Executive Summary

Texas Government Code 501.103 requires the Texas Department of Criminal Justice (TDCJ) Reentry and Integration Division and the Parole Division to jointly submit an annual report detailing certain program referrals for offenders under supervision. The report is to reflect referrals for employment, housing, medical care, treatment for substance abuse and/or mental illness, education, veteran services, and basic needs as well as other types of information to include available resources, areas where resources were not available and outcomes of referrals. Finally, data regarding reentry coordinator training and parole officer training is also included.

During Fiscal Year (FY) 2019, the TDCJ continued to make resource guides available at various locations throughout the institutional units such as the reentry case manager’s office, the unit library and the unit chapel for offender review pre-release, in addition to pre- and post-release case management provided by the Reentry and Integration Division. During FY2019, 57,750 offenders were served in reentry programs. There were 20,462 offenders assessed using the Texas Risk Assessment System (TRAS) as a part of the parole review process, with over 8,069 having barriers to release identified during case planning. The offenders released during the fiscal year were provided with a resource referral pamphlet, access to case management services and individual reentry planning to include resources and other information in the areas of substance abuse, medical and mental health needs, education, employment, housing, veteran services, and basic needs. Due to new initiatives and increased retention, reentry coordinators were able to provide over 144,014 referrals to resources in these areas to assist in a successful transition for these offenders.
During FY2019, the Parole Division’s parole officers made over two million referrals to address compliance with conditions imposed by the Board of Pardons and Paroles and to meet other identified offender needs with regards to substance abuse, medical, education, employment, housing, veteran services, basic needs, and special needs. Several areas across the state have been identified where additional providers could assist offenders in reintegration. Additional providers could reduce the need of travel outside of their immediate area or out of their home county to receive services. TDCJ will continue to enhance referral networking opportunities with community partners to both maintain and augment available resources for offender use.

The TDCJ Reentry System

The TDCJ strives to ensure reentry efforts are implemented agency-wide with divisions working collaboratively to deliver programs and services aimed at assisting offenders upon release to the community. An extensive diagnostic and assessment process begins immediately upon receipt of an offender, to include obtaining personal and family history through interviews with the offender, completing a full physical and mental health assessment protocol, an automated inquiry conducted in cooperation with the Department of State Health Services to identify offenders who have been part of the public mental health system, criminal history checks, and educational assessments conducted by the Windham School District. In addition to measuring educational achievement level, the Windham School District identifies offenders who must be educationally served through the special education program based on the Individuals with Disabilities Education Act and also verifies and documents offender accomplishments, including high school diplomas, general education diplomas or college credit and degrees.

During the intake process, the offender is also screened and assessed via the TRAS. This intake tool identifies criminogenic risk levels, and this information can be used for programmatic placement throughout the remainder of the incarceration period. Information gained through various evaluations and assessments is used to develop an Individualized Treatment Plan (ITP) for each offender. The ITP helps guide program enrollment practices by displaying a need and priority indicator that is available for review by individuals making decisions regarding offender program placement. Programs available to offenders during their incarceration include academic, career
and technical education, post-secondary education, life skills, cognitive intervention, substance abuse treatment, sex offender treatment and faith-based programming. In addition, thousands of volunteers supplement the programming provided by TDCJ, Windham School District and contract staff.

Reentry and Integration Division and Parole Division

Each year, more than 65,000 offenders are released from the TDCJ with more than half subject to supervision requirements. All offenders are provided with a resource pamphlet at the time of release which lists organizations that assist with health care, social services, substance abuse, veteran specific needs, employment and support systems. During FY2019, 146 Reentry and Integration Division case managers provided pre-release, special need and releasing services; along with the additional 51 case managers who provided post-release services to offenders across the state. Services are provided through a three-phased program designed to assist offenders in preparation for successful return to the community upon release from the TDCJ. In addition to the three-phased program outlined below, offenders are provided a toll-free reentry hot line number which allows the offender to contact the Reentry and Integration Division for additional assistance and referrals post-release. This hotline is answered by dedicated reentry staff trained to address the variety of needs that may arise post-release.

