2019

Collective Impact Approach for Program Design and Implementation: Cleveland Reentry Initiative

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Consultancy Project
Executive Summary

Organization:	Gardner-Webb University School of Education
Project Title:	Collective Impact Approach for Program Design and Implementation: Cleveland Reentry Initiative
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Defense Date:	July 2, 2019
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Amendment History

Version	Issue Date	Changes
Version 1	May 8, 2109	Initial version.
Version 2	May 20, 2019	Additional content and editing.

Approval

This consultancy project was submitted by Katie Munger under the direction of the persons listed below. It was submitted to Gardner-Webb University School of Education and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Gardner-Webb University.

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Abstract

Collective Impact Approach for Program Design and Implementation: Cleveland Reentry Initiative. Munger, Katie, 2019: Consultancy Project, Gardner-Webb University, Digital Commons/prison reentry, collective impact, resilience, program development, community development

Most communities face complex social issues and develop programs to fill these gaps. Using the collective impact approach, a group of community partners formed a collaborative to design and implement a program addressing the needs of individuals returning from incarceration to Cleveland County. This consultancy project outlines the process of developing an evidence-based reentry program using the collective impact approach.

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1 Introduction

1.1 Project Purpose

According to the North Carolina Department of Public Safety, 385 Cleveland County residents were released from prison from July 1, 2016 to June 30, 2017 (DPS Research and Planning, n.d.). Of those released, according to National Institute of Justice statistics, two-thirds will be rearrested within 3 years, equating to approximately 256 individuals in Cleveland County. While 256 persons being returned to the law enforcement and criminal justice system workloads is a significant and costly impact, the ripple effect of broken families, children deprived of parental support, and generational poverty resulting from recidivism is also a significant cost in human capital for our community.

Evidence indicates that more community supports will reduce the recidivism rate (James, 2015). Problems in securing access to combinations of basic living factors like housing, employment, and transportation all contribute to the likelihood that an individual will return to the prison system after he or she is released.

Over the course of the last year and a half, stakeholders in Cleveland County have been working to establish a formalized reentry program in Cleveland County. The initiative has been led by a steering committee whose membership includes the Shelby Police Department, Probation and Parole, a community advocate, and behavioral health personnel.

Several counties across North Carolina have implemented reentry programs to help individuals by providing for these social determinants and to also increase participant access to healthcare resources and other community supports. The steering committee has conducted site visits to three different reentry programs across North and South Carolina as well as reviewed literature and best practices in order to establish an effective reentry program.

The philosophy guiding the reentry program has been collective impact framework. The goal of collective impact is to bring people and organizations together in a structured environment to achieve desired outcomes that exceed the capacity of single services. Cleveland Reentry has been evolving over the last 2.5 years, guided by the collective impact approach, as the core planning team gathered evidence from other operational programs and reviewed effective evidence-based practices that include faith-based principles being demonstrated in many communities.

The vision of the Cleveland County Reentry Initiative has been to reduce prison recidivism while contributing to overall community health and well-being through effective community collaboration. The mission will be accomplished through the coordination of a collaborative network of resources to support

individuals reentering the community from prison.

To showcase the purpose and values of our reentry initiative, the program has been named RESET. **R**estore, **E**mpower, **S**erve, **E**dify, and **T**ransform are concepts that highlight key elements of the RESET program strategies and desired results. This name shines a light for its participants and the community on the opportunity to restart, to set a course again and set it with a different, healthy trajectory. It clearly underscored our philosophy that human beings, organizations, and communities can adjust after initial failures, if we understand the heart and head challenges and seek help with the hope of new success.

1.2   Associated Documents
The documents associated with this project are the multi-year funding strategy.

1.3   Project Plan Maintenance
The maintenance plan for the project included developing a steering team that would oversee and guide the efforts of the project. Members of the steering team included representation from the Probation and Parole office, the Shelby Police Department, NC Works, the faith community, and a community advocate. The steering team met minimally once per month and worked to establish tasks and timelines to help the program progress towards startup and sustainability.

