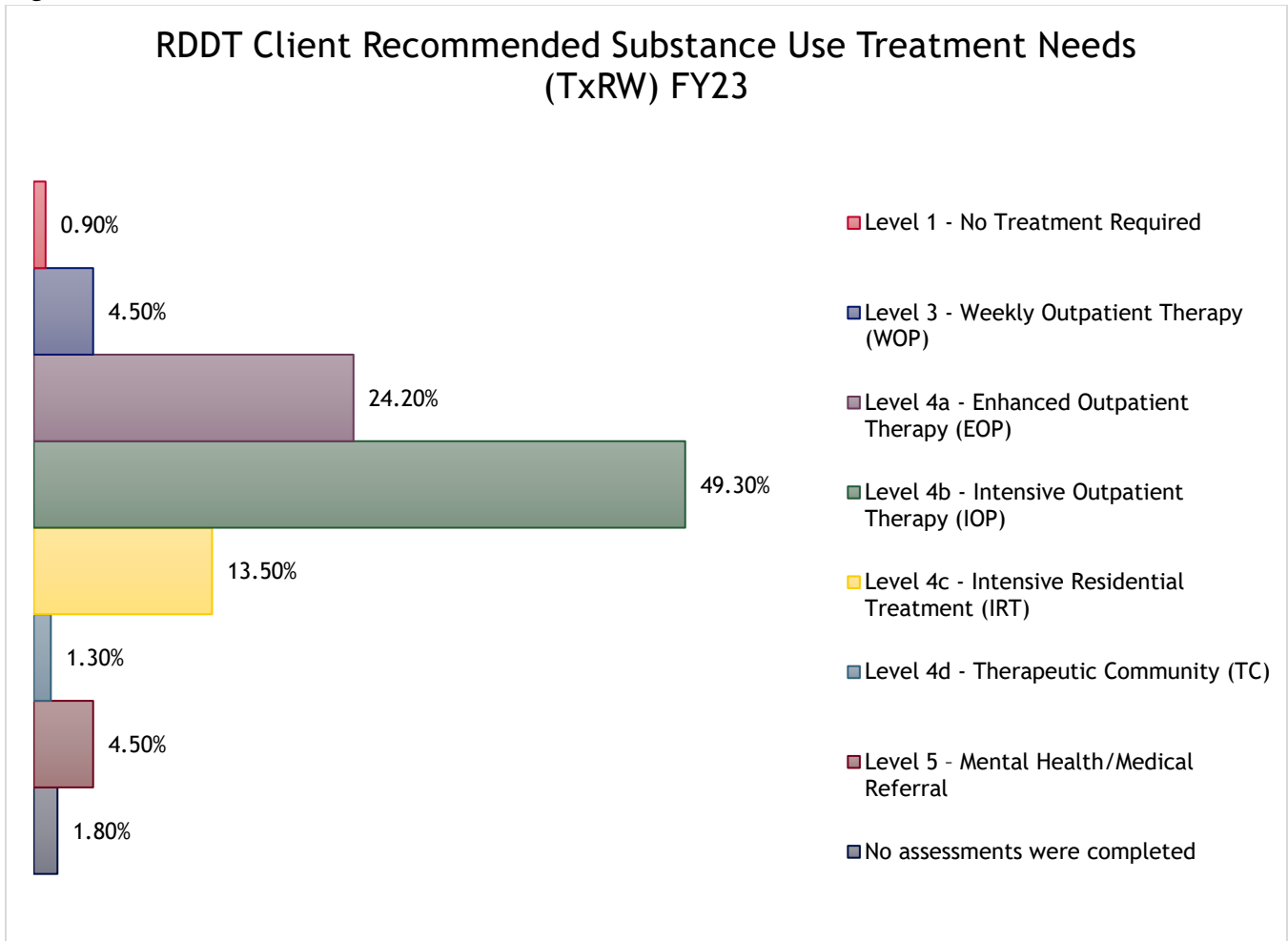
Figure 46 - RDDT Clients' previous Substance Use Treatment FY23

RDDT Clients' Previous Substance Use Treatment FY23	Population %
Education Only	3.0%
Outpatient Only	22.3%
Inpatient Only (IRT and/or TC)	4.5%
Both Outpatient and Inpatient	38.6%
None	18.9%
Unknown/Data Unavailable	12.5%

When compared to residential clients, a higher percentage of RDDT clients were assessed as needing enhanced substance use treatment services (level 4a and above) in FY23. Seventy-four percent (74.1%) of RDDT clients received their recommended treatment level for substance abuse. Additionally, the proportion of individuals who needed a mental health or medical referral prior to being able to be assessed for need of substance use treatment services is higher than the residential population (4.5% in RDDT compared to 1.4% in regular residential). Figure 47 reports the percentage of RDDT clients assessed needing each level of substance abuse treatment during FY23.



