







Erie County Reentry Services & Support Alliance

2016-2018 DATA SUMMARY (JANUARY 2019)

PREPARED FOR THE ECRSSA ADVISORY BOARD BY THE MERCYHURST UNIVERSITY CIVIC INSTITUTE







HISTORY

In 2013, Erie Together, the region's anti-poverty movement, in partnership with UnifiedErie, Erie's violence reduction effort, agreed that reentry was a priority for not only overall community safety efforts but also in the efforts to increased self-sufficiency among residents within Erie County. Erie Together took the lead on convening a group of stakeholders to explore the creation of a countywide reentry strategy. The stakeholder group of cross sector representation met regularly over the course of three years to identify the challenges that re-entrants, now referred to as transitioning clients, were facing. They discussed action/milestones transitioning clients must generally achieve in order to be most successful. They reviewed local trends, as well as national data. They considered a variety of factors including: unemployment, mental health, drug and alcohol, housing, transportation and others. The planning group concluded that the best strategy would be the creation of a "one stop shop" to deliver important services and connect transitioning clients to appropriate resources within the community. This "one stop shop" was the formation of the Erie County Reentry Services and Support Alliance (ECRSSA). With the support from a \$1.2 million grant from the Erie Community Foundation and the United Way of Erie County, the ECRSSA was launched in July 2016 under the umbrella of the Greater Erie Community Action Committee (GECAC).

SERVICES

The ECRSSA's mission is to provide support and services to transitioning clients through an intentional network of community and faith based organizations in partnership with the criminal justice system. Transitioning clients are defined as: 1) individuals released from federal, state, or county prison who are reentering Erie County after serving a sentence for a criminal conviction and/or 2) people reentering a law abiding life from criminal network involvement.

The primary goals of the ECRSSA are:

- 1. Increase access and connections to support services and assistance for transitioning clients.
- 2. Promote responsible quality of life through positive family, spiritual and informal support connections.
- 3. Achieve safe communities through reduced recidivism.

Services are divided into two levels: Intensive Case Management (ICM) and Resource Coordination (RC). ICM participants are transitioning clients who were residing in Erie Co at the time of their offense, incarcerated/returning back to the county or have been out less than six months, and are identified as medium to high risk for recidivating. The ICM participant is offered case management support for 12-18 months. ICM participants are assigned a case manager, given a portable file, pocket day planner, pen and tablet of paper to start the orientation of important documents, appointment cards and other paperwork. Case managers are positioned to partner with the transitioning client to walk with them on their journey. They do not just provide their clients contacts, they assist them in making connections to the services and supports they need. Case managers identify the individualized needs of each client and work with them to address those needs. They offer

to help the client in creating a resume, learning how to address criminal history during a job interview, locating employment and conducting mock interviews. In addition to the case managers, a client advocate stationed at the Downtown YMCA in Erie is positioned to provide clients the one thing they identified as being the greatest deficit in their transition back into civilian life, a positive peer support. The client advocate offers a listening ear and supportive advice. The case manager and client advocate combine to surround the transitioning client with a support team. RC participants are transitioning clients are those individuals who do not meet the risk level criteria for ICM or are individuals who are re-entering to Erie County but are not from Erie County prior to incarceration. The RC clients receive resource and referral services, so they are still connected to necessary services but that does not include the intensive case management component. The RC participants are offered case management support for up to 90 days.

The ECRSSA serves at the resource component for the Group/Gun Violence Reduction Strategy (GVRS). The GVRS entails identification of individuals through a data driven process that are high risk for involvement in violent offenses as offender as well as victim. Once identified, a group of individuals are invited to hear a message, that message being one of consequences as well as hope and support for those high risk individuals. The ECRSSA manage the logistics of the GVRS meeting (otherwise referred to as a "Call In") and case managers are on site to immediately begin working with GVRS attendees following the presentation. The purpose is to connect those high risk individuals with supports and services to assist them in disengaging from a high risk lifestyle.

The following report outlines the data and outcomes for the ECRSSA since its acceptance of its first client in October 1, 2016 through December 31, 2018.

DATA

Figure 1 outlines the total number of referrals received each year through the ECRSSA, the age range and median age of those clients as well as the client's system involvement at the time of referral during the reporting period.

Figure 1.