Goals and benchmarks were continuously reviewed and updated by the steering team. The steering team was designed to eventually become the Board of Directors for the program upon the establishment of a formal nonprofit incorporation.

2 Project Scope

This section provides an overview of the project's objectives, both from the partnering organization's perspective and from the student's perspective. The key success criteria and major risks are highlighted.

2.1 Outline of Partnering Organization's Objectives

2.1.1 Objectives

The Shelby Police Department's vision to establish a formal reentry program stemmed from the need for services and support to individuals returning home to Cleveland County from the justice system. The Crime Prevention Officer had firsthand knowledge and experience of gaps in services for these individuals, and the Chief of Police had a vision for establishing a program for addressing these gaps. Dr. Brenneman, who served as the community advocate on the steering team, also had firsthand experience with the difficulties of navigating services and resources, through assisting an individual who was released from prison and returned to Cleveland County with minimal supports in place at the time of release.

2.1.2 Success Criteria

The Shelby Police Department's main objective was to reduce the recidivism rate in Cleveland County. The implications of reducing the recidivism rate are lower crime rates and safer neighborhoods. Another criterion for success was the partnerships developed in the community and with the Police Department's already-existent Call-In program. Call-In is a process established by the Shelby Police Department that mandates individuals at risk of reoffending to come to a specified location and receive information about resources as well as education about the consequences of reoffending. The reentry program would naturally provide a resource on the continuum of services offered to the individuals involved in Call-In and assist in strengthening the Call-In program.

Other criteria for success have been the scalability, replicability, and sustainability of the program. The underlying mission of the development of the model was so that it could be scaled up and replicated in other counties. Structuring the program around evidence-based and evidence-informed practices set the stage for all three of these measures. Incorporating the Substance Abuse Mental Health Administration's (SAMHSA) Eight Dimensions of Wellness that include spirituality and faith as a component of whole-person wellness is an example of such evidence-based practice that helps unify the faith community with the mission of the program and lends itself to creating a sustainable, scalable, replicable reentry model.

2.1.3 Risks

The risks involved in the undertaking of this project were first and foremost to the participants. If the project failed, it could be detrimental to the people in the program who are in need of the supportive services. This would be counter-productive to the partnering organization's goals of reducing recidivism.

Funding risks were also a reality. Without a strong, evidence-based program, the investment into the startup could be lost. This investment includes volunteer and steering committee time as well as county funding that currently supports the program.

Another risk is the loss of trust among community stakeholders. The program relies heavily on collaborative relationships. Incorrectly or inefficiently structuring the program could cause that trust to be damaged, which could endanger the trust among all organizations involved.

2.2   Outline of Student's Objectives

2.2.1 Objectives

The consulting student's objectives were to facilitate the establishment of the reentry program. This included formally convening the steering team as well as the community stakeholders in an effort to align goals and assign tasks. Also included was the development of supporting documents, such as an operations manual and training tools for participants and volunteers.

2.2.2 Success Criteria

Success criteria for the student includes the development of partnerships to support the reentry initiative. It also includes the design and implementation of the reentry program, with continuous feedback loops and opportunities for refinement throughout the process.

2.2.3 Risks

The major risk of the project was the size and scope of the project itself. The establishment of an entirely new program is an undertaking that could only be successful with the support of many partners and volunteers. Ineffectively aligning these resources could have a negative impact, not only on the reentry initiative but could also have a ripple effect throughout the community.

2.3   Definitive Scope Statement

The consulting student will facilitate and assist in the design and implementation of establishing a formal reentry program in Cleveland County, North Carolina.

3 Deliverables

3.1 To Partnering Organization

The deliverables to the Shelby Police Department included the establishment of a community reentry partnership and the development and implementation of the reentry program. The timeline for the community partnership was within a few months of the project start. The Crime Prevention Officer and community advocate were key in establishing this partnership, and it was initiated immediately to begin the strategy of forming the program.

The design and development of the formal program had a timeline of approximately two years and is still ongoing. Deliverables to the partnering organization also include the management of a caseload of justice served individuals. The timeline for developing the caseload was 10 participants in the first year, increasing to a minimum of 25 per case manager in proceeding years.

