



# ECRSSA

Erie County Re-Entry Services and Support Alliance

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*PROVIDING DIRECTION AND HOPE TO TRANSITIONING CLIENTS*

## Erie County Reentry Services & Support Alliance

2016-2019 DATA SUMMARY (JUNE 2020)

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, 2019.

## SERVICE DATA

The number of referrals has steadily increased each year. Most of those clients referred are under state (45%) and county (41%) judicial supervision. Figure 1 outlines the total number of referrals received each year through the ECRSSA and the breakdown of the level of judicial supervision.

Figure 1. Referrals Received

| YEAR          | # OF REFERRALS | LEVEL OF SUPERVISION OF CLIENT REFERRED |                  |                |                  |
|---------------|----------------|---|------------------|----------------|------------------|
|               |                | County                                  | State            | Federal        | None/Pending     |
| 2016          | 32             | 11                                      | 19               | 0              | 2                |
| 2017          | 303            | 123                                     | 132              | 12             | 36               |
| 2018          | 349            | 147                                     | 162              | 9              | 31               |
| 2019          | 393            | 159                                     | 173              | 16             | 45               |
| <b>TOTALS</b> | <b>1077</b>    | <b>440 (41%)</b>                        | <b>486 (45%)</b> | <b>37 (3%)</b> | <b>114 (11%)</b> |

The number of referrals has increased each year as have the number of clients accepted for services in both ICM and RC services; however, there was a dip in clients accepted for service in 2019 likely attributed to staffing decreases as the result of uncertainty over program funding. A total of 572 (53%) referrals became active in services since the start of the ECRSSA program. Thirty five percent of overall referrals became active ICM clients. Figure 2 outlines the total number of referrals accepted for services in ICM and breaks down the level of judicial supervision for those clients.

Figure 2. ICM Service & Supervision

| YEAR          | # CASES ACCEPTED FOR SERVICE | LEVEL OF SUPERVISION OF CLIENTS ACCEPTED FOR SERVICES |                  |                |                |
|---------------|------------------------------|---|------------------|----------------|----------------|
|               |                              | County  | State            | Federal        | None/Pending   |
|               | ICM                          |   |                  |                |                |
| 2016          | 18                           | 5   | 13               | 0              | 0              |
| 2017          | 125                          | 59  | 59               | 5              | 2              |
| 2018          | 129                          | 60  | 63               | 3              | 3              |
| 2019          | 107                          | 45  | 50               | 6              | 6              |
| <b>TOTALS</b> | <b>379</b>                   | <b>169 (45%)</b>                                      | <b>185 (49%)</b> | <b>14 (4%)</b> | <b>11 (3%)</b> |

Eighteen percent of clients referred became active with RC services. Figure 3 outlines the total number of referrals accepted for services in RC and breaks down the level of judicial supervision for those clients.

Figure 3. RC Service & Supervision

| YEAR          | # CASES ACCEPTED FOR SERVICE | LEVEL OF SUPERVISION OF CLIENTS ACCEPTED FOR SERVICES |                  |                |                 |
|---------------|------------------------------|---|------------------|----------------|-----------------|
|               |                              | County  | State            | Federal        | None/Pending    |
|               | RC                           |   |                  |                |                 |
| 2016          | 2                            | 2   | 0                | 0              | 0               |
| 2017          | 57                           | 12  | 35               | 5              | 5               |
| 2018          | 78                           | 26  | 37               | 5              | 10              |
| 2019          | 56                           | 10  | 28               | 5              | 13              |
| <b>TOTALS</b> | <b>193</b>                   | <b>50 (26%)</b>                                       | <b>100 (52%)</b> | <b>15 (8%)</b> | <b>28 (15%)</b> |

A total of 253 clients became active with ICM services and 126 with RC services and closed on or before December 31, 2018. The length of time in ICM services ranged from 19 to 1,251 days with a median length of time at 307 days and an average of 485 days. RC clients' time in the program ranged from 39-782 days with a median length of service being 277 days and an average of 300 days. Figure 4 outlines the number of client closures by year.

