

2011 Reentry Steering Committee Report and Recommendations



Criminal Justice Coordinating Council
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Acknowledgements

The Criminal Justice Coordinating Council (CJCC) Reentry Steering Committee would like to acknowledge the chairs, co-chairs, and participants of the education and training, employment, physical, mental and substance abuse, housing and juvenile reentry workgroups for their commitment of time, hard work and dedication in furtherance of comprehensive reintegration in the District of Columbia. This report could not have been completed without their vast contributions.

Background

The Criminal Justice Coordinating Council Reentry Steering Committee (Committee), chaired by Cedric Hendricks, Associate Director, Court Services and Offender Supervision Agency and Charles Thornton, Director, Office of Returning Citizens Affairs, is a collaborative forum for federal and local stakeholders engaged in comprehensive reentry strategies for the District of Columbia (the District). This report presents the work and progress of the Committee's five reentry workgroups that were established as a direct result of the 2010 Citywide Reentry Strategic Planning Forum for Public Safety (the Forum), held on December 10, 2010. During the forum, stakeholders discussed and recommended the following priority areas relative to reentry: education, employment, healthcare, and housing. The District provides an array of reentry services for its returning citizen population. The purpose of this effort was to hone in on the areas critical to the success of a returning citizen reintegrating into his/her community.

The Committee met in February 2011 and established the reentry workgroups. The Committee added a fifth workgroup, juvenile reentry, in light of the specialized needs of this population. Each workgroup was comprised of government (federal and local) stakeholders, community based organization and community members with subject matter knowledge and expertise. The five workgroups met monthly to discuss existing issues and develop recommendations to address the problems facing returning citizens. The two most pertinent issues that prevailed throughout the meetings was the need to standardize services that were delivered to returning citizens and the need to strengthen the connections with reentry affairs coordinators at Bureau of Prisons (BOP) facilities.

The following is a brief synopsis of each workgroup and their specific tasks.

- **Education and Training:** Identify and compile a list of entrepreneurial, vocational training, and internships upon release.
- **Employment:** 1) Exploring the feasibility of employer tax credits to encourage District of Columbia businesses to employ returning citizens and 2) linking vocational and

educational programs offered inside penal institutions to current job market trends in the District of Columbia.

- **Physical, Mental, and Substance Abuse (Healthcare):** 1) Addressing legislative barriers to hiring returning citizens in the healthcare field, 2) providing mental health and substance abuse training to District agencies that provide reentry services, and 3) ensuring that mental health resource materials were disseminated to returning citizens and case managers in D.C. Jail and BOP facilities.
- **Housing:** 1) Exploring private housing options for returning citizens and 2) studying the feasibility of an independent housing broker to identify available housing in the District of Columbia.
- **Juvenile Reentry:** 1) Defining juvenile reentry in the District and 2) identifying reentry services and programs for juveniles who have had contact with the juvenile justice system in the District of Columbia.

Education and Training

Educating and training returning citizens not only ensures that they reintegrate into society successfully, but also is an effective way to maintain public safety. The cycle of crime often begins with unfinished education. Individuals who are equipped with the necessary educational and vocational skills are more likely to gain employment after they are released from incarceration.¹ The Education and Training Workgroup focused on identifying the availability of work-based education, vocational training, and internships upon release. In order to identify these resources, the workgroup created a list that outlined the current educational programs in the District available to returning citizens upon their release.

Education and Training Programs

When the workgroup first convened, participants discussed the perception that the District lacked an adequate number of programs to address the needs of the returning citizen population. Yet, after researching the programs available in the District, it was discovered that there were several programs, offering a variety of services to returning citizens. Due to this discovery, the workgroup decided to focus on a thorough examination of these programs to determine if the range of service offerings were meeting the needs of the individuals they served. The workgroup participants developed a chart detailing the array of programs throughout the District (See Appendix A). The chart contained the following information: name of educational program, contact information for the program, ages of individuals accepted, criminal record restrictions, required educational level (high school diploma or GED), associated program cost, industry of program, and completion and placement rates. The workgroup reviewed and edited the chart.

¹ National Reentry Resource Center. <http://www.nationalreentryresourcecenter.org/faqs/employment-and-education>.

Education and Training

Workgroup Chair:

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Opportunities Industrialization Center of
Washington, D.C.

Recommendations:

- Create collaboration among educational/vocational programs and potential employers
- Standardize educational programs and vocational training offered in the District
- Create system to evaluate educational/vocational programs

Several participants were able to provide additional information regarding programs and program requirements. For example, participants recommended the addition of labor union training programs, because many have pre-apprenticeship and apprenticeship programs. Program participants also recommended the inclusion of the certification information that a returning citizen would receive upon completing the program. The inclusion of this certification information may assist returning citizens and case managers in identifying programs that are successful in training individuals and equipping them with the certification(s) necessary to compete in the job market.

Educational and Training Program Assessments

This workgroup identified educational programs and employment opportunities that assist returning citizens in the successful community reintegration. In order to accomplish this goal, it was important to assess the programs that returning citizens are currently referred to upon their release. While the workgroup appreciated the importance of assessments and evaluations, it recognized that assessing these programs was beyond their knowledge base. Therefore, participants discussed programs that were identified as ‘successful,’ looked for certain common attributes, and suggested best practices for future programs. The workgroup also discussed which entity would be best suited to assess the reentry programs in the upcoming years.