The development of an operations manual as well as training manuals for board members, staff, and volunteers was also a foundational product. Creating this framework was necessary to structure and guide the activities in the program as well as the input and use of data. This framework was a necessary component in also refining the data and tracking system to be used in the program.

Creation of the multi-investor funding strategy was also a key deliverable that helped onboard partners and investors, while showcasing a strategy for sustainability to those who had already invested both in kind and monetarily.

None of these deliverables were contractual, and timelines had to be adjusted frequently over the course of the last 2 years.

3.2 From Student

Deliverables from the consulting student included the oversight and implementation of the program and supporting documents such as the operations manual and training manuals.

4   Project Approach

4.1   Project Lifecycle Processes

The overall approach to undertaking this project was the collective impact model, which was aligning stakeholders and resources towards a common goal. Without the support and guidance of the community partners and stakeholders, the reentry program would not have the resources needed to be sustainable. The partners included city and county government officials, helping agencies, and the faith community. The common goal in this project was to reduce recidivism and create a healthier and safer community. The major phases of the project were

- Partnership Development – identifying and consistently convening community partners as well as sharing information and resources with these partners;
- Literature Review – reviewing best practices for reentry programs as well as indicators for success and failures for the participants;
- Site Visits – touring other already established reentry models and asking in-depth questions to guide the program toward best practices;
- Program Design – compiling research and knowledge gained from site visits into a formal program that fits the needs of the community;
- Hiring and Staffing – using funding to recruit a staff member to manage the program and the participants as well as supervision for that staff person to ensure that the mission, vision, and values of the program are met; and
- Implementation – accepting participants into the program and reviewing the process for efficacy.

The phases of the project were continuously monitored by the steering team and reported back to the partnering agency as well as the community partners. The steering team also consulted regularly with nearby reentry programs to help vet the design and implementation of the Cleveland County reentry project. Feedback from these consulting agencies was reviewed by the steering team and adjustments to the program were made accordingly and with consensus.

4.2   Project Management Processes

The steering team for the reentry program served as the project management committee for this project. The diversity and commitment of the steering team made this process flow efficiently. The entire steering team formally met monthly to review the processes and ensure that benchmarks were being met. Also, individual meetings with members of the steering team and the consulting student facilitated further process management reviews.

4.3   Project Support Processes

The decision-making process was dictated by the steering team. Results of the literature review and site visits were discussed in-depth in steering team

meetings, and action plans were developed from this work group. Assignments were delegated and followed up on by members of the steering team and then reported out to the partnering organization and the community stakeholders.

4.4   Organization
The team was organized on several tiers. The first tier was the community partnership, from which formed the steering team. The steering team served as the work group that accomplished the majority of the foundational structures of the program and made up the project team.

4.4.1 Project Team
The project team, or steering committee in this case, was formed from the larger Cleveland Reentry Partners collaboration. Team members were volunteers with vested interest in the success of the program. These members included Matt Melvin, Crime Prevention Officer for Shelby Police Department; Sandy Brenneman, Community Advocate; Gina McCants, Chief of Probation and Parole; Will Caldwell, Supervisor at NC Works; Tony Simmons, Faith Representative from Mt. Calvary Church; and Katie Munger, Student Consultant and representative for mental health services.

The project was organized to accomplish work through delegation by skill set. Each individual member of the steering team provided diverse skills to the program. At each steering team meeting, tasks and timelines were clarified with clear role assignments.

4.4.2 Mapping Between Reentry Initiative and Student
The steering team was the central component in the mapping process. Information was created and dispersed from the steering team to the partnering organization and the larger community partnership. Information also flowed upward to the steering team from the participants and the case manager.

5 Communications Plan

The following communications plan outlines the flow of communication from leadership to participants. A major part of the communications plan was to keep the community partners informed and updated about the program, in order to maintain their engagement.