Figure 4. Case Closures

| YEAR CLOSED  | # ICM CLIENTS CLOSED | # RC CLIENTS CLOSED |
|--------------|----------------------|---------------------|
| 2017         | 4                    | 0                   |
| 2018         | 147                  | 74                  |
| 2019         | 102                  | 52                  |
| <b>TOTAL</b> | <b>253</b>           | <b>126</b>          |

## OUTCOME DATA: Goals Identified & Achieved

The primary purpose of the ECRSSA is to identify individual client needs and to address those needs in partnership with the ECRSSA case manager, client, and available community resources. The most prevalent need of clients in the ICM program is obtaining a job (66%) followed by transportation (63%). Figure 5 identifies both the number and percentage of clients with identified goals.

Figure 5. Clients with Goals Identified

| GOALS IDENTIFIED        | Job | Mental Health | Drug & Alcohol | Primary Care Physician | Income Assistance | Transportation | Education | Housing | Shelter Bed | Clothing | DPW | Identification | Skills Training | Getting Ahead | Peer Group |
|-------------------------|-----|---------------|----------------|------------------------|-------------------|----------------|-----------|---------|-------------|----------|-----|----------------|-----------------|---------------|------------|
| # of Closed ICM Clients | 200 | 72            | 88             | 123                    | 117               | 190            | 83        | 101     | 34          | 128      | 131 | 73             | 90              | 21            | 28         |
| % of Closed ICM Clients | 66% | 24%           | 29%            | 41%                    | 39%               | 63%            | 27%       | 33%     | 11%         | 42%      | 43% | 24%            | 30%             | 7%            | 9%         |

Once goals are identified, the case managers' work with clients to achieve those goals by partnering with existing community resources to assist in client's achieving those goals. Of those clients that had obtaining a job as a goal, 72% of them achieved this goal by program closure. Figure 6 outlines the clients who achieved their identified goals in each category.

Figure 6. Clients with Identified Goals Achieved

| GOALS ACHIEVED          | Job | Mental Health | Drug & Alcohol | Primary Care Physician | Income Assistance | Transportation | Education | Housing | Shelter Bed | Clothing | DPW | Identification | Skills Training | Getting Ahead | Peer Group |
|-------------------------|-----|---------------|----------------|------------------------|-------------------|----------------|-----------|---------|-------------|----------|-----|----------------|-----------------|---------------|------------|
| # of Closed ICM Clients | 143 | 42            | 56             | 72                     | 62                | 147            | 16        | 41      | 20          | 93       | 90  | 49             | 28              | 4             | 10         |
| % of Closed ICM Clients | 72% | 58%           | 64%            | 59%                    | 53%               | 77%            | 19%       | 41%     | 59%         | 73%      | 69% | 67%            | 31%             | 19%           | 36%        |