After identifying the programs that currently exist, participants noticed service gaps and recommend further programming to fill these gaps. The workgroup began discussing the general entry requirements for many of the programs and attempted to identify hurdles that would hinder a returning citizen from enrolling in a program. The workgroup acknowledged the variety of programming available to returning citizens, offered by various organizations as well as government agencies, many of which are funded by grants. Most of these programs offer admission to individuals above the age of 18. In 2011, over 2,000 individuals returned to the District from the BOP facilities and over 17,000 individuals were

released from DOC.² As of December 2011, 15,982 individuals were under the supervision of the Court Services and Offender Supervision Agency (CSOSA). The average of a returning citizen under CSOSA supervision is 39 years. According to CSOSA, approximately 40% of individuals under their supervision had no GED or high school diploma.³ At DOC, approximately 55% of the population is between ages 21 and 40. Of the 94% of males inmates that declared an education, approximately 39% self-reported having obtained less than a GED or high school diploma.⁴ In order to address the needs of this mature population, programming that is specifically tailored to an older age group is essential. Therefore, it is important to refer individuals to programs that can accommodate this population.

Participants discussed recent developments in the District employment market and alerted the workgroup to upcoming job opportunities. For example, the workgroup was informed of a job opportunity with Verizon for 400 traffic flaggers, an area where there are currently no programs that train individuals in this field. Participants acknowledged the importance of accurately forecasting industry trends to prepare and train returning citizens for future job openings. The best way to help ensure that the current training programs meet the needs of returning citizens are for the programs to be aware of future District developments that will create job opportunities.

In order to alert community based training programs about potential job opportunities, relationships with agencies that have insight into the District job market must be formed. Some participants suggested strengthening the partnership between District agencies. For example, when new developments arise that will likely create job opportunities in the District, the Office of the Deputy Mayor for Planning and Economic Development could notify the Department of Employment Services (DOES), who could then inform training programs that may specialize in that particular industry. This would help to create a network that informs returning citizens about upcoming job opportunities in the District in a timely manner. Additionally, new opportunities could also be posted on the Washington, D.C. Economic

² Court Services and Offender Supervision Agency data and Department of Corrections data.

³ Court Services and Offender Supervision Agency, Offender Profile for Washington, DC (August 2011)

⁴ Department of Corrections, Quarterly Demographics and Statistics (October 2011)

Partnership (WDCEP) website. The WDCEP website allows the public to search new development activities and projects in the District by ward or zip code.

Finding: Educational and training programs should be uniformly evaluated and monitored to ensure they reflect the current job market in the District and offer returning citizens the opportunity to obtain/ enhance relevant skills.

Recommendation

In addition to the tasks above, the Education and Training workgroup formulated recommendations to enhance and improve the educational and training programs available for returning citizens in the District.

- **Partnerships.** The workgroup acknowledges that cooperation of several different agencies and organizations is required to provide effective training programs that equip returning citizens with the necessary skills to become successful. Therefore, the workgroup recommends that certain agencies within the District join forces to better address the educational and training needs of returning citizens. In particular, the existing educational and training programs need to be connected with companies that are hiring. In an effort to decrease the overabundance of trained individuals without jobs corresponding to their skills, programs should be tailored to specific job opportunities. Additionally, training individuals for a specific job opportunity would help create a pipeline for employers seeking applicants. Furthermore, agencies like DOES and the WDCEP, who are often kept abreast of all new employment developments in the District, could partner with educational and training programs to determine if they are graduating individuals with the necessary skills to obtain employment in a particular industry. Lastly, educational and training programs should be encouraged to collaborate with employers, the Small Business Administration, and the Office

of State Superintendent for Education (OSSE) to discuss the possibility of creating subsidized employment programs for returning citizens that have completed training programs.

- **Standards.** Workgroup participants recommend training and educational programs that receive District subsidies or grants, be certified by an accrediting body. It was acknowledged that if a program is certified, there is oversight and monitoring of the effectiveness of the program. The consensus was that there should be a heightened interest in the quality of services that are provided to District residents. This concept is already present in federal government. For example, CSOSA and United States Probation will only refer returning citizens they supervise to training programs that are certified. To ensure that returning citizens are receiving substantive education and training, there should be a push to certify all of the programs. In addition to providing returning citizens with education and training skills for a specific job, the workgroup stated that ‘soft skills’ that increase an individual’s likelihood of employment should also be incorporated into these programs. These employability and career success standards should include training on time management, personal hygiene, and office setting decorum.
- **OSSE evaluations.** A critical function of OSSE is to monitor their sub-grantees that receive funds from the United States Department of Education (DOE) as well the District Government. Because the majority of the programs on the list are sub-grantees, the workgroup recommends obtaining formal evaluations from OSSE of the programs they have evaluated and assessed. These evaluations should be conducted on an ongoing basis and continued funding should be tied to satisfactory evaluations.