ALL REFERRALS								
2016 2017 2018 Cumulative								
			343	671				
Totals	29	299	(334 unduplicated)	(631 unduplicated)				
Age Range	22 - 62	15 - 72	18 - 68	15-72				
Median Client Age	42.6	33.2	33.2	33.4				
System Involvement	1 County; 8 State; 20 None	136 None 93 State 58 County 12 Federal	141 None 109 State 86 County 7 Federal	145 (22%) County 297 (44%) None 210 (31%) State 19 (3%) Federal				

Fifty-six percent of referrals to the ECRSSA have become active in either Intensive Case Management (ICM) or Resource Coordination (RC) services. Figure 2 identifies the current status of each active as of December 31, 2018. During the reporting period, a total of 379 clients had been served by the ECRSSA. Of those 379 clients, 106 remained active in ICM and 48 in RC as of December 31, 2018. A total of 225 clients have been closed from the program, 152 from ICM services and 73 from RC services.

Figure 2.

CURRENT ECRSSA INVOLVEMENT									
Referral Year 2016 2017 2018 Cumulative									
ICM Active	3	22	81	106					
RC Active	0	7	41	48					
ICM Closed	15	99	38	152					
RC Closed	1	48	24	73					
TOTAL CLIENTS SERVED	19	176	184	379					

Figure 3 outlines those cases that became active with either ICM or RC services and closed on or before December 31, 2018. The length of time in ICM services ranged from 57 to 794 days with a median length of time at 271 days. RC clients' time in the program ranged from 75-694 days with a median length of service being 256 days. A "successful discharge" is defined as a client being discharged from the ECRSSA program after accomplishing all identified goals and it mutually agreed upon by both the case manager and client. An "administrative discharge" is defined as a client being discharged from the program after having been unresponsive and not communicative with the case manager for 90 consecutive days.

Figure 3.

CLOSED CASES						
	ICM	RC				
Total Closed	152	74				
Client Age Range	19 - 66	22 - 63				
Median Client Age	33.2	37.7				
System Involvement at Intake						
County	73 (48%)	15 (20%)				
State	63 (41%)	39 (52%)				
Federal	4 (3%)	5 (7%)				
Length of Time in ECRSSA	57 - 794 days	75 - 694 days				
Median Length of Time in ECRSSA	271 days	256 days				
Successful Discharge (all goals met)	14 (9%)	NA NA				
Admin Discharge (inactive 90 days)	110 (72%)	NA				

A primary purpose of the ECRSSA is to identify client need and for those needs to be addressed in partnership with the ECRSSA case manager and the client. Figure 4 identifies both the number and percentage of clients with identified goals as well as those with those goals who have achieved them. In addition, the column "% Greatest Need" identifies the total percentage of clients with that goal listed as a need. The top three

greatest needs identified by clients in ICM are: jobs (77.2%), transportation (69.1%) and assistance with Department of Public Welfare (47.7%). The top three greatest needs identified by clients in RC are: jobs (63.5), and shelter & finding a primary care physician (both 37.1%).

Figure 4.

GOALS IDENTIFIED / ACHIEVED								
	In	tensive Cas	e Manageme	nt (N=152)	Resource Coordination (N=74)			
Goal Achieved/Goal Identified	Identified	Achieved	% Achieved	% Greatest Need	Identified	Achieved	% Achieved	% Greatest Need
Jobs	115	85	73.9	77.2	47	40	85.1	63.5
Mental Health	35	28	80.0	23.5	19	15	78.9	25.7
Drug & Alcohol	51	41	80.4	34.2	22	18	81.8	29.7
Primary Care Physician	62	54	87.1	41.6	26	22	84.6	35.1
Income Assistance	63	35	55.6	42.3	11	8	72.7	14.9
Transportation	103	89	86.4	69.1	4	3	75.0	5.4
Education	33	10	30.3	22.1	16	8	50.0	21.6
Housing	52	29	55.8	34.9	21	13	61.9	28.4
Shelter	16	13	81.3	10.7	26	24	92.3	35.1
Clothing	70	57	81.4	47.0	25	25	100.0	33.8
Department of Public Welfare	71	60	84.5	47.7	14	13	92.9	18.9
Identification	46	37	80.4	30.9	20	14	70.0	27.0
Skills Training	30	19	63.3	20.1	2	1	50.0	2.7