Who - Stakeholder	What info do they need	Why do they need it	When will they get it	How will they get it
Shelby Police Department	Benchmarks and updates for program development	To ensure that timelines are being met and the program is being designed and implemented according to standards	Monthly updates after steering team meetings	The Crime Prevention Officer will correspond regularly with the Chief of Police
	Financial status updates	To strategize about funding sources through the judicial system	Monthly updates after steering team meetings	The Crime Prevention Officer will correspond regularly with the Chief of Police
Community Reentry Partners (Stakeholders)	Updates on progressions	To interact and engage with the reentry program as it develops	Quarterly partnership meetings	The reentry steering team will convene and facilitate quarterly meetings, supplemented with routine emails
	Resource and needs requests	To contribute resources as needed, to the participants of the reentry program	Quarterly partnership meetings	The reentry steering team will convene and facilitate quarterly meetings, supplemented with routine emails
Steering Team	Program updates	To oversee the integrity of the program	Monthly formal meetings, bimonthly individual contacts	In person meetings, emails, and phone calls
	Strategic planning	To make plans for funding sources and operational strategy	Monthly formal meetings, bimonthly individual contacts	In person meetings, emails, and phone calls
	Case studies	To provide insight and make decisions	Monthly formal meetings,	In person meetings, emails, and phone calls

			bimonthly individual contacts	
Case Manager	Case updates and staffing	To provide direction and oversight	Weekly supervision with direct supervisor	In-person weekly standing meeting
	Information from strategic planning sessions with steering team	To offer guidance and structure	Monthly meetings with steering team	Formal, monthly in-person meeting
Mentors/Volunteers	Guidance and training	To provide supervision and support to volunteer mentors	Weekly meetings with case manager	Weekly meetings, in-person or by telephone
	Case staffing	To monitor quality of volunteer mentor supports	Weekly meetings with case manager	Weekly meetings, in-person or by telephone
Participants	Assessments	To gain understanding of individual needs	Upon intake	Interview with case manager
	Life Planning	To develop a person-centered plan for life transformation	Within two weeks of intake	Interview with case manager
	Coaching and mentoring	To develop a support system for participant	Weekly upon intake	In-person and telephone communication with case manager and volunteer mentors

6   Work Plan

The scope of work for this project started on the systemic community-wide level and continued to the individual participant level. The following breakdown outlines the tasks and responsibilities at each level.

6.1   Work Breakdown Structure

Community partnerships were key in developing the structure and support for the program. The community partners were tasked with pooling together resources, identifying gaps and needs for the target population, and sharing information with the collaborative group.

The steering team served as the work group that developed from the larger community partnership. The steering team was tasked with the literature review, site visits, program design, and direct program oversight. The steering team met frequently to share notes and strategize. This team also responded and adapted to changes in the political environment as it related to the development of the program. The steering team was key in developing the funding strategy that procured the funds to hire the case manager. Once this funding was acquired, the steering team also created the job description and recruited and hired the case manager. Currently, the steering team provides oversight of the program and the case manager.

The case manager's responsibilities included managing a small caseload while assisting in the foundational development of the program. Referrals from community partners were sent directly to the case manager. The case manager then interviewed the referred individual to assess his or her needs and to determine goodness of fit for the program. Once the individual had been accepted into the program, the case manager assisted in the development of a life plan and connected the individual to community resources and supports. Additionally, with the help of the steering team, the case manager helped recruit volunteer mentors from the community. The case manager also oversaw the training and supervision of the volunteer mentors, who will help coach and guide the program participants.

Volunteer mentors were community members who donated their time to help mentor program participants. In other reentry programs, the volunteer mentors were essential to the successful reentry of the participants. Volunteer mentors needed to undergo training and commit to a specified number of hours dedicated to volunteering directly with program participants. There was also a required documentation and supervision component to the volunteer mentor tier of the program.

Individual participants needed to also have an active work plan. They must be engaged in creating and implementing a life plan as well as following through with tasks assigned by the case manager.

6.2 Resources

Perhaps the most vital resource was the community partnerships that were established early on. These relationships laid the groundwork for the development of the program by offering community support and guidance. The community partnerships will prove to be essential when gaps are identified. True to the collective impact model, enough community partners convening for a common cause has the potential for community transformation. The Cleveland Reentry Partnership has laid the groundwork for the convention of tackling more systemic issues as they are identified and prioritized.