Figure 47 – Recommended Substance Use Treatment for RDDT Clients FY23

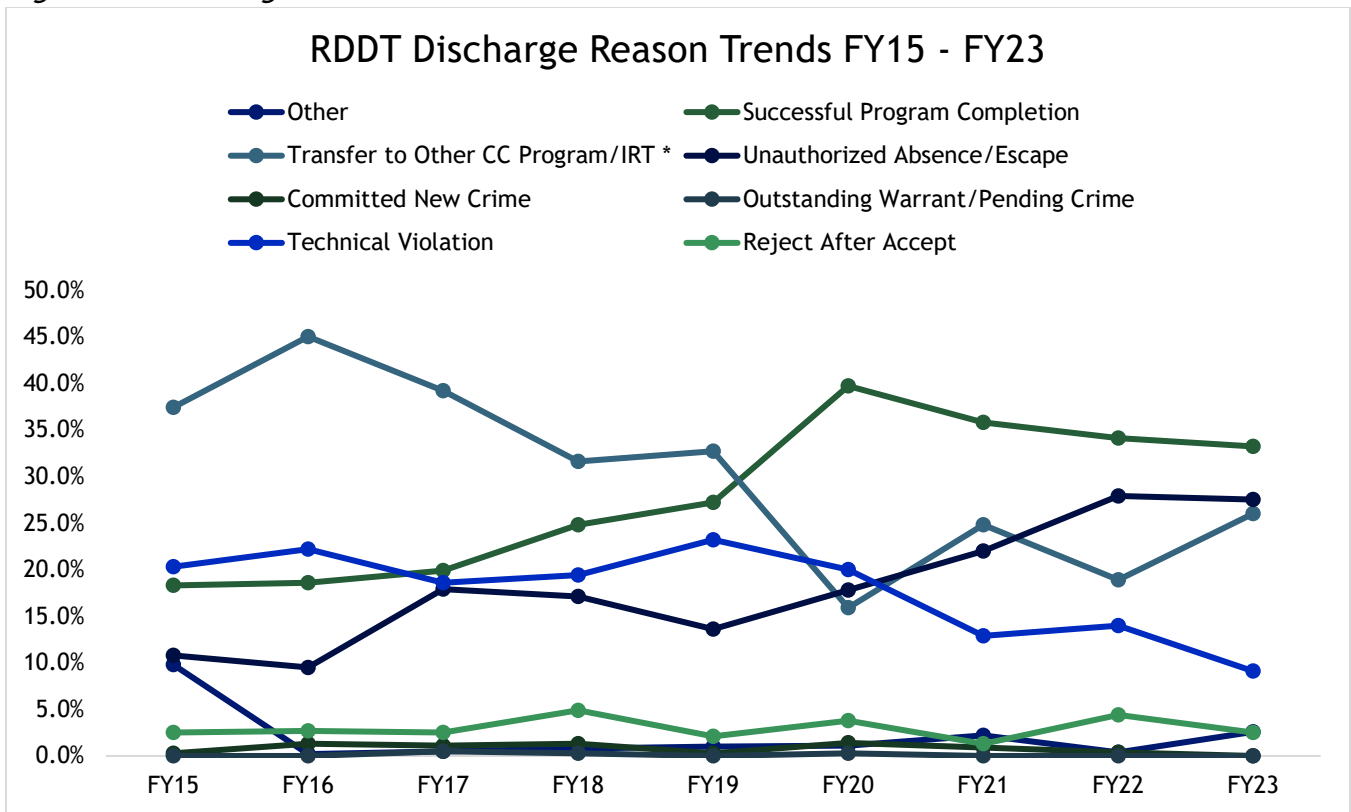


Discharges

Upon completion of their RDDT treatment, many clients are released to residential community corrections programs to complete their sentences and participate in additional treatment if necessary. Of the 115 RDDT clients who were released to another community corrections program, 58.3% completed their RDDT treatment successfully. 41.7% of those clients were noted as transfers rather than successful. Transfers are not considered a negative termination, only that the client was stable enough to move on to less specialized treatment. If needed, there are rare cases where an RDDT client will be transferred to IRT where they can continue to address their substance use treatment needs. Technical violations represented 9.1% of discharges from RDDT programs in FY 23. Figure 48 lists the discharge rate trends for RDDT clients between FY15 and FY23.