## OUTCOME DATA: Recidivism

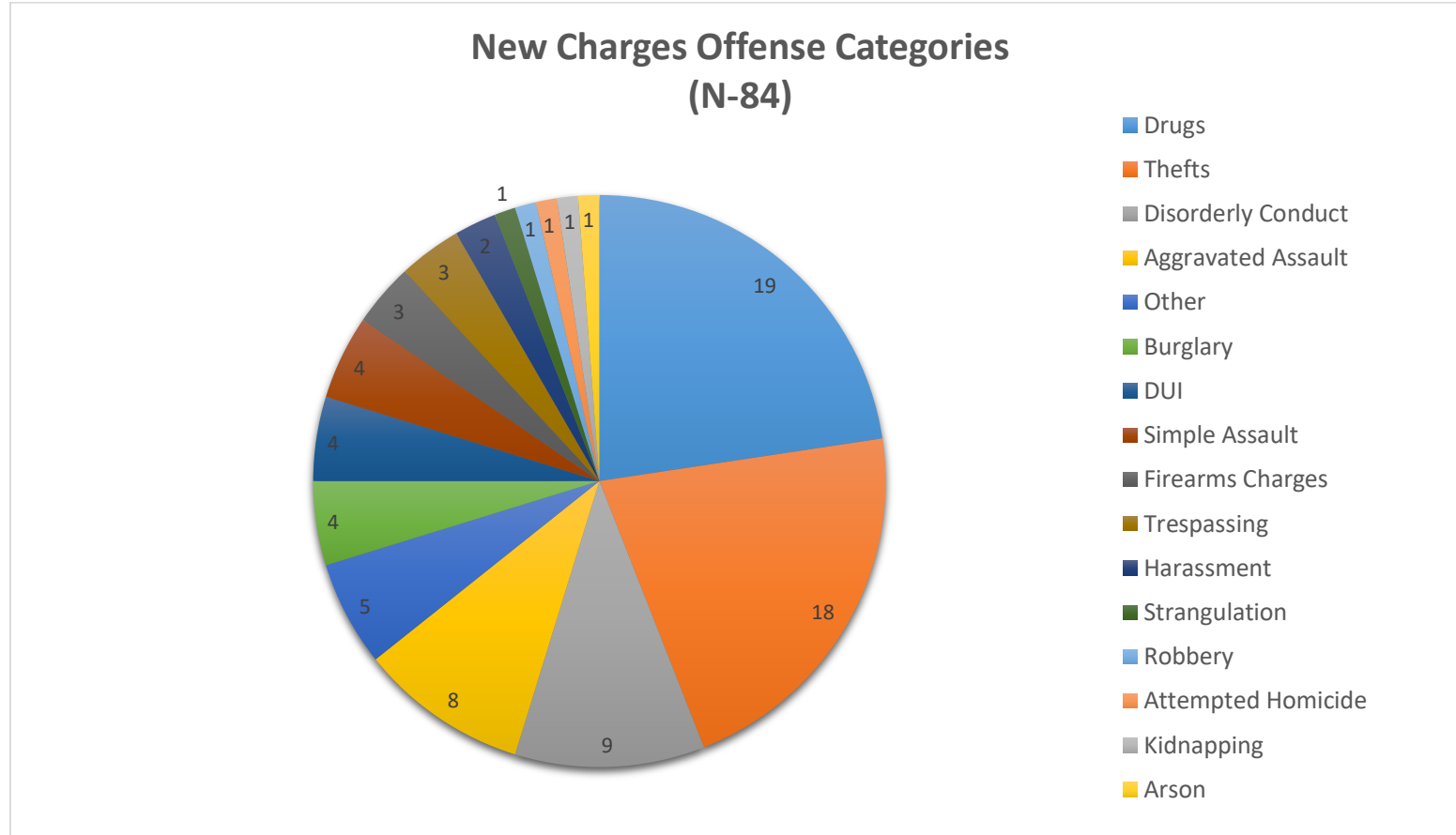
Another primary purpose of the ECRSSA is to reduce recidivism. The philosophy of the ECRSSA is that by addressing the individualized needs of citizens returning from incarceration that those supports will assist them in transitioning back into the community into a law abiding lifestyle. The anticipation is that clients of the ECRSSA will not commit new offenses and will not be convicted and returned to incarceration. 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 intake with ECRSSA services and 2) the number of individuals who have new charges after intake with ECRSSA services that result in conviction and re-incarceration. All clients closed having received ICM services are tracked from their initial start of service through post program closure up to three years through the Unified Judicial System of Pennsylvania Web Portal through Magisterial District Courts and Court of Common Pleas for criminal cases. Of the 253 clients closed, 84 (33%) had new charges and 28 (8%) had new charges resulting in conviction and incarceration (see Figure 7). The average estimates available for recidivism for Erie County are 58% for new charges and 42% for new offenses resulting in conviction and incarceration within 3 years post incarceration. Figure 7 provides the overview of recidivism for all clients who have closed with ICM ECRSSA services.