• Phase I – Identification Document Services: During Phase I of the Reentry Program, a reentry case manager assists eligible offenders in ordering identification documents. For prison sentenced offenders; at the time of initial parole eligibility, a replacement social security card, certified birth certificate, and military service record (DD-214), if applicable, are ordered. For state jail and Substance Abuse Felony Program (SAFP) offenders this process occurs upon arrival to the TDCJ. Obtaining the social security card and certified birth certificate early in incarceration is critical in that those documents must be on file with the TDCJ in order for the case manager to process an offender for a Department of Public Safety Identification Card (DPS ID). At time of parole approval, or within six months of discharge for prison sentenced offenders, the social security card and birth certificate are used as supporting documentation when the DPS ID application is submitted. For state jail and SAFP offenders that process
occurs immediately upon receipt of the social security card and birth certificate. Identification documents are received, processed and verified by the Division’s Verification and Identification Processing unit. All identification documents obtained for an offender are issued to him/her at the time of release from the TDCJ. In FY2019, the Reentry and Integration Division ordered 36,295 certified birth certificates and 37,315 replacement social security cards at time of parole review.

As a result of those efforts, applications were made for 41,978 ID cards for incarcerated offenders at the point of release. Phase I services for identification documents are essential for all releasing offenders as it is the primary starting point for the offender to be able to obtain housing and employment as well as other services upon return to the community.

- **Phase II – Assessment and Case Planning:** At time of parole approval, a unit-based reentry case manager conducts a risk assessment to determine risk level as it relates to criminogenic need and risk of re-offending. Those that score moderate or high risk on the assessment are enrolled in individualized case planning to address needs, goals, action steps and resources targeted toward equipping the offender for successful return to the community. The case plan is developed as a cooperative effort between the case manager and the offender. A copy of the case plan is provided to the offender at time of release and the case plan is available to the supervising parole officer and community case manager post-release.
Phase III – Community Case Management: The third phase of the Reentry Program is available to clients enrolled in Phase II pre-release or those who are self-referred or referred by a parole officer. Clients receive case management services to assist with resources in areas such as employment, food, clothing, education, finances and budgeting, nutrition and health, life skills, parenting and relationships, medical and mental health, transportation support and cognitive skills. To further enhance employment opportunities, job fairs and hiring events are organized by case managers across the state which provide not only job leads but exposure to training and resources available through local services in the area.

Coordinated efforts between the Reentry and Integration Division, the Manufacturing, Agribusiness and Logistics Division, and the Parole Division as well as the Windham School District have resulted in not only an improved exchange of information but increased strategies for employment and vocational certification opportunities for offenders. To further the goal of ensuring a successful transition into the community, representatives from each division and the Windham School District participate in on-going meetings which focus on current and proposed employment initiatives.

The Reentry and Integration Division includes the Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI). TCOOMMI has developed and employs a Continuity of Care program for special needs offenders returning to the community from TDCJ's
correctional institutions. Reentry services for special needs offenders include referrals for case management and continuity of care services through TCOOMMI vendors for offenders with medical and/or mental health related needs. During FY2019, a total of 22,050 offenders were provided a continuity of care referral for medical needs while 37,348 offenders received referrals for mental health services.

As of August 2019, the TDCJ housed 7,963 veterans (their veteran status was verified using the Veteran Reentry Search Service administered by the Department of Veteran Affairs) with an additional 7,822 veterans identified as under the supervision of the Parole Division. Research has revealed that veterans involved in the criminal justice system have an increased likelihood of history of alcohol dependence, frequently live with a mental illness, suffer from post-traumatic stress disorder, have difficulty finding employment, and are at risk for post-confinement suicide. Reentry initiatives such as unit programming and housing dedicated to veterans, assistance with veterans benefit applications, and continuity of care coordination with veteran peer groups for post-release assistance address the specific needs of this offender population.