Figure 48 Discharge Reason Trends for RDDT Clients FY15 - FY23



*The discharge reason, Transfer to Other CC Program/IRT also includes the Continuous Stay discharge data from FY15 through FY22. It is a discharge reason that is no longer collected by CCIB as it is incorporated in the transfer data.

Length of Stay at Discharge

Where IRT treatment has a prescribed length of ninety days, RDDT treatment does not have a prescribed time limit. The length of time spent in RDDT is determined by the client's assessed risks and needs and their participation in their case plan and treatment. The average length of stay for all RDDT clients was 85.4 days in FY23. Figure 49 outlines the variations in length of stay in days by a client's discharge reason.



Figure 49 – Average Length of Stay in Days for RDDT Clients by Discharge Reason FY23

Discharge Reason	# of Days
Successful Residential Completion	138.5
House/Technical Violation	57.9
Transfer to Other Community Corrections Program	82.5
Other	107.1
Reject After Accept	7.8
Escape	35.3

Section V - Finances in Community Corrections

While in residential and non-residential community corrections facilities during FY23, clients are expected to work full-time, pay state and federal taxes and, if applicable, pay court-ordered child support, restitution, and court costs.

As prescribed by their individual treatment plans, clients are required to attend treatment addressing their risks and needs. Many programs provide in-house treatment services at a no cost or low-cost alternative to clients and there are funds administered by the OCC that help pay for client treatment costs. If they do not qualify for these funds or if they have exhausted their share of these funds, clients pay for their own treatment costs at all levels of placement.

Clients in some specialized programs do not work while participating in intensive treatment, so no financial information for those clients is included in this section. In addition, clients in a different specialized program are not able to work when they first arrive to the program and may not be eligible to work for up to nine months. Since many of these clients do end up working, they were included in this sample.

The figures reported here are estimates based on reported figures in CCIB for clients discharged in FY23. The DCJ removes any significant outliers from each category to account for errors and to avoid skewing or otherwise misrepresenting the data. Even still, the data provided here should be considered an estimate of the community corrections client population for each fiscal year and should not be understood to be an exact figure.

Income

In FY23, the overall median monthly income for community corrections clients was \$1424.45. To calculate this figure, the client's total reported income is divided by their length of stay (months). As it can take some time for clients to secure employment and adjust to community corrections life, stays less than three months are not included in the data. High income outliers (total stay incomes greater than \$46,057.24) are also omitted to demonstrate what an average client earns during their community corrections stay. Figure 50 presents the mean and median monthly income for diversion, transition, and non-residential clients in FY23.