Figure 7. Recidivism of ICM Clients (N=253)

|                     | <b>NEW CHARGES</b> | <b>NEW CONVICTION &amp; INCARCERATION</b> |
|---------------------|--------------------|---|
| <b># of clients</b> | 84                 | 28  |
| <b>% of clients</b> | 33%                | 8%  |

Twelve (14%) of the 84 clients with new charges were for violent offenses. The most common primary offense category for new charges is drug offenses (21%) followed by thefts (20%) and disorderly conduct (10%). Figure 8 outlines the primary offense categories of the 84 clients having new charges after enrollment in the ECRSSA services.

Figure 8. Primary Offenses of New Charges (N=84)



Recidivism has been analyzed in two ways: 1) by the length of time clients were receiving services through the ECRSSA program, and 2) by length of time post program closure.

The length of time of clients receiving ICM services ranged from 19 to 1,251 days with a median length of time at 307 days and an average of 485 days. Those clients were broken down into service categories of less than 90 days, 3-6 months, 6-12 months, 12-18 months and over 18 months to determine if length of time receiving services impacted recidivism. Those clients who were in the program for more than 6 months were less likely to recidivate with 30% of those individuals having new charges while 46% of those individuals having been in the program less than 6 months had new charges. Similar for those clients with new convictions and incarceration, 9% of those having been in the program for more



than 6 months had new convictions and incarceration while 17% of those receiving less than 6 months of service had new convictions and incarceration. Figures 9 and 10 provide a further breakdown of recidivism by length of time in the ECRSSA program.

Figure 9. New charges by length of time in ICM services

|                                | CLIENTS WITH NEW CHARGES BY TIME IN PROGRAM |            |            |              |            |
|--------------------------------|---|------------|------------|--------------|------------|
| LENGTH OF TIME IN ICM SERVICES | Less than 90 days                           | 3-6 Months | 6-12 Month | 12-18 Months | 18+ Months |
| Total # of clients             | N=16  | N=41       | N=104      | N=68         | N=24       |
| # of clients with new charges  | 6 (38%)                                     | 20 (49%)   | 28 (26%)   | 23 (33%)     | 7 (29%)    |

Figure 10. New conviction & incarceration by length of time in ICM services

|   | CLIENTS WITH CONVICTION & INCARCERATION BY TIME IN PROGRAM |            |            |              |            |
|---|--|------------|------------|--------------|------------|
| LENGTH OF TIME IN ICM SERVICES                    | Less than 90 days  | 3-6 Months | 6-12 Month | 12-18 Months | 18+ Months |
| Total # of clients                                | N=16   | N=41       | N=104      | N=68         | N=24       |
| # of clients with new convictions & incarceration | 1 (6%)   | 9 (22%)    | 8 (8%)     | 9 (13%)      | 1 (4%)     |

Of those clients closed with ICM services through the ECRSSA program, clients were grouped in length of time post program closure by 6 months, 12 months, 18 months and 24 months. While recidivism increases over time post program closure, those percentages remain below the county averages. Figures 11 and 12 provide a further breakdown of clients tracked by length of time post program closure.

Figure 11. New charges by length of time post program closure

|  | CLIENTS WITH NEW CHARGES BY TIME POST PROGRAM CLOSURE |           |           |           |
|--|---|-----------|-----------|-----------|
| LENGTH OF TIME POST PROGRAM CLOSURE                | 6 months  | 12 months | 18 months | 24 months |
| Total # of clients                                 | N=100   | N=42      | N=107     | N=4       |
| # of clients with new convictions & incarcerations | 24 (24%)  | 16 (38%)  | 42 (39%)  | 2 (50%)   |