The Parole Division supervises offenders released from the custody of the TDCJ to serve the remainder of their sentence in the community. The division strives to enhance successful offender reintegration through services impacting factors that contribute to recidivism. Services provided through parole supervision include employment, housing, education, and substance abuse treatment. The collaborative efforts of the Parole Division, community partnership assistants, volunteers, offenders and their families provide a positive vehicle to the reintegration process. The
Parole Division, Windham School District and the Rehabilitation Programs Division, is responsible for ensuring offenders have completed required programming before release, and coordinates with the Reentry and Integration Division throughout the releasing process to ensure that placement of special needs offenders is completed. As a result of this collaborative effort, services are enhanced, and continuity of care is ensured. Additionally, the Parole Division works closely with the Board of Pardons and Paroles to ensure offenders have the necessary special conditions in place prior to release from incarceration to assist them in successful reintegration into society. The division also completes placements for aftercare programs, as well as placement of offenders into residential reentry centers when no other home plan options are available. Throughout offender supervision, the Parole Division utilizes available resources to ensure offender compliance with imposed special conditions and to address any identified issue that arises.

Reentry Barriers and Referrals

Should an offender have an identified need which would hinder successful transition and reintegration to the community, TDCJ staff coordinate with a contracted vendor or another state agency for provision of services specific to that need or, in some cases, to local self-help organizations. Types of referrals and barriers are noted below with a chart summarizing the total number of referrals and barriers following.

Housing: Offenders are not released to supervision without an approved residence. Currently, there are eight privately operated residential reentry centers (halfway houses) for use in placement of offenders without an approved residence. Offenders under parole supervision are placed in a residential reentry center either immediately upon release or upon referral from field parole staff in the event an offender no longer has an approved residence. Also available for use are alternative housing resources, which are community residential resources where two or more unrelated offenders reside, owned by an individual, a private entity, non-profit or faith-based organization with which the TDCJ has no contracted agreement. These residential resources must complete an application process to be approved to accept offenders on parole supervision. These residential resources receive no compensation from the TDCJ and any payment they require must be paid by the offender.
A Temporary Housing Assistance Program (THAP) facility is also a community residential resource where two or more unrelated offenders reside, owned by an individual, a private entity, non-profit or faith-based organization with which the TDCJ has no contracted agreement; however, these residential resources do receive compensation from the TDCJ in an amount not to exceed the established cost to house an offender incarcerated in a correctional institution or housed in a residential reentry center. These facilities must complete an application process to be approved to accept offenders under parole supervision. Consistent with Texas Government Code 508.157, THAP sites cannot be located in a county that has a state contracted residential reentry center. While housing options are available for the paroling population, housing barriers might include limitations of public housing assistance programs or entitlements for offenders with felony convictions, lack of housing in the county of conviction, or a restriction that prohibits an offender from returning to the county of conviction. The agency’s contract residential services are not available to offenders who release after having served their entire sentence.

Substance Abuse: The In-Prison Therapeutic Community (IPTC) and SAFP programs are six – nine month programs in the prison setting, with an aftercare component that lasts approximately 12 – 15 months, ensuring a seamless continuum of care. The exact length of the program is based on the offender’s progress and needs. Other programs addressing chemical dependency during incarceration include the Pre-Release Substance Abuse Program, Driving While Intoxicated
Recovery Program and State Jail Substance Abuse Program. The Therapeutic Community Substance Abuse Aftercare Treatment Program administers a range of therapeutic outpatient and resource programs to released offenders who completed certain programs. It oversees and coordinates these interrelated programs for the substance abuse treatment of offenders and makes use of case management and drug and alcohol testing to assist in supervising offenders.