Employment

Returning citizens increase their chances of obtaining and retaining a job if there is an array of programs that meet their needs and if they are equipped with the essential skills to excel in a field.¹ The Employment workgroup focused on exploring the feasibility of creating employer work tax credits to encourage District businesses to employ returning citizens and the linking of educational and vocational programs offered in penal institutions to current job market trends in the District. It is important to note that a synergistic effort was underway by the Council for Court Excellence (CCE) which focused on employment barriers for persons with a criminal record. CCE published a report of its findings in November 2011.²

Employer Tax Credits

When the workgroup convened, the members agreed that it was important to make employers aware of the benefits and incentives of including returning citizens within their pool of candidates for hire. DOES participants informed the workgroup that the federal government currently offers the Work Opportunity Tax Credit (WOTC). DOES is the District agency that qualifies individuals for the tax credit. The WOTC is an employer-friendly federal tax credit for hiring job seekers most in need of employment. Individuals in a specific target group such as veterans, ex-offenders, and Temporary Assistance for Needy Families (TANF) recipients qualify to participate in the tax credit. The tax credit is currently marketed to employers through DOES and Department of Labor (DOL) websites, which contains information about how the credit works and the steps necessary for an employer to get certified

¹ National Reentry Resource Center. <http://www.nationalreentryresourcecenter.org/faqs/employment-and-education>.

² *Unlocking Employment Opportunity for Previously Incarcerated Persons in the District of Columbia*, <http://www.courtexcellence.org/>

Employment

Workgroup Co-chairs:

Charles Jones

Associate Director
Department of Employment Services

Charles Thornton

Director
Office on Returning Citizens Affairs

Recommendations:

- Increase marketing efforts to publicize employer and employee tax incentives
- Create method to evaluate educational/vocational of programs offered within institutions
- Forge stronger partnerships with Bureau of Prisons' Reentry Affairs Coordinators

to receive the credit. An employer must request and receive certification from DOES that the new hire is a member of one of the nine WOTC target groups before that employer can claim the WOTC on its federal income tax return. In the District, DOES assists employees with the WOTC certifications and paperwork. Once an employee has been certified, the Internal Revenue Service (IRS) determines the total amount of the credit, which will be a maximum of \$2400 for each new adult hire, \$1200 for each summer youth hire, \$4800 for each new disable veteran hire, and \$9000 for each new long-term TANF-recipient hired over a two year period. DOES indicated that the number of employers that took advantage of the tax credit in the District is information that resides with the IRS. DOES, however, did inform the workgroup that many employers find the WOTC process to be too burdensome and the time required to realize the benefit too lengthy. Despite this, the workgroup recommended creating marketing strategies to reach this employer population.

The workgroup acknowledged the need to market the WOTC to small business owners who may not be taking advantage of the credit. One way was to advertise the WOTC through DOES First Source Agreement Program (First Source). First Source is a division of DOES that assures city residents priority for new jobs created by municipal financing and development programs. Since employers in the District that are funded in whole or in part with District Funds must log into the First Source website, adding the WOTC link may become an opportunity to educate employers that are unfamiliar with the WOTC. DOES is also in the process of partnering with the Department of Consumer Regulatory Affairs (DCRA) to inform new businesses of the incentive during their registration process. Workgroup participants also discussed the possibility of implementing additional District sponsored tax credits to incentivize employers in the District.

The workgroup reviewed other states and municipalities that currently offered tax credits and incentives to employers who hire returning citizens. Since statistics on employers that are utilizing the credits and the correlation of the credits and incentives to reentrant employment rates were not provided by the states, the success of such programs was not evident. Therefore, the workgroup decided it was best

to focus their efforts on currently available programs, like the WOTC, that have not been utilized to their full potential. The workgroup believed it was important to enhance the initiatives that the District has in place before embarking on new ones.

Educational and Vocational Programs in Prison and Jail

This workgroup was also tasked with highlighting the current educational and vocational programs offered by the Department of Corrections (DOC) and the Federal Bureau of Prison facilities (BOP). In addition, it was determined which programs led to employment in high-growth industries in the District. A list of high-growth industries, as defined by DOES, including the BOP and DOC programs that correspond to those industries, is in the process of being compiled. In addition to the BOP and DOC programs that are linked to high-growth industries in the District, the workgroup recommended including the District's top Non-Degree, High-Demand Jobs, as reported by DOES. During the meetings, participants expressed the need for educational and vocational programs offered in penal institutions to equip returning citizens with skills that will correspond to the types of jobs that are currently available in the District.

Furthermore, workgroup participants discussed the need to improve the current job training programs to better inform those incarcerated of the best programs that may lead to employment upon returning to the District. An example of linking educational programs with potential job openings is the newly forged collaboration between CSOSA and the DOES First Source program. CSOSA and First Source representatives agreed to help facilitate the application process of those incarcerated at Rivers Correctional Institution (Rivers), who have completed training programs, so that they are linked to employment immediately upon release. DOES provided CSOSA with a paper application that would allow Rivers inmates to register for the First Source program prior to their release. The applications have been forwarded to the Rivers facility and inmates are in the application process.