Volunteers are another key resource in this program. Volunteers formed the steering team in the absence of paid staff members. Volunteer mentors will also drive the success of the program on the participant level; as other reentry programs provide evidence that these relationships are the tipping point in the success of an individual's reentry journey.

Referral sources that feed participants into the program were also necessary to prevent the program from being stagnate and having no impact at all. Referral sources needed to be continuously developed and monitored to ensure quality referral processes and client care. Current referral sources included the jail, Lincoln and Gaston County prisons, crisis units, and the homeless shelter.

Monetary resources included the current county funding of $45,000 and will potentially include grant and foundation awards, state and federal funding, and private donations.

In-kind donations were also an important resource for the reentry program. These in-kind donations included office space and utilities from Cleveland County government and Partners Behavioral Health Management and a mobile phone sponsored by the Shelby Police Department.

7   Milestones

The project milestones directly reflect the work plan. The first crucial benchmark in developing the program was to establish the stakeholder partnership, which was dubbed Cleveland Reentry Partners. The steering team developed as a work group from that partnership. Upon the development of the steering team, the next benchmark was the research phase of the program. This included the literature review and the site visits to other reentry programs in the region. The next phase was for the steering team to take this cumulative information and organize a design for the structure of the program.

The budget process corresponded with the development of the program. This phase included outlining resources needed and staffing requirements. After establishing the budget and receiving county funding, the next phase was the recruitment of a staff person to manage the program. The manager then began the implementation of the program, under the supervision of the steering team. The final phase was to review cases, processes, and procedures for quality assurance and opportunities for improvement.

Milestone Number	Title	Forecast date
1. Cleveland Reentry Partners	Develop a formal community collaborative around reentry	Fall 2017
2. Steering Team	Formalize a work group	January 2018
3. Literature Review and Site Visits	Gather resources and information to start the design of the program	May 2018
4. Program Design	Develop the structure and operations of the program	May 2018- Ongoing
5. Budget Planning	Develop a budget projection to operate the program	May 2018
6. Recruitment	Hire a staff person to manage the program	August 2018
7. Implementation	Begin taking participants into the program	March 2019
8. Process Improvement	Review operations, staffing, and processes for quality assurance and improvement	April 2019- Ongoing

8 Metrics and Results

For the pilot program, the case manager would only serve between 10-15 individuals for the year. These individuals would be selected through a process to be determined by the steering committee. The participants underwent an intake assessment where they were interviewed by the case manager and given a survey to help determine risks and assets. The interview process helped the participant set goals, and the case manager acted as a mentor to help him achieve those goals. The qualitative goals will be somewhat dependent on the quantitative indicators, such as drug use, employment, and housing.

The case manager then collected the following statistics for the program: number of positive and negative drug screens, number of participants employed, length of employment for participants, length of time in the program, number of participants in housing, number of participants with primary care providers, and number of participants receiving mental health and/or substance use services.

The steering committee will need to develop or locate a database that will house both the quantitative and qualitative data. The grassroots organizations that were visited had no electronic records or databases but filed paper documentation. State and federal laws regulating the sharing of protected health information make electronic health databases expensive and often difficult to navigate. The state-based model's data storage system only tracks participants for 3 months, which is not long enough to truly report outcomes. Over the course of the development of RESET, the state of North Carolina has determined to no longer use their data tracking system (CART). In turn, the program began to look at alternative tracking systems like MPOWER and other reentry programs' tracking systems.

The data will be used to determine the impact of the interventions provided by the reentry program. The outcomes on both the individual, program, and community level have the potential to be used to support funding strategies that would help the program remain sustainable and also serve to provide evidence that the program is working.

9 Risks, Constraints, Assumptions

9.1 Risks
The major risks that came along with the development of this program included damage to community relationships, a shortage of resources, funding issues, staffing issues, and lack of referrals. The potential impact of any one of these risks could pose as detrimental to the community, the program, and the participants in the program.