The Substance Abuse Counseling Program is an education, intervention, and treatment program serving offenders on parole supervision. The Substance Abuse Counseling Program is designed to reduce the recidivism rate of offenders who use alcohol or drugs while on parole supervision, have a history of drug or alcohol use, or who request assistance with drug and/or alcohol related issues during their parole supervision. Parole Division Counselors licensed by the Texas Department of State Health Services provide these relapse services. Outpatient and inpatient treatment services are provided by contracted treatment vendors for those eligible offenders who submit positive urinalysis specimens. Peer support programs, such as Narcotics or Alcoholics Anonymous or Winner’s Circle (a non-secular support program), are also available for offender post treatment or education programming. Barriers regarding substance abuse treatment primarily affect the discharging population as the Parole Division has dedicated funding for these services, but transportation or waiting lists could be issues for supervised offenders.

**Employment:** For those offenders who are unemployed or under employed, a referral is made to the Texas Workforce Commission, as well as job fairs and hiring events coordinated by TDCJ staff, which provide linkage to those employers interested in hiring offenders. Reentry and Integration Division community case managers work directly with individual employers to increase the number of employers actively hiring offenders. Collaboration between the Reentry and Integration Division, Manufacturing, Agribusiness and Logistics Division, and the Windham School District connects pre-release job training and skills with employers, working to increase sustainable employment opportunities. Barriers for employment for the offender population vary dependent on many variables. The barriers can vary based on geographical locations as well as offender job skills. There are barriers related to licensing restrictions as well as overall job markets in the offender’s surrounding area.
Medical: Medical barriers exist when the offender is not eligible for disability on a federal or state level and the ability to access medical care is limited due to financial constraints. Referrals are coordinated through the TCOOMMI office in conjunction with local hospital districts for available care. The offender population is able to access local indigent health care programs available to all indigent individuals. Barriers could include access to clinics, transportation and cost of care even with assisted funding.

Mental Health: Mental health barriers are similar to medical barriers in the lack of resources available while pending application for disability or in the event of denial of benefits. Again, TCOOMMI provides assistance by coordinating care with local mental health authorities and providing funding for services for this segment of the population. The barriers for this population would include access to care for offenders who do not have severe or persistent mental health disorders that qualify for treatment by the public mental health system. These offenders are given resource information for general medical care and public assistance.

Education: Offenders released to supervision with less than a sixth-grade education or without a verified general equivalency diploma (GED) or high school diploma, as well as those offenders who do not possess adequate vocational skills, are referred to Texas Workforce Commission
resources and local education resources through the Texas Educational Agency. The barrier to obtaining education typically exists when testing centers are geographically limited in rural areas or testing hours are not varied.

**Veteran Services:** Offenders verified as a veteran of the United States armed services are eligible for referral for services at the state level through the Texas Veterans Commission, the federal level with the Veterans Administration, and peer network support services on a local level, such as the Military Veterans Peer Network. These resources provide a post release linkage to housing, medical and mental health assistance, in addition to other identified needs. The main barrier to veteran services exists when the veteran’s hospitals or clinics are located beyond where the offender can access care. Through a cooperative agreement with the Texas Veterans Commission, case managers assist offenders with filing pension reinstatements as well as applications to initiate or resume veteran benefits.

**Basic Needs:** Basic needs encompass identification, clothing, food, social and support services. Offenders lacking resources to meet the basic needs for clothing and food can be provided assistance through referrals to local charities, food banks, churches, and non-profit organizations. Support services can range from budget management, assistance with utilities, and parenting and life skills programs. An offender may have several referrals within this category.

### Reentry and Parole Barriers and Referral Charts

#### Barriers to Reentry FY19

<table>
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<th>Category</th>
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<tr>
<td>SUBSTANCE ABUSE</td>
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Offenders enrolled in case management services or are in the community were identified with one or more barriers to reentry.
A total of 144,401 resource referrals, including multiple resources in each area, were given to offenders enrolled in case management services and released in FY2019.