The workgroup participants discussed which entity is in the best position to distribute this list and provide information to individuals seeking enrollment in programs at the BOP and DOC. Participants expressed their belief that inmates at DOC would most benefit from enrollment if they had longer sentences to serve, providing them with more time to participate in the program. Providing the information and list to inmates at the various BOP institutions would be a more difficult task. Workgroup participants suggested focusing on the BOP facilities with higher concentrations of District inmates, like Rivers. Another suggestion by participants was to enhance the information available to the Reentry Affairs Coordinators (RACs) at each BOP facility through coordination with the BOP's Mid-Atlantic Reentry Affairs Coordinator and the National Reentry Affairs Branch. By providing better information, it will forge a stronger connection with the RACs at the BOP facilities, RACs will be better educated about the District and its programs geared towards returning citizens. Therein, RACs will be better equipped to provide consistent and relevant information to inmates regarding high-demand jobs in the District.

'Hot Jobs' in the District

High demand occupations are those approved by the District's Workforce Investment Council as occupations that are projected to add a substantial number of new jobs to the economy or existing occupations being transformed by technology and innovation requiring new skills sets for workers.⁷ DOES Project Empowerment Program (PEP) develops subsidized and unsubsidized employment opportunities for its participants in the aforementioned high demand occupations. PEP has been successful in placing returning citizens in various industries such as: construction, warehousing, maintenance, custodial services, school maintenance, and hospitality. Historically, approximately 67% of the PEP participants self-report that they have some form of criminal history.⁸ PEP also provides supportive services, basic education, job coaching, employability, life skills, and limited vocational

⁷ 'Hot Occupations.' Transitional Employment Programs, Department of Employment Services (2011)

⁸ 'Hot Occupations.' Transitional Employment Programs, Department of Employment Services (2011)

training, as well as job search assistance. Recently, PEP has undergone some changes and updated eligibility requirements. In order to be eligible, an individual must meet certain requirements which include: being between the ages of 22 and 54, currently unemployed and not receiving government assistance like TANF, SSI, or unemployment, and a District resident. In addition, all potential PEP participants must demonstrate a substantial need for intensive employment assistance by exhibiting specific barriers to unemployment.

Best Practices

The workgroup also examined successful reentry initiatives in other cities. In particular, Newark, New Jersey, a city that is profoundly impacted by incarceration and recidivism, received a Prisoner Reentry Initiative grant from the U.S. Department of Labor for its Newark Prisoner Reentry Initiative (NPRI).⁹ Under this two-year, \$2 million grant, with a match from philanthropic partners, the City has provided more than 1400 formerly incarcerated individuals with job development, job retention, case management, and mentoring services. NPRI credited the success in part to its procurement and vendor process, where all contracts are performance-based, and no agency will receive the full amount of the contract without meeting aggressive benchmarks set by the City. Participants were impressed by the NPRI model and plan to conduct further research to explore the possibility of implementing a similar initiative in the District.

Another city with an innovative approach to the employment of returning citizens is Chicago, Illinois. A delegation comprised of District and Federal agency partners visited the Safer Foundation. The Safer Foundation provides employment assistance through a focused approach to people with criminal records, and in turn has helped lower the Illinois recidivism rate over the last three decades. The Safer Foundation enrolls individuals in an educational and employment services institution with a structured curriculum. Through intensive case management, supportive services, and placement

⁹ Overview of the City of Newark's Office of Reentry Handout.

assistance, individuals have been very successful in finding and retaining jobs.¹⁰ Participants were able to learn about the organization's operations model, tour their program facilities, and explore the model for application to the District.

Finding: Further education and training for both employers and returning citizens about the benefits of hiring returning citizens is needed. Additionally, standardization of occupational skills training programs should be implemented.

Recommendations

The employment workgroup formulated the following recommendations to enhance and improve the availability of employment options for returning citizens in the District.

- **Marketing.** The workgroup recommends that DOES create aggressive marketing strategies to inform both potential employers and employees about the WOTC. One such marketing strategy would be to enhance the First Source web page to include the WOTC information. This would entice employers to inquire about the benefits of the WOTC. Another way the WOTC can be marketed is to create a video that explains how the WOTC works in simple terms. Other videos have been created by agencies and organizations in the District, and have had success when played in waiting rooms of District and Federal agencies. Furthermore, displaying a video explaining the WOTC in CSOSA and DOES waiting rooms would also be an advantageous way to inform individuals about the benefits of the WOTC. Several participating agencies agreed that a one page fact sheet that can be provided to returning citizens prior to their release from incarceration, likely through the resource packets that are sent to inmates by CSOSA, would also be an effective way of alerting inmates to the many incentives awaiting them upon release (See Appendix B and Appendix C). The WOTC information could also be incorporated into the existing programs and workshops that are

¹⁰ Safer Foundation 2010 Program Update, <http://www.saferfoundation.org/files/documents/ProgramUpdateWeb.pdf>