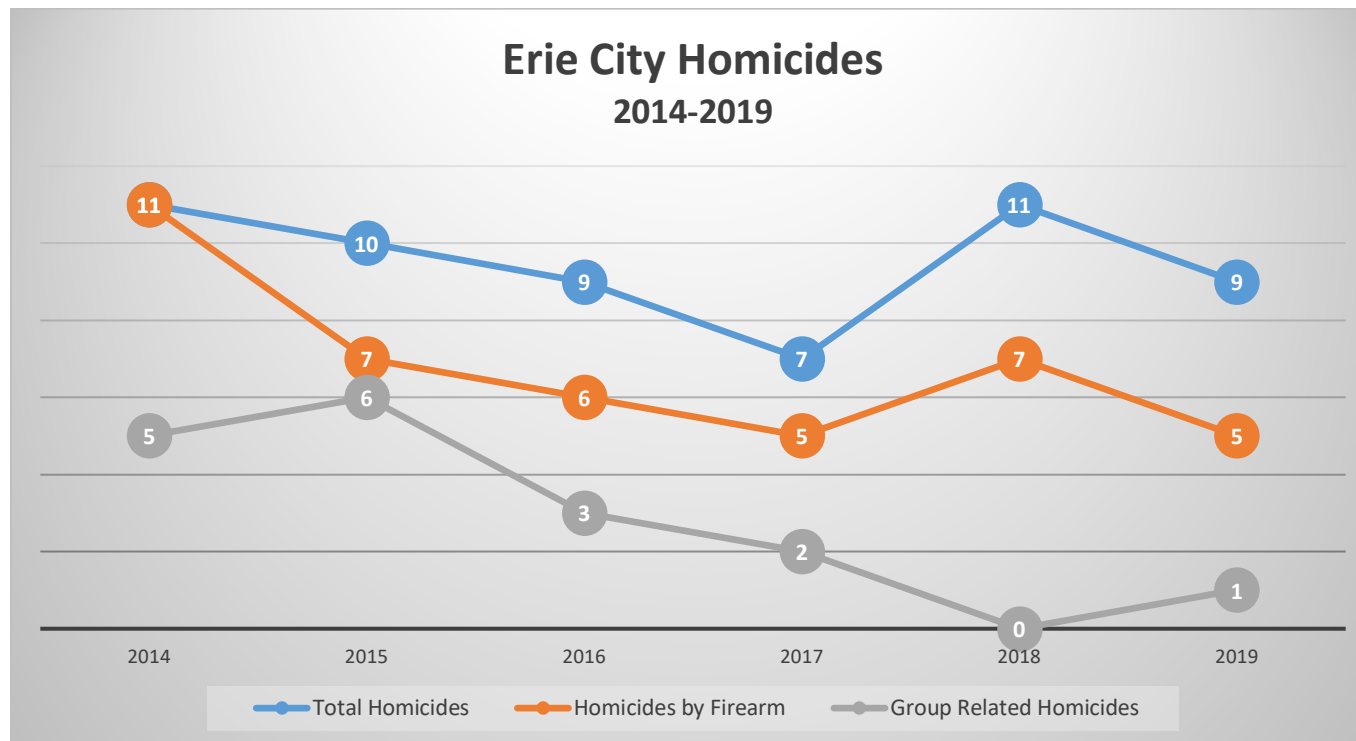
Figure 12. New conviction & incarceration by length of time post program closure

|  | CLIENTS WITH NEW CHARGES BY TIME POST PROGRAM CLOSURE |           |           |           |
|--|---|-----------|-----------|-----------|
| LENGTH OF TIME POST PROGRAM CLOSURE                | 6 months  | 12 months | 18 months | 24 months |
| Total # of clients                                 | N=100   | N=42      | N=107     | N=4       |
| # of clients with new convictions & incarcerations | 3 (3%)  | 7 (17%)   | 18 (17%)  | 0 (0%)    |

## OUTCOME DATA: Crime Statistics

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. Violent crime incidents have been tracked since 2014. Figure 8 identifies the number of Erie city homicides 2014 to 2019. The greatest impact noted is that there has only been one group/gang related homicide noted since the first GVRs “Call In” meeting in April 2017 (see Figure 14). In addition to impact on homicides, more significant has been the impact on shots fired and people shot in the City of Erie. The numbers of incidents of shots fired has steadily declined from 379 in 2014 to 134 in 2019 and the number of people shot has declined from 72 in 2014 to 42 in 2019 (see Figure 15).