Risk Description	Mitigation Plan (what to do to avoid or lessen the risk occurring)	Contingency Plan (what to do if the risk occurs)	Impact (what the impact will be to the project if the risk occurs)	Likelihood of occurrence (e.g., %, or high/medium/low)
Community relationships	Continuous communication and feedback loops	Meetings and transparent discussions with stakeholders to establish positive interventions	Loss of partnerships and community support	Low
Shortage of resources	Continuous resource development and identification of gaps	Utilize collaborative partnerships to create innovative approaches to fill the need	Lack of support to the participant	Medium
Loss of funding	Form a multi-pronged funding strategy with independent streams	Utilize volunteers	Loss of paid staff	Medium
Staffing issues	Hire wisely and maintain a pool of potential case managers	Utilize steering team members and volunteers for coverage until the issue is resolved	Loss of case management services	Medium
Lack of	Identify and	Provide	Program is	Low

referrals	maintain positive relationships with referral sources	marketing and community education to attract referral sources	stagnant	

9.2 Constraints

Perhaps the most daunting constraint currently continues to be the lack of funding. While the steering committee had developed funding to hire a case manager, the original budget proposal included funds for a coordinator or program director and funds to provide resources to the participants. The steering committee plans to seek state and grant funding; the number of participants who can be accepted into the program is limited until funding is expanded.

The lack of full funding lends to the constraint of not enough manpower. The statistics report that 439 individuals returned to Cleveland County from prison in the last year (DPS Research and Planning, n.d.). To date, reentry has been managed by volunteers in the community and in the police department, but the volume is too high for any one person to be impactful. In order to combat this restraint, the program will need to utilize the faith-based community for both resources and volunteer hours as well as potentially developing mentors from interested organizations.

Another constraint is that there was not an efficient system for data tracking. The community and faith-based programs have limited databases or systems for tracking individuals. Freedom Life, located in Marion, North Carolina, uses a paper system and file cabinets to manage over 100 active participants per year. State models have a funded tracking system, but it only followed participants for 3 months, which was not enough time to prove true efficacy. In addition to developing the case manager who is hired into a mentor and resource guide, s/he will also need to have an established system of tracking the people being served.

9.3 Assumptions

The first major assumption for this project involved the selection process. The assumption itself is that the sample population selected during the pilot would not fall in the percentage that would likely reduce recidivism, regardless of intervention; nor fall into the percentage that will likely remain in the community regardless of intervention. The selection process will need to target the middle percentage to make the largest impact on recidivism rates. In other words, the program would need to select individuals who will likely successfully reintegrate into the community with the help of a case manager but

who are at risk of reoffending without that same support.

Jump Start is a reentry program in South Carolina that reports a 3% recidivism rate. The Cleveland Reentry group made multiple site visits to Jump Start in the late winter of 2018 to explore the program and look for interventions that could be applied in Cleveland County. Jump Start identifies as an "inside outside" reentry program based on Rick Warren's Forty Days of Purpose (Jumpstart, n.d.). Incarcerated individuals participate in the program for 40 weeks (each week equals 1 day in the Forty Days of Purpose). During this time, they are scored either red, yellow, or green. A red score implies that the individual is not being compliant or successful in the program. Yellow indicates that the person is struggling but has potential; and a score of green means that the participant is doing well. Only those with a score of green are selected for the "outside" portion of the program.

The "outside" portion of the program consists of strict involvement for up to the next year for the person reentering from prison. Transitional housing, employment support, and other resources are offered as well as a strong Christian guiding principle. The program's process of selection suggests that it is possible the participants may have fallen in the upper 25% of individuals released, who were at the lowest risk of recidivism, which accounts for the extremely low recidivism rate for program participants. This affirms the assumption that a careful, intentional selection process is necessary for the program to have the most impact.

The next assumptions were program outcomes. The steering committee assumed that the program will reduce the recidivism rate and will also improve the quality of life of the participants. A recent study on recidivism identifies predictors of success to be (in addition to recidivism) abstinence from drug use, employment, positive couple relationships, and financial support for children. According to this study, 80% of the men who met these indicators were not reincarcerated within 24 months post release (Multi-site Family Study, 2017).