- conducted by DOES. Lastly, a concerted effort should be made to establish a relationship with the Reentry Affairs Coordinators at the BOP and DOC. These individuals are the direct link to inmates, and if a working relationship is established, it is likely that they will help ensure that inmates receive information concerning the District job market and opportunities.
- **Evaluation.** The workgroup recommends that measures be taken to improve the current job training programs that receive District grants and subsidies. Not only should occupational skills training programs be thoroughly evaluated and standardized, but if possible, an educational model should be created to serve as a standard. This would best be accomplished through the collaboration of agencies like OSSE, the BOP, DOC, and DOES. With input from these agencies, programs that receive District funding will be assessed to determine if they maintain a curriculum that is timely, accurate, and sufficient enough to assure that graduates and trainees will be employed. Furthermore, such evaluations would help determine if the current programs are truly effective or if there is a need to create new programs that will adapt to the changing job market.
 - **Model Training Program.** In order to provide returning citizens with successful training programs, the workgroup recommends the creation of a ‘model’ vocational training program. Several participants discussed a workforce development and educational training pilot program that resulted from the collaboration of OSSE, DOES, Community College of the District of Columbia, Congress Heights Training Center, and CSOSA. The DC Hospitality Training and Internship Program (HTIP) provided 61 offenders with a ten-week educational instructional course, an opportunity to take a hospitality certification exam, and work a ten-week paid internship in the hospitality industry. HTIP was funded in part by the Department of Education Workplace and Community Transition Training for Incarcerated Individuals grant, the District Justice Grants Administration, and DOES. Workgroup participants stressed the importance of offering programs that would not only provide training skills for the identified industry, but also emphasize individual accountability and teach returning

citizens how to endure even after the program has ended. The following elements are crucial to a successful training program:

- Training programs that produce certifications in industry recognized professions.
- Programs that have the capacity to launch returning citizen to the next step.
- Training programs that incorporate both education and actual on-the-job training experience.
- Multi-sector collaboration.
- Training program that provide a stipend to sustain the individual through the duration of the program.

If successful, the model training program could be replicated by current programs available in the District, and eventually serve as the benchmark for all programs offered to returning citizens.

Physical, Mental and Substance Abuse

According to the National Reentry Resource Center, in a study of more than 800 individuals released from United States prisons, eight out of ten men and nine out of ten women had chronic health conditions requiring treatment or management.¹¹ In the District, the prevalence of chronic health conditions reported by the Unity Healthcare (Unity) Reentry Health Center is staggering. Of the individuals returning from out of state prisons seen by Unity medical staff at the Reentry Health Center in 2009, 21% were positive for hepatitis C, 35% had hypertension, 22% had hyperlipidemia, 12% had asthma, 12% had diabetes, and 6% were infected with the human immunodeficiency virus (HIV).¹² With health statistics like these, it is imperative that the medical needs, as well as the mental health and substance abuse needs, of individuals returning home from incarceration are adequately addressed. This workgroup focused on evaluating the current continuity of healthcare for returning citizens, ensuring the dissemination of resource material to returning citizens and case managers at DOC and the BOP facilities, providing mental health and substance abuse training to District agencies that provide reentry services, and addressing the legislative barriers to hiring returning citizens in the healthcare field.

Continuity of Healthcare

The Reentry Steering Committee charged the workgroup with three tasks, but the participants felt that the continuity of healthcare was the cornerstone of all health related reentry issues, therefore added it as one of its tasks. The continuity of healthcare refers to the need to ensure returning citizens' health care

¹¹ National Reentry Resource Center. <http://www.nationalreentryresourcecenter.org/faqs/health>

¹² Unity Healthcare Reentry Health Center statistics.

Physical, Mental and Substance Abuse

Workgroup Chair:

Nancy Ware

Director

Court Services and Offender Supervision Agency

Recommendations:

- Ensure communication between penal institutions and medical facilities in the District for continuity of care services
- Formulate employment policy changes to increase hiring of returning citizens in the healthcare industry
- Implement standardized protocols for the dissemination of healthcare information
- Institute best practices of healthcare for case managers working directly with returning citizens

needs and services are continued upon their release. Oftentimes, the transfer of medical records or medical history is noted as the optimal way to ensure the continuity of healthcare. This transfer of information is essential to make certain that returning citizens, especially those with chronic health conditions, receive appropriate and necessary medical treatment. When the workgroup convened, returning citizens shared some of their medical-related experiences during incarceration and after release. Their experiences were a testament to the immense number of individuals returning to their communities with chronic medical conditions. Furthermore, some of the participants from the National Homecomer's Academy drafted recommendations derived from the input of their fellow Homecomers (See Appendix D).

Workgroup participants discussed ways in which continuity of care issues could be best addressed. The overarching concern echoed by agencies, organizational representatives, and returning citizens in the workgroup, was the infrequency and uncertainty of the release of medical records once an individual leaves incarceration. Participants agreed that if returning citizens were in possession of their medical records, or if a system was in place for medical records to be transferred to health care providers in the community, the continuity of care would improve. Since Unity is the contracted healthcare provider for DOC, and both agencies use electronic health records, participants explained that individuals released from DOC experience a smoother transition than those released from the BOP. This is because the health care providers returning citizens saw while incarcerated at DOC are likely the same healthcare providers they see after release, or at least within the same practice group.

The real impediment to the continuity of care of returning citizens is demonstrated when they are released from the BOP without their medical records. Oftentimes, returning citizens are unable to inform their health care providers of their past illnesses and medications. It should be noted that inmates may receive a copy of their medical records to be furnished to them upon release, but inmates must make this request. The majority of inmates do not make such a request, however the BOP is working to educate inmates on the necessity to make the request. As a direct result of the workgroup meetings, an

intermediate solution was created to address this issue. The BOP has agreed to send the Bureau Electronic Medical Record Exit Survey (BEMR) to Unity Healthcare, upon submission of a waiver by the former inmate. The BOP is looking at ways to enhance the transmission of the BEMR to other agencies, like CSOSA and U.S. Probation. The workgroup recommends exploring the possibility of a permanent solution that would provide such access to other medical facilities that serve returning citizens.