Referral resources include the utilization of TDCJ resources such as residential reentry centers; state agencies such as the Texas Veterans Commission, Texas Education Agency or the Texas Workforce Commission; local mental health authorities for psychiatric issues to include intensive case management, transitional case management or continuity of care services through a TCOOMMI contracted vendor; residential and outpatient substance abuse treatment or psychiatric services; community resources such as churches or food pantries and support services such as Alcoholics Anonymous, Winner’s Circle or the Military Veterans Peer Network. These resources may be state paid or subsidized, private pay or private insurance or services provided by peer support networks at no charge.
Referral Outcomes

The Reentry and Integration Division maintains a resource directory that is shared with the Rehabilitation Programs Division and the Windham School District for use in determining pre-release referrals during case planning. In addition, the TDCJ has partnered with Texas Connector, an online, interactive resource guide which allows case managers and parole officers the ability to access numerous non-profits and agencies in the offender’s area that can further assist with the offender’s reentry needs. Texas Connector allows staff to produce reports that contain requested information for referrals. These requests may be for a multitude of programs or services to include substance abuse, education, batterer’s intervention, anger management, housing, employment or mental health while at the same time a specific request may be for any program or service needed for an individual offender. Texas Connector provides the ability to search for resources statewide by a specific address or region such as city, county, or zip code. Staff may also produce a report containing the requested search information for a radius ranging from 1 to 100 miles. As previously noted, parole officers provide referrals to offenders to comply with conditions imposed by the Board of Pardons and Paroles and to meet other offender needs as identified by the officer during the course of supervision. The Parole Division utilizes an electronic case management system to track offender information, which also contains a resource directory for officer use. The resource directory affords parole officers the ability to search for available resources by type, city, zip code and/or county with supervisory staff having the ability to edit, add or update provider information (see image on page 12). If a resource was identified as no longer available, that resource would be removed from the directory by Parole Division staff. In areas lacking resources, offenders are referred to the nearest available resource. Outcomes of referrals are not based upon offender compliance or non-compliance but are measured based upon availability of services, as a referral should not be made unless the officer believes the service is available. If a referral was made and the service was not available or a waiting list existed, then the outcome of the referral was considered unsuccessful.
Of the 2,250,233 referrals made in FY2019, offenders were able to receive access to the services, with about thirty hundredths of one percent of the referral resources (0.30% or 6,745) not being readily available or wait lists existing. The following provides a breakdown of those 6,745 referrals, by type: substance abuse – 2,071; medical and mental health – 332; education – 1,767; employment – 1,426; basic needs – 1,131; veteran services – 18. Housing did not have any areas where services were not available, or a waiting list existed.

In addition to identifying the outcome of referrals, parole officers have identified those counties where additional resources or providers to meet offender reentry needs would be beneficial (Appendix A). Parole officers address referrals and monitor effectiveness on a monthly basis and provide additional referrals or modifications, as needed.
FY2019 Training and Curriculum Development

Training is an agency priority with the goal of providing staff the tools necessary to perform their job functions efficiently and effectively while applying the most current proven practices to aid in case management and supervision of offenders.

In FY2019, training for Reentry and Integration Division staff was comprised of TRAS End User Certification Training, Basic Training for New Case Managers, and Basic Training for New Community Case Managers. **TRAS End User Certification Training** is a 16-hour class that develops the knowledge and skills necessary for appropriately completing the TRAS assessment. All newly hired reentry case managers are required to attend TRAS End User Certification training and pass the certification test provided upon conclusion of training.  **Basic Training for New Case Managers** is a 22-hour class which consists of an overview of the Reentry and Integration Division, reentry planning, identification documents, and release processing and includes work in a computer lab. Case managers are required to complete 56 hours of structured observation of an experienced case manager performing duties on a TDCJ facility prior to attending **Basic Training for New Case Managers**.

**Basic Training for New Community Case Managers** is a 36-hour class combining a 16-hour TRAS End User Training with topics specific to the Community Case Manager. The course concentrates on the tasks that are community case manager specific such as job fairs, oral communication, and community reentry case manager duties. Similar to the **Basic Training for New Case Managers**, community case managers are required to complete 32 hours of structured observation of an experienced community case manager performing duties prior to attending the formal case manager training, and 8 hours observing a case manager on a unit. Structured observation, together with formal classroom training, has been determined to be critical to a case manager’s success.