Figure 14. City of Erie Homicides



\*A group related homicide is a homicide in which the offender is identified as an individual who has already been identified as a “high risk” offender, having been identified on the GVRs list prior to the homicide.

In addition to homicides, shots fired and people shot, robberies and aggravated assaults have also declined with robberies decreasing from 217 in 2014 to 165 in 2019 and aggravated assaults declining from 242 in 2014 to 184 in 2019 (see Figures 15 & 16).

Figure 15. City of Erie Shots Fired & People Shot

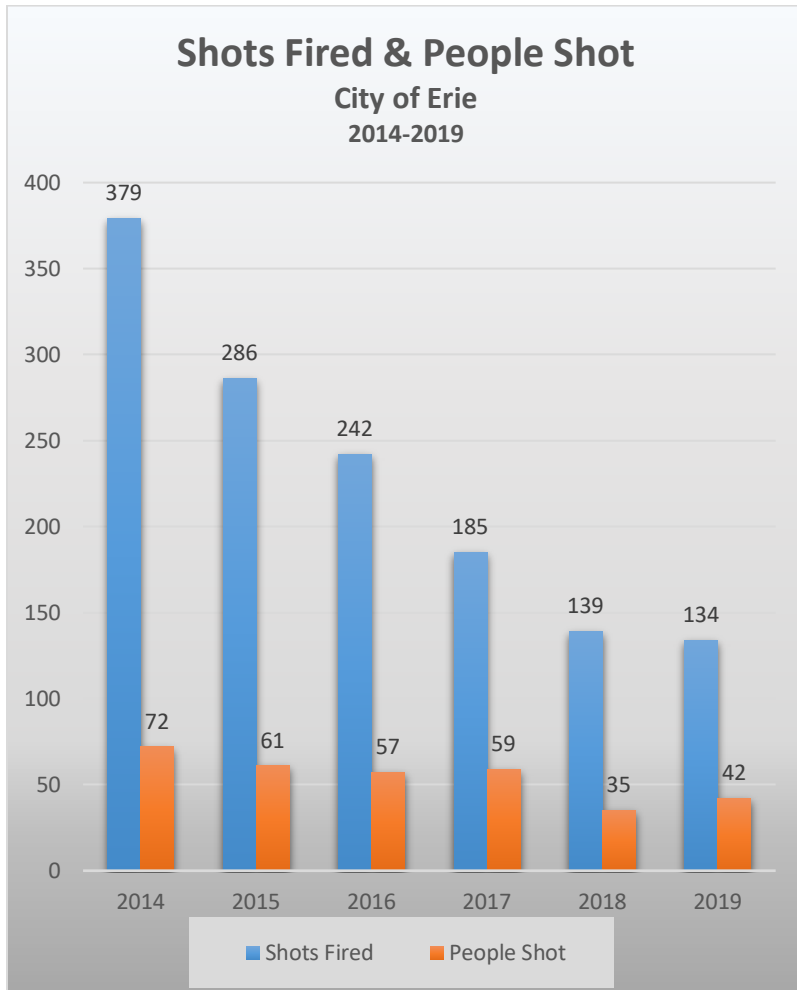
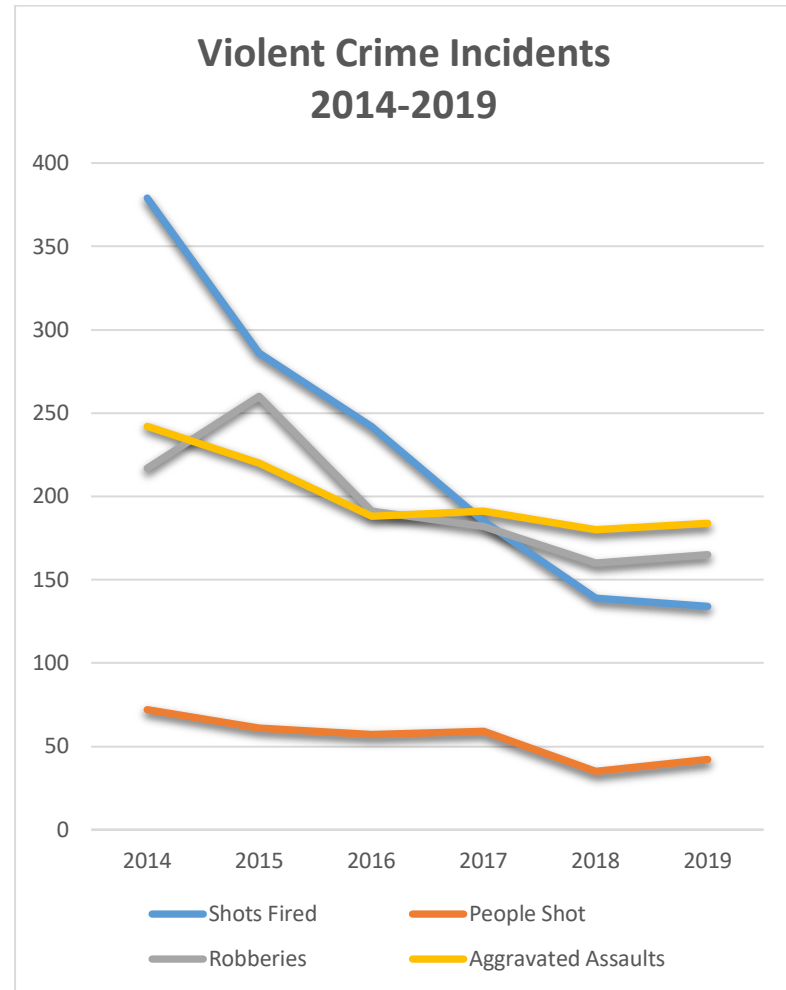