Health Resource Information at DOC and the BOP

In order to prepare for release from incarceration, returning citizens need to be aware of their current health conditions and the health care resources available to them. The workgroup determined that an effective mechanism for dispensing this information to inmates, while they are still incarcerated, needs to be created. In addition, measures should be taken to make sure that the information sent to penal institutions is accurate and received in a timely manner because several participants stated that the information provided to inmates in the past was outdated or incorrect. The workgroup discussed creative ways to relay information to inmates, like creating an information card with all of the important health-related service agencies that can provide assistance to returning citizens and/or collecting fact sheets from agencies to include in a resource packet that is distributed to inmates (See Appendix E). Participants stated that the packets can easily be delivered to DOC. Since CSOSA often communicates with the BOP facilities, CSOSA can send the informational packets to the facilities. Providing these packets can assist RACs in ensuring information is available on the discharge planning and reentry process for inmates at the BOP facilities, when addressing healthcare needs. Case managers are responsible for connecting returning citizens with services they need upon their release, and in order to do their job effectively, they must be kept abreast of programs and services that would best suit the needs of their inmates. Participants suggested standardized pre-release planning training for case managers to furnish them with the most up to date information and resources available.

Currently, there are efforts by agencies to provide information to inmates prior to their release. For example, CSOSA conducts an annual ‘Community Resource Day,’ which consists of a live video conference to the BOP Rivers facility, which has the highest concentration of District inmates. During the video conference, individuals from various District and Federal agencies presented information about reentry and also answered questions from inmates. Ultimately, CSOSA would like to broadcast the presentation to more facilities. This year, CSOSA was able to broadcast the presentation to the Fairton BOP facility, but due to technical issues and security concerns, there were no inmates in attendance at Fairton. Staff then provided the information to the inmates. An alternative means of delivering this vital information needs to be explored to address the security concerns in the future. In addition, participants stressed the importance of informing inmate’s of their need to serve as their own advocates in regards to their medical needs.

Reentry Health Services

The care an individual receives after release from incarceration is equally important to the care they receive while incarcerated. Participants agreed that in order to better the chances of success after release, protocols and standardized healthcare programming within DOC and the BOP need to be instituted. Discharge planning services are critical to the effective transition of returning citizens from incarceration to community life. At DOC, for example, the number of discharge planners has been cut from twelve to three. This reduction, which was due to budget restraints, created a strain on the individuals that provide the essential transition services to inmates. Participants expressed the need to address reapplying for social service programs like social security benefits, Medicaid, and TANF, since all such services are halted once an individual becomes incarcerated. Reinstating these services can take upwards of a year or longer, but with proper planning and guidance, the process may be started while an individual is still incarcerated to ensure that their benefits are in place once released. Participants also recommended utilizing the discharge planners and case managers at DOC and the BOP to provide inmates with such information. For the BOP, it is recommended that the information be sent through the

National Reentry Affairs Branch for distribution to the Reentry Affairs Coordinators to provide to the inmates.

The workgroup also discussed establishing best practices for the quality of services that healthcare and community providers offer to returning citizens upon release from incarceration. The workgroup was informed of the high percentage of returning citizens with co-occurring mental health and substance abuse disorders. The workgroup recommends the institution of evidence based practices as well as expansion or training and development of clinical staff in these evidence based practices. Despite the high rate of co-occurring mental health disorders, mental health clinician training for the Integrated Dual Disorder Treatment (IDDT) approach, a model that acknowledges that treatment for mental health and substance abuse disorders needs to be offered at the same time and not treated separately or sequentially, is lacking. The co-occurring mental health training program that was previously offered within the District has since been discontinued due to lack of funding. Another area where the quality of services could be improved is the Dialectical Behavioral Therapy (DBT) and trauma-specific treatment services. Due to the fact that large populations of incarcerated individuals in the District are survivors or witnesses of physical and sexual abuse, there is a need to incorporate the DBT model in treatment services. Currently, the DBT model is not available for any public mental health consumer in the District, despite its nationwide acceptance as the preeminent treatment model. Participants recommended exploring funding options to institute the aforementioned models in the District (See Appendix F).

While much work must be done to address the varying needs of returning citizens, some work to connect returning citizens to services has already begun. The SSI/SSDI Outreach, Access and Recovery (SOAR) program helps states increase access to mainstream benefits for people who are homeless or at risk of homelessness. The application process for these benefits begins before an inmate's release. Workgroup participants discussed the benefit of agency collaboration to implement a similar program at DOC. Additionally, workgroup participants shared other initiatives that are underway to assist returning citizens upon their release from incarceration. For instance, University Legal Services (ULS) is currently

collaborating with the BOP to implement a pre-release transition planning model. The model is focused on assisting inmates with psychiatric disabilities transition from prison into the community. ULS has entered into a memorandum of understanding with the BOP and currently operates in two BOP facilities and one halfway house. In addition to the pre-release transition planning model, the F.U.S.E. program currently connects inmates with supportive housing upon their release from DOC. To be eligible for enrollment, inmates must have a mental illness and three shelter stays along with three jail stays in the past three years. Currently, the program is a collaborative effort of ULS, the Corporation for Supportive Housing, and DOC.