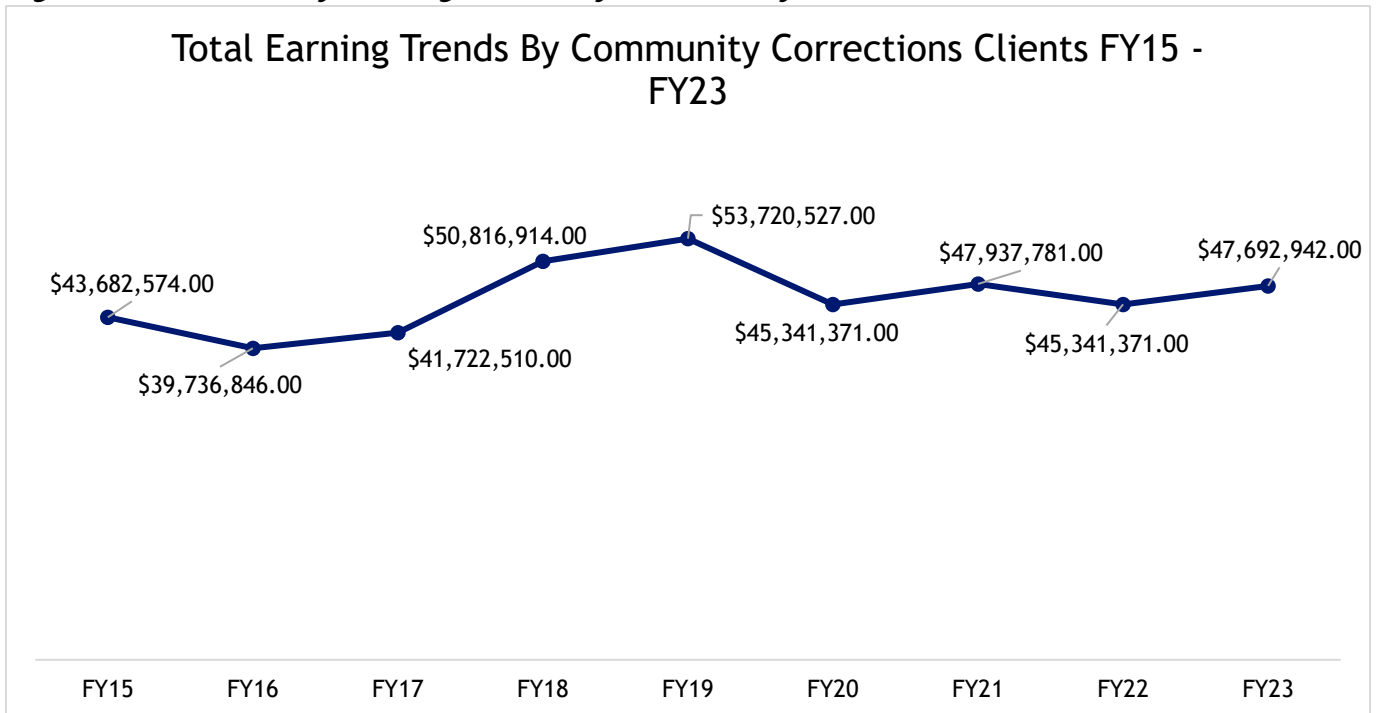


Figure 50 – Monthly Income for Diversion, Transition & Non-Residential Clients in FY23

Monthly Income	Diversion/ Condition of Probation	Transition/Parole	Non-Residential
Mean	\$1368.47	\$1499.76	\$1594.46
Median	\$1245.58	\$1414.43	\$1403.73
N	1464	1088	530

The average monthly income for men in community corrections was \$1,489.62, while the average monthly income for women was \$1,133.59. Transgender clients earned an average of \$1,103.87 monthly. Overall, community corrections clients earned a total of \$47,692,942 during FY23. The average yearly total of client earnings in community corrections from FY15 to FY23 was \$46,221,426.22. Figure 51 displays the total amount earned by clients in fiscal years FY15 through FY23.

Figure 51 – Total Yearly earnings trends by Community Corrections Clients FY15 – FY23



Other Financial Responsibilities

Once clients in community corrections have obtained employment, they are required to develop a budget as part of their case planning activities with their case manager. This budgeting exercise



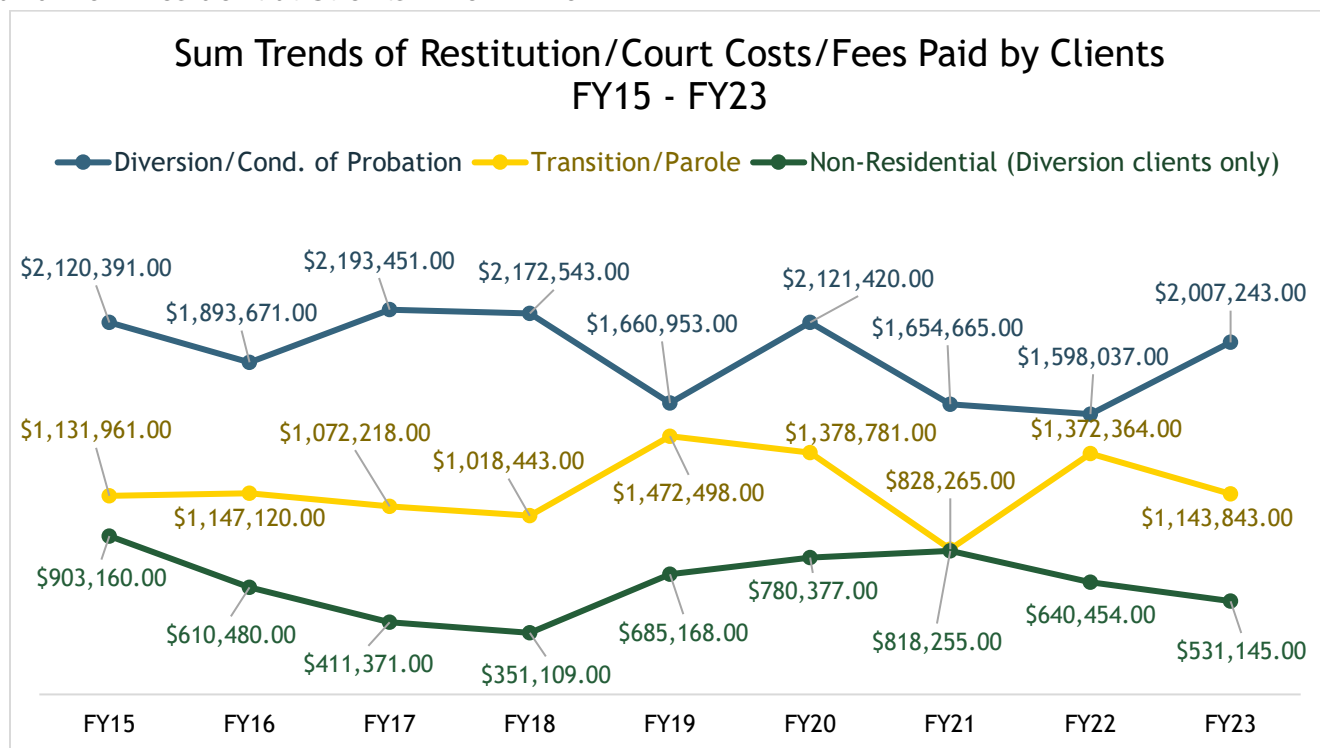
helps clients learn how to manage their money, requires them to establish a savings account and pay for their restitution, court-ordered childcare and, in some cases, their treatment costs. On average, clients that successfully discharged from community corrections during FY23, had \$2,276 in their savings account.