Abstinence from drug use, employment, financial support for children, and the overall recidivism rate could be measured in quantitative terms. For example, the case manager could connect participants with resources like substance use treatment and employment opportunities, then track their involvement and progress. Positive relationships and family connections were more quantitative measures, and evidence will need to be collected through interviews with the case manager. In order to positively influence the participants, the case manager would need to act as a mentor to guide them towards a different path than they are accustomed to.

10 Financial Plan

The initial budgeting process was undertaken by the steering committee and has continued to evolve as new funding sources and strategies have come available. The initial budget proposal contained funds to hire a program coordinator and a case manager, funds for administrative overhead, and funds for resources for participants. As the program developed, county funding became available to hire a case manager. The actual operating budget for the 2018-2019 fiscal year became $45,000 restricted to the wages of a case manager. The funding for resources and administrative overhead has been covered through in-kind donations, and the supervision of the program and the case manager remained the responsibility of the steering team.

Initial Cleveland Reentry Budget			
Positions	Annually		
Coordinator	$ 38,002.00	($18/Hour x 40hrs/week)	
Benefits	$ 13,493.00		
Case Manager	$ 31,668.00	(Based on Peer Support payrate= $15hr/40hrs/week)	
Benefits	$ 10,004.00		
Total Staffing	$ 93,167.00		
Support Funding	$ 25,000.00		
Administrative Costs	$ 23,633.40	(20% overhead?)	
In-Kind Donations			
Total Program Budget	$ 141,800.40		

Looking ahead to the 2019-2020 fiscal year, the steering team drafted a projected budget that included acquiring funds for the program coordinator, an additional case manager, administrative costs, training costs, and resources for participants (Appendix). The strategy to obtain the needed funding will be to pursue grants, foundations, local government, state and federal government, and private donations. The steering team will take the lead on further developing the funding strategy and obtaining additional funding.

11 Quality Assurance Plan

As the program planned to launch, drafting the curriculum was the foremost priority. The site visits that were performed were either faith-based, grassroots models or state models. The Steering Committee decided that the best course of action would be to form a hybrid model, to leverage the assets of each model. Additionally, the model would need to be developed around whole-person wellness and resiliency. To bring these elements together, there needed to be an assessment that would measure the needs of the participants and a clear pathway developed as a response to their answers on the assessment.

We were able to find validated assessment tools in each element of the model but did not necessarily want to have participants filling out more multiple assessments, particularly if they were duplicitous. To plan the curriculum, we started with why. Why do we need this information? Then, what will we do with it? Finally, which assessment are we pulling from? At the end of this process, we had a clear guide with sourcing from each validated tool that covered all of SAMHSA's Eight Dimensions of Wellness.

Additionally, we felt as though the participants needed to develop their own life plan, with individual goals, in their own words. The combination of these two tools should give the coordinator enough information to create a pathway for that individual's recovery and reentry process.

The next step will be the launch of the program. Referrals will be taken from the prison system, probation and parole, and from word of mouth. Individuals from probation and parole and from the prison system will already have completed a risk and needs assessment that provides a score for the risk level of the person. Since the program is in its beginning stages, the caseload capacity is limited. In order to make a strategic impact, individuals who have scored in the middle range on the risk and needs assessment will be considered priority for being accepting onto the caseload. The theory behind this is that this sample of the population will benefit the most from the intervention and support of the coordinator.

Individuals who are not accepted for the caseload or just simply need to be linked to resources will be provided with resources and contacts and then connected to a mentoring program, which will be developed through the faith-based network. In other words, no one will be turned away, even though slots in the actual program are limited to 25-30 at full capacity. For the first 6 months of the program, for quality assurance purposes, the caseload will be limited to 10-15.

Once the individual has made contact with the case manager and has completed the assessments, the case manager will develop the interventions that the individual needs to successfully reintegrate into the community. The information on the assessments will provide a baseline for the person's needs. The risk and needs assessment will be performed 3-6 months into the program, and a successful outcome will be a lower

risk score. The coordinator will also reassess the program assessment and individual life plan to ensure objectives are being met.