Barriers to Employment in the Healthcare and Medical Industry

Although this workgroup's discussions centered on the state of healthcare needs and services of returning citizens, the importance of employment in a returning citizen's transition into the community was also given attention. The workgroup also examined employment barriers that exist in the healthcare field. Currently, there are two legislative barriers that hinder or prohibit individuals with a criminal record from obtaining employment in the healthcare field. Under the Unlicensed Health Care Criminal Background Check Act of 1998 (D.C. Law 12-238; D.C. Code § 32-1351, hereinafter referred to as 'the Act'), there is a seven year bar for persons convicted of certain offenses. The Act requires non-licensed individuals seeking employment in healthcare and community residence facilities (i.e. hospitals, maternity centers, nursing homes, group homes for mentally retarded persons, hospices, home care agencies, ambulatory surgical facilities, and renal dialysis facilities) submit to a criminal background check. Participants acknowledged that many of the offenses listed, like murder, arson, assault, battery, and robbery, were serious in nature and warranted careful consideration and/or even exclusion. On the other hand, some of the offenses, such as drug offenses and simple assault, could be reevaluated. For example, because a simple drug possession offense does not result in bodily harm, such offenses should be examined to determine whether it should continue to be an exclusionary factor for the occupation. Offenses should bar returning citizens from employment only if there is a public safety goal.

The Addiction Prevention and Recovery Administration (APRA) employment policy permanently bars individuals with certain offenses from working in APRA-regulated substance abuse facilities. The D.C. Department of Health Regulation 2326.3 states that ‘a substance abuse treatment facility or program shall develop and implement policies and procedures to ensure that staff: (b) have been screened through established facility mechanisms to determine that the staff is not known to have committed physical abuse, sexual abuse, child abuse/neglect, or a felony involving crime against a person.’ This policy does not provide any discretion to the agency, or an opportunity for the applicant, to prove why their conviction poses no risk to the employer, and how it will not affect their ability to perform the job duties. The workgroup agreed that flat bans against certain types of offenses do not allow a person with exceptional circumstances to provide an explanation for their conviction and suggested creating a venue for returning citizens to mitigate their criminal histories.

Finding: Certain policy changes within the District and enhanced discharge planning processes would contribute to better continuity of care for returning citizens.

Recommendations

The workgroup propose the following recommendations in order to improve the quality of healthcare provided to returning citizens in the District.

- **Enhancing continuity of care.** Once the Corrections Information Council (CIC) is instituted, the workgroup recommends directing issues regarding the BOP health care policies to the CIC. This body was originally created to provide oversight and monitoring of District inmates in the BOP custody. With its reinstatement, the District will have an entity that will help to ensure that proper medical services are rendered while an inmate is incarcerated. The workgroup also recommends equipping case managers and/or reentry coordinators with the necessary information regarding health care in the District to be dispensed to inmates. Armed with the pertinent information, case

managers or reentry coordinators are expected to educate inmates about the medical process and what documents they must request prior to discharge.

- **Policy changes.** To address the healthcare employment barriers, the workgroup recommends urging the D.C. council to review the disqualifying offenses in the Act. If the offense limitation serves no public safety goal, then the returning citizen should no longer be disqualified from employment. The workgroup also recommends creating a waiver process under the Act, as well as for the APRA policy, which would allow an individual who has one of the listed disqualifying offenses in their criminal history to apply for a waiver, provided there are mitigating factors in their case. This recommendation could be completed through the rulemaking process, because the Mayor is granted the authority to promulgate rules under this statute. The Transportation Safety Administration (TSA) has implemented a similar program which allows for workers who have a disqualifying offense to petition to remove the offense based on evidence of rehabilitation and their employment record. The TSA has also removed certain felony convictions from their policies in an effort to prevent unfair treatment and to more effectively screen for actual security risks.
- **Standard protocols.** The workgroup recommends standardizing the medical record release process to ensure that inmates are able to continue receiving proper healthcare after they are released. Ideally, the workgroup recommends establishing a uniform communication method for the BOP institutions and healthcare providers. The workgroup recommends replicating the agreement between the BOP and Unity with other healthcare providers that serve returning citizens. The workgroup also stated that a standard pre-release process should be created. The process would ideally begin eighteen months prior to release, with certain steps for inmates and case managers at twelve, nine, six, and three months prior to release.
- **Best practices.** The workgroup believes that research-driven, best practices are the most effective way to address the healthcare needs of returning citizens. Therefore, the workgroup recommends the ongoing trainings for case managers and healthcare providers, in order to keep

them abreast of the latest developments in their respective fields. The workgroup also recommends the creation of ‘best practices’ and ‘quality of services’ criteria for healthcare providers. For example, the workgroup stated that the Department of Mental Health (DMH) or another agency should assist in sponsoring training to encourage mental health providers to become certified in DBT and IDDT. The workgroup also recommended collaborating with Core Service Agencies that have a high population of returning citizens to ensure they are equipped with the best tools to address self-destructive behavior. The workgroup also recommended utilizing institutional resources to fund therapy programs for those transitioning from incarceration.