In FY2019, training for Parole Division staff consisted of the Parole Officer Training Academy – training for newly hired parole officers (240 hours); In-Service Training – annual training consisting of various pertinent topics identified by management (40 hours); Unit Supervisors Course – overview of supervisory duties (40 hours); Parole Supervisors Course – overview of
functions of an office manager (40 hours); Firearms – firearm preparedness course for staff who choose to carry a weapon (40 hours); and Specialized Officer Supervision Schools (SOSS). SOSS courses generally consist of a weeklong training that is conducted for officers prior to assignment to a specialized caseload. SOSS courses were conducted for Special Needs (32 hours), Sex Offender (36 hours), Therapeutic Community (32 hours), District Reentry Center (24 hours), and Super-Intensive Supervision Program/Electronic Monitoring Officers (40 hours).
Appendix A

The agency makes a concerted effort to ensure all offender needs are met. The following is a list of counties by category where staff has identified that additional services would assist with meeting the challenges of offender needs. Counties appearing on the list may provide services but due to the vastness of the State of Texas, some resources are difficult to acquire.

**Directory – Alphabetical Listing of Referral Needs by County**

**Housing** – Referrals for housing are provided when an offender is releasing without an approved residence or if a released offender would become homeless absent further action by the division. Housing referrals include, but are not limited to, residential reentry centers (halfway houses), alternative housing and THAPs. While housing options are available for the paroling population, barriers could include limitations of public housing assistance programs or entitlements for offenders with felony convictions, lack of housing in the county of conviction, a restriction that prohibits an offender from returning to the county of conviction.


**Basic Needs** – Referrals for basic needs are provided when an offender is in need of necessities that include food, clothing or any other social/support service. These referrals include, but are not limited to, local charities, food banks, churches and non-profit organizations.
Education – Referrals are provided when an offender does not have a high school diploma or GED as well as those lacking adequate vocational skills. Additionally, referrals are made for those offenders lacking a sixth-grade education or those required to participate in educational programming as a condition of release. These referrals include, but are not limited to, the Texas Educational Agency and the Texas Workforce Commission. The barrier to obtaining education typically exist when testing centers are geographically limited in rural areas or testing hours are not varied.
**Employment** – Referrals are provided to unemployed and underemployed offenders. These referrals include, but are not limited to, the Texas Workforce Commission, job fairs and employers identified by staff.


**Veteran Services** – Referrals are provided to offenders verified as a veteran of the United States Armed services. These referrals are to the state and federal agencies such as the Veterans Administration which provide linkage to housing, medical, mental health and other identified needs. The main barrier to veteran services exists when the veteran’s hospitals or clinics are located beyond where the offender can access care.

Medical – Referrals are necessary when an offender is not eligible for disability and the ability to access medical care is limited due to financial constraints. These referrals are coordinated through the TCOOMMI office in conjunction with local hospital districts for available care. The offender population is able to access local indigent health care programs available to all indigent individuals. Medical issues could include access to clinics, transportation and cost of care even with assisted funding.

Mental Health – Referrals are necessary when an identified need exists due to a diagnosed mental impairment. These referrals include, but are not limited to, Department of Health and Human Services and local mental health authorities. The barriers for this population would include access to care for offenders who do not have severe or persistent mental health disorders that qualify for treatment by the public mental health system. They are given resource information for general medical care and public assistance.
Substance Abuse – Referrals are provided to offenders who have a history of substance abuse and offenders who have tested positive for an illegal substance. The agency provides a variety of inpatient and out-patient services. These referrals include but are not limited to contracted providers, Parole Division counselors, Narcotics or Alcoholics Anonymous and Winner’s Circle. The Parole Division has dedicated funding for these services, but transportation or waiting lists could be issues for supervised offenders.