As previously mentioned, the risk and needs assessment, the program assessment, and the individual life plan will be reevaluated. The reassessment will then be compared to the original assessment to indicate to the coordinator if the needs have changed and if the interventions are working.

Outcomes will not only be assessed on the individual level but also the family and community levels. Individual outcomes should include successful employment and living situations, abstinence from substance use, established healthcare services, and an improvement in life schools like budgeting and financial planning. Family outcomes will be positive relationships with family members and potentially the reunion of families. Community outcomes will take longer to evaluate but will include a reduction in the crime rate, an improvement in the safety of neighborhoods, cost savings in the justice system, and strengthened stakeholder relationships.

The central goal of the reentry program is to reduce the recidivism rate. The current national average is almost 60% for the first year after a person is released. Reentry programs in the area are reporting recidivism rates between 3% and 30%. For the pilot of the program, a healthy goal would be to keep the recidivism rate for participants in the program below 30%, which is below the national average and a reasonable goal when compared to other programs. The small caseload for the first year of action likely will not give us a comprehensive idea of efficacy, unless we approach the outcomes on the individual and family basis first. While the assessments will provide quantifiable data, the life plan and individual/family satisfaction evidence likely will be mostly anecdotal.

The program manager will closely monitor individual outcomes after the program is launched. If an individual is not meeting goals and objectives according to their assessments and life plan, the coordinator will need to develop (with the help of the Steering Committee) additional interventions that my help the participant be more successful. Since the caseload is small, it is paramount that the objectives are closely monitored and that the data are collected and analyzed for correlations. For example, if a participant is consistently missing work, is the reason due to inadequate transportation, possibly on the public or systems level?

This type of data will allow the reentry program to work with stakeholder partners to address needs and gaps for the individual participant and also for the community at large. Stakeholder relationships will also need to be measured and evaluated, potentially as a satisfaction survey, which will indicate the impact the program is having on the community.

The Steering Committee will review participant data on a monthly basis and staff with the coordinator any interventions that may be necessary. After the program has

been launched for a year, the Steering Committee will review annual data and interventions to look for opportunities for organizational improvement, particularly if the program is able to expand its scope after the first year.

Further, the impact of the reentry program goes beyond the reentry initiative itself. The collective impact model used to develop the program should potentially be a sustainable partnership that could potentially address other social determinants in the county. This population impact outside of serving individuals returning to the community from incarceration will need to be identified and nurtured by community and program leaders. The power of collective impact was harnessed to create RESET, but the implications are that a strong collective impact team with a strong backbone organization can tackle almost any societal issue.

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Appendix

	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024
Number new clients served	10	20				
Total clients in service (1-3 yrs.)		30				
Number Mentors	5					
EXPENDITURES	2018-2019	2019-2020	2020-2021	2021-2022	2022-2023	2023-2024
Salaries & benefits						
Prog. Mgr., supervison, partnerships		50,000				
Care mgr, assess., coach CMs & mentors		45,000				
Case manager(s)--clients & mentors	? PBH $?					
Training & volunteer support	7,500	40,000				
Funding & community building						
Administration		25,000				
Contract services						
Case Management Data System						
Licenses	20,000		5,000	5,000	5,000	5,000
Technical support		5,000	5,000	5,000	5,000	5,000
Evaluation/grant writing services	10,000	15,000	15,000	15,000	15,000	5,000
Participants' Resourcing	5,000	20,000	30,000	87,500	150,000	225,000
Operating						
Supplies & Equipment		3,000	3,000	3,000	3,000	3,000
Insurance, accounting, etc.		5,000	5,000	5,000	5,000	5,000
Office, utilities, etc.		5,000	5,000	5,000	5,000	5,000
TOTAL						
REVENUE						
Government						
Shelby City						
Cleveland County						
NC Dept of Corrections						
Federal						
Partners BHM, Medicaid saving						
Participants' Enterprises						
Local Donations						
Individuals						
Churches						
Businesses						
Foundations						
TOTAL						