Another primary purpose of the ECRSSA is to reduce recidivism. Recidivism is tracked in two ways for outcome reporting and is only tracked on cases that become active in the ICM services: 1) the number of individuals who have new charges any time after they enroll in ECRSSA services and 2) the number of individuals who have new charges after enrolling in ECRSSA services that result in conviction and re-incarceration. Figure 5 outlines the recidivism outcomes for individuals who received ECRSSA services and have closed services. Thirty-six clients had new charges (24%) and 11 clients had new charges resulting in conviction and re-incarceration (7%). While there is not exact comparison, PA Department of Corrections data has indicated that in Erie County 58% of individuals returning to the community from incarceration recommit offenses within 3 years of release and 41% of individuals returning to the community from incarceration will be reconvicted and return to incarceration within 3 years of release.

Figure 5.

RECIDIVISM (N=152)	ECRSSA Average	Erie County Average within 3 years of reentry
36 with new charges	24%	58%
11 with new charges resulting in conviction and incarceration	7%	41%

- Of the 36 with new charges, 3 (8%) were identified as successful at discharge and 29 (81%) had been administratively discharged due to inactivity (90 days)
- Median age of client with new charges: 33
- Supervision at the time of intake of clients with new charges: 21 County; 12 state

In further examination of individuals with new charges who had received ICM services, the most common re-offending occurred in drug offending (30.6% of new charges) and retail theft (19.4% of new charges). Figure 6 outlines the type of offenses of the 36 clients having new charges after enrollment in the ECRSSA services.

Figure 6.

Primary Offense of New Charges (N=36)									
Offense Code	Offense Category	Number of Individuals	% of New Charges						
901	Criminal Attempt-Criminal Homicide	1	2.8						
2501	Homicide	1	2.8						
2901	Kidnap with intent to harm	1	2.8						
3126	Indecent Assault	1	2.8						
3743	Accident Involving Damage	1	2.8						
3802	Driving Under the Influence	1	2.8						
3921	Theft by Unlawful Taking	1	2.8						
3925	Receiving Stolen Property	1	2.8						
3934	Theft from Motor Vehicle	1	2.8						
6105	Possession of weapon	1	2.8						
5503	Disorderly Conduct	3	8.3						
2702	Aggravated Assault	5	13.9						
3929	Retail Theft	7	19.4						
780-113	Drug Sale/Possession	11	30.6						

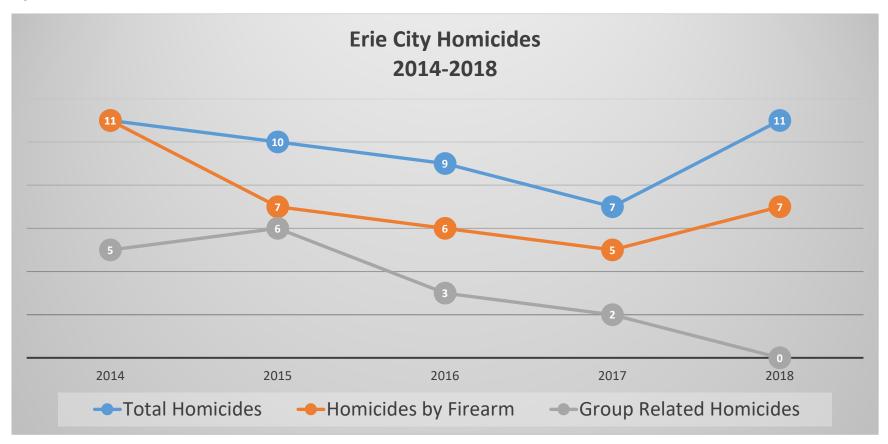
Figure 7 presents the goals identified and achieved by those individuals who had new criminal charges following engagement in ECRSSA ICM services.

Figure 7.