Employed clients must also pay state and federal taxes. Tax summary information may be obtained by submitting a request to the OCC.

Restitution and Other Court Costs

Many clients in community corrections owe restitution and other court costs associated with their criminal cases. Clients paying restitution do not pay only on their current case, but on the total outstanding restitution and court costs for all of their cases. During FY23, the vast majority of community corrections clients made restitution payments while in a community corrections program, totaling \$3,151,086. Figure 52 displays the total restitution paid by community corrections clients from FY15 through FY23.

Figure 52 – Sum Trends of Restitution and Other Court Costs Paid by Diversion, Transition and Non-Residential Clients FY15 - FY23



Court-Ordered Child Support

In addition to various treatment and living costs, community corrections clients are responsible for fulfilling court-ordered child support obligations. Clients paid a total of \$629,356.00 toward their child support obligations in FY23.



Treatment Costs

As described previously in this report, many clients pay for all or part their own treatment costs. Clients paid a total of \$222,339.00 toward their own treatment costs in FY23.

Fees Owed to Program at Termination

Some programs provide financial assistance to clients in the form of treatment fees, medical costs, transportation and other costs. In some cases, clients are expected to reimburse the program for some of these costs once they obtain employment. In FY23, there were 4960 clients who received financial assistance from programs while they were in community corrections. These clients discharged from community corrections owing, on average, \$55.03 each, totaling \$272,962.00.

Section VI - Program Efficacy, Core Security and Technical Assistance

The DCJ has a statutory responsibility to audit and evaluate all community corrections programs. Residential, Non-residential, Intensive Residential Treatment (IRT), Sex Offender and Residential Dual Diagnosis programs funded by the DCJ are subject to audits. Audit and evaluation teams primarily consist of the DCJ OCC staff. Members of the local community corrections board or board staff members, representatives of the Department of Corrections, and local probation officers are also invited to learn, assist, and understand how best to support the program in their goals following a completed audit or evaluation.

Program Assessment for Correctional Excellence (PACE) Evaluations

The Program Assessment for Correctional Excellence (PACE) evaluation shares similarities with the Core Security Audit process. The evaluation focuses on the Behavior Change section of the Colorado Community Corrections Standards (C.C.C.S.), and as such, measures fidelity to various Evidence-Based Practices (EBPs) that the Standards set forth.

Within the last half of FY23 and the first half of FY24 the PACE team conducted a total of eight audits throughout the state of Colorado. During baseline, the reports at that time were geared towards educating the field on what the PACE is assessing. The OCC made changes from an educational type of report to one that is more descriptive and informational for each individual program. The PACE has also expanded to include Spanish speaking recordings, observations, and client surveys. This calendar year (2023) was also the first time that the PACE team audited dosage in regard to C.C.C.S CD-040: Dosage of Risk Reduction Activities.

Core Security Program Audits & Specialized Quality Assurance Reviews

The Colorado Department of Public Safety's Division of Criminal Justice/Office of Community Corrections (DCJ/OCC) is tasked with ensuring both the safety of the local communities where they operate, as well as the individuals participating in the programs. Safety is an essential component to



an individual's ability to grow and progress. The DCJ/OCC have identified standards related to core security functions and an audit of those specific standards was developed. This audit is referred to as the Core Security audit.