Figure 16. City of Erie Violent Crime Incidents



## OUTCOME DATA: Other Areas of Impact

Finally, violent crime reduction expands beyond just what 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 an estimated average of treatment rendered in hospital emergency rooms to 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 since implementation of the Group Violence Reduction Strategy and the ECRSSA in Erie has resulted in a \$4.4 million savings. Figure 10 further outlines the breakdown of medical cost savings.

Figure 16.

|  | Avg Cost Per Person* | % of Estimated Victims* | Erie Gunshot Victims 2014 | Avg Cost 2014      | Erie Gunshot Victims 2017 | Avg Cost 2017      | Erie Gunshot Victims 2018 | Avg Cost 2018      | Erie Gunshot Victims 2019 | Avg Cost 2019      |
|--|----------------------|-------------------------|---------------------------|--------------------|---------------------------|--------------------|---------------------------|--------------------|---------------------------|--------------------|
|  |                      |                         | N=72                      |                    | N=59                      |                    | N=35                      |                    | N=42                      |                    |
| Treated in ER & released   | \$5,254              | 49%                     | 35                        | \$183,890          | 29                        | \$152,366          | 17                        | \$89,318           | 21                        | \$110,334          |
| Admitted to ER   | \$95,887             | 37%                     | 27                        | \$2,588,949        | 22                        | \$2,109,514        | 12                        | \$1,150,644        | 16                        | \$1,534,192        |
| Admitted & discharged to additional care facility                                    | \$179,565            | 8%                      | 6                         | \$1,077,390        | 5                         | \$897,825          | 3                         | \$538,695          | 3                         | \$538,695          |
| <b>TOTAL COSTS</b>   |                      |                         |                           | <b>\$3,850,229</b> |                           | <b>\$3,159,705</b> |                           | <b>\$1,778,657</b> |                           | <b>\$2,183,221</b> |
| TOTAL COST SAVINGS:  |                      |                         |                           |                    |                           | \$690,524          |                           | \$2,071,572        |                           | \$1,667,008        |
| <b>CUMMULATIVE COST SAVINGS in 2017, 2018 and 2019 compared to 2014: \$4,429,104</b> |                      |                         |                           |                    |                           |                    |                           |                    |                           |                    |