RECIDIVISM GOALS IDENTIFIED / ACHIEVED								
		Clients with f	New Charges (N=36)	Clients with I	s with New Charges, Conviction & Incarceration (N=11)		
GOAL	# Identified	# Achieved	% Achieved	% Greatest Need	# Identified	# Achieved	% Achieved	% Greatest Need
Jobs	24	7	29.2	66.7	8	6	75.0	72.7
Mental Health	4	3	75.0	11.1	3	3	100.0	27.3
Drug & Alcohol	12	8	66.7	33.3	4	4	100.0	36.4
PCP	8	6	75.0	22.2	4	4	100.0	36.4
Income Assistance	14	9	64.3	38.9	7	5	71.4	63.6
Transportation	20	13	65.0	55.6	7	7	100.0	63.6
Education	4	0	0.0	11.1	0	0	0.0	0.0
Housing	5	3	60.0	13.9	2	1	50.0	18.2
Shelter	5	5	100.0	13.9	2	2	100.0	18.2
Clothing	9	8	88.9	25.0	2	1	50.0	18.2
DPW	12	10	83.3	33.3	3	2	66.7	27.3
ID	8	6	75.0	22.2	2	2	100.0	18.2
Skills Training	4	4	100.0	11.1	0	0	0.0	0.0

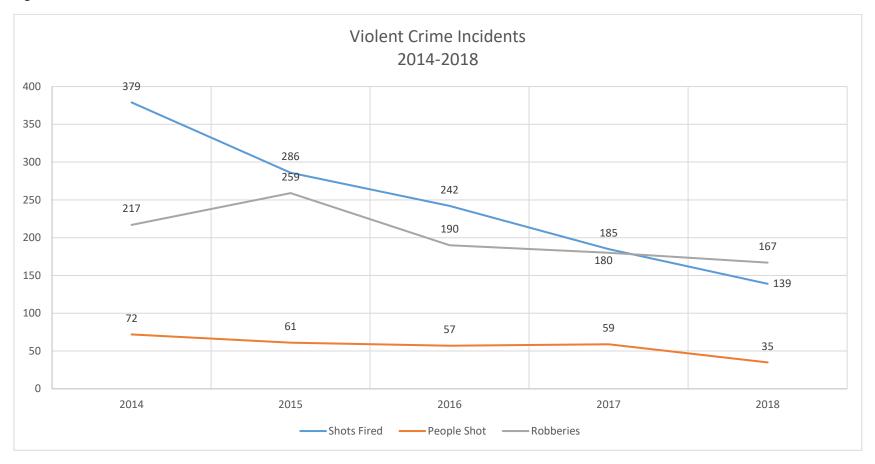
The overall goal of the ECRSSA is to provide supportive services to assist in reducing violent crime and improving overall safety within the Erie community. Figure 8 identifies the number of Erie city homicides 2014 to 2018. The greatest impact noted is that there has not been one group related homicide since the first GVRS "Call In" meeting in April 2017.

Figure 8.



Group related homicides was one area of impact, but there have been notable decreases in the number of shots fired, people shot and robberies. Figure 9 outlines violent crime incidents from 2014-2018 in the City of Erie.

Figure 9.



Finally, violent crime reduction expands beyond just want occurs within the community and criminal justice system. There is significant impact on health cost savings and revitalization within communities. Addressing crime is also an investment in economic development, neighborhoods and community development as it is a focus on the human capital within a community.

Utilizing estimated numbers of gunshot victims and averaged costs utilized in the John Hopkins study "Emergency Department Visits for Firearm Related Injuries in the United States, 2006-2014" published in October 2017, the cumulative estimated cost savings of violent crime reduction in Erie has resulted in a \$2.7 million savings. Figure 10 further outlines the breakdown of medical cost savings.

Figure 10.

	Avg Cost Per Person*	% of Estimated Victims*	Erie Gunshot Victims 2014	Avg Cost 2014	Erie Gunshot Victims 2017 N=59	Avg Cost 2017	Erie Gunshot Victims 2018	Avg Cost 2018
Treated in ER & released	\$5,254	49%	35	\$183,890	29	\$152,366	17	\$89,318
Admitted to ER	\$95,887	37%	27	\$2,588,949	22	\$2,109,514	12	\$1,150,644
Admitted & discharged to additional care facility	\$179,565	8%	6	\$1,077,390	5	\$897,825	3	\$538,695
TOTAL COSTS				\$3,850,229		\$3,159,705		\$1,778,657
TOTAL COST SAVINGS:						\$690,524		\$2,071,572
CUMMULATIVE COST SAVINGS: \$2,762,096								