Specialized treatment refers to contracts between the state and the programs funded to provide specialized services such as Intensive Residential Treatment (IRT), Residential Dual Diagnosis Treatment (RDDT) and Sex Offender Supervision and Treatment in Community Corrections (SOSTCC). The specialized quality assurance team measures compliance and quality of practices as they relate to the Scopes of Work (SOW) for each specialized treatment service. Specialized audits resumed during calendar year 2023. One (1) Residential Dual Diagnosis Treatment program was audited during FY23.

Technical Assistance, Training & Implementation Support

The Division of Criminal Justice is considered a resource by the local community corrections boards and programs. The DCJ has a professional staff with a wide-ranging knowledge of the criminal justice system, including victim's issues, sex offender management, domestic violence management and the availability of grants. The DCJ OCC staff offer ongoing training, coaching, structured feedback, and other technical assistance to support program improvements and sustainability of practice. During FY23, OCC staff facilitated or directly provided over 50 trainings for community corrections staff around the state.

The OCC Implementation and Technical Assistance Specialist worked with programs to support them in developing their IMPACT meeting skills and documentation. This includes training, monthly Communities of Practice, individual coaching sessions and developing internal coaches at the programs. Other facilities received training in the use of Motivational Interviewing skills with staff and improving the onboarding process and overall facility culture. This includes monthly strategic planning and support meetings with the implementation team and ongoing virtual Communities of Practice with staff to develop their Motivational Interviewing skills, Case Planning skills, and Behavioral Intervention skills.

Updates to the DCJ website allow stakeholders to directly request training, technical assistance and support from our teams. Online courses are also available on-demand from our website, as well as ability to register for upcoming in-person classes ([OCC Training Website](#)). DCJ OCC staff have worked diligently to make training available to our stakeholders statewide.

The DCJ OCC works collaboratively with program staff, providers and community corrections boards throughout the year to advance the field in its work to provide better care, treatment and outcomes, both short-term and long-term, for the clients in our system.



Section VII - Noteworthy Accomplishments

Performance-Based Contracting (PBC)

PBC began in FY23 with per diem rates being increased for programs meeting the defined metrics for risk-informed outcomes. Programs that met the targets for successful program completion and recidivism received additional funding. For the purposes of PBC, recidivism was defined as any new felony conviction from intake into the program through 2 years after discharge.

Community Corrections Information and Billing System (CCIB)

In FY20, OCC and the Governor's Office of Information Technology (OIT) identified a vendor to design and build CCIB 2.0. In early FY23 the new CCIB system was successfully launched to the field. The OCC team provided multiple virtual training sessions to program and board staff. Additionally, the team provided scheduled virtual office hours where users could log in and ask questions. Fourteen programs requested in-person/virtual training for their staff for the new CCIB and technical assistance appointments were available upon request for specific issues. The new CCIB implementation was a positive experience for most users and the system will be able to provide better data and new functionality moving forward.

Section VIII – Summary

Community corrections in Colorado serves as a quality-sentencing alternative to prison for select clients. Residential community corrections programs monitor clients while delivering structured criminal justice services. These services help to modify behavior, deter criminal activity, and prepare clients for successful reintegration into the community.

The Office of Community Corrections (OCC) is part of the Division of Criminal Justice (DCJ) in the Colorado Department of Public Safety. DCJ/OCC allocates money for community corrections to the state's local community corrections boards in 22 Judicial Districts.

DCJ/OCC is also responsible for establishing state standards for community corrections programs, which may be operated by local government or non-governmental entities. Individual community corrections programs participate in program efficacy reviews (PACE), Core Security audits and Statement of Work quality assurance reviews to determine adherence to the Standards and state contracts. The review/audit schedules are determined by statute and in some cases by the performance of the programs. Technical assistance and training are also statutorily provided or as requested by community corrections boards, programs and referring agencies.

Colorado community corrections programs have had to be progressive in finding ways to meet the growing needs of their clients as the last several years have seen an increase in the risk and needs levels of all community corrections clients. The field and DCJ/OCC continue to partner together to work progressively towards the implementation of evidence-based practices within the programs.



As FY23 brought our system one step closer to full implementation of PBC, it is the hope that Colorado community corrections can improve the success levels of all current clients and continue to provide quality programming for future clients.



Photo by [mana5280](#) on [Unsplash](#)