Housing

Securing and maintaining housing is vital to an individual's successful reentry from incarceration. In the District, there is a severe shortage of affordable housing. Stable housing is oftentimes considered the gateway to obtaining employment and other supportive services.¹³ For that reason, it is crucial that affordable housing options are identified and available for returning citizens in order to reduce their chances of returning to prison or jail and ultimately become productive citizens of the District. The Housing Workgroup focused on exploring private housing options for returning citizens and the feasibility of creating an independent housing broker or ombudsman to identify available housing on a continuous basis in the District for returning citizens.

Housing Options

When the Housing Workgroup first convened, participants discussed the best method to create a comprehensive listing of all housing options available to returning citizens (See Appendix G). Workgroup members expressed the common issues that many returning citizens face when searching for housing. It was determined that returning citizens may have different housing needs that must be taken into consideration when placing them in housing. For example, individuals may have substance abuse issues, mental health issues or children that may reside with them upon their release.

In an effort to design the housing chart, the workgroup first identified the types of housing available to returning citizens to include in the chart. The housing types selected were the most common sources of housing for returning citizens as well as the options with programming components thought to be most beneficial to the returning citizen population. The housing types included: shelters (both

Reentry Housing

Workgroup Chair:

Rada Moss

Corporation for Supportive Housing

Recommendations:

- Coordinate outreach efforts to distribute housing chart
- Collaborate with DCHA to educate public on policies regarding returning citizens
- Facilitate Housing Assistance Program

¹³ National Reentry Resource Center. <http://www.nationalreentryresourcecenter.org/faqs/housing-and-reentry>

overnight and temporary), transitional housing, single room occupancy, permanent supportive housing, public housing, and lastly halfway houses. The inclusion of halfway houses in the chart was for informational purposes only since halfway houses are only available for individuals that are under supervised release and required to reside in the halfway house until the completion of their sentence. Private housing was also not included because it was not considered a feasible option for returning citizens due to the cost associated with renting an apartment in the District.

Once the different types of housing were identified, the workgroup discussed the benefits and drawbacks of including each kind of housing and the creation of a formal definition for each housing type that would be utilized by the workgroup. After defining the various types of housing, the workgroup identified the characteristics that the housing chart should contain, including: population served, eligibility criteria, restrictions, capacity, services provided to families, and entry requirements. When creating the housing chart, the workgroup envisioned its ultimate use and the population it would benefit.

The workgroup agreed that once the chart was completed they would explore different avenues to publicize the chart to address the needs of returning citizens. One such example was to incorporate the housing chart into the electronic resource database on the Office on Returning Citizens Affairs (ORCA) website.¹⁴ The database is currently populated with resources available to returning citizens. An individual can select a type of service as well as a ward within the District, and all the providers that are located within that ward will be shown. The workgroup expressed the importance of ensuring that housing, among other needs, was available in a one-stop shop setting. In addition to a resource that identifies the range of housing providers available to returning citizens, the workgroup also stated the need for an individual or entity to utilize the housing chart to match returning citizens with housing.

Originally, participants did not consider public housing to be a viable option for returning citizens. Several participants stated that the overwhelming view throughout the community was a total

¹⁴ The Office on Returning Citizens Affairs was formerly known as the Office on Ex-Offender Affairs.

ban on public housing for individuals with a criminal history. In reality, no such ban exists in the District. The only crimes that result in a complete bar from public housing are crimes that require a lifetime sex offender registration and methamphetamine production on federal property. Returning citizens do, however, need their names placed on the lease for any public property. As any District resident would have to go through the application process in order to obtain public housing, a returning citizen also must go through this process. Once an individual completes the process and reaches the top of the list, the screening process begins, which includes the criminal background check.¹⁵ When making a determination, the District of Columbia Housing Authority (DCHA) will consider the length of time since an applicant's conviction, their current criminal record and criminal behavior pattern, including arrests even if cases were not prosecuted. If a returning citizen is denied due to their criminal history, s/he will receive a letter from the DCHA stating this decision. After this denial, a returning citizen has the option to enter the mitigation process. This is a process where the returning citizen engages their probation/parole officer to mitigate the circumstances that resulted in the initial denial. The probation/parole officer may attest to the fact that the individual is in an addiction recovery program, is employed, or has completed some other rehabilitative program since their criminal conviction. After the completion of the mitigation process, the returning citizen will receive a letter from the DCHA within ten days with its final decision.

Independent Housing Broker

The second charge of the workgroup was to explore the feasibility and fiscal implications of creating an independent housing broker or ombudsman and the agency or community service provider best poised to provide the service. Originally, when the workgroup began discussing this task, it identified the purpose and role of the housing ombudsman, which was to screen a returning citizen and forward any gathered information to a specific housing resource. The housing ombudsman was to serve as a contact resource for returning citizens looking for housing and would also develop and maintain a

¹⁵ District of Columbia Housing Authority, 'The Facts About Applying For Public and Assisted Housing' Factsheet

real-time database of the population/capacity levels at each of the housing providers listed in the housing chart. The term ‘ombudsman’ is defined as a person who acts as a trusted intermediary between an organization and some internal or external constituency or a government appointee who investigates complaints by private persons against the government. The workgroup decided that the term ombudsman did not reflect the role envisioned. Therefore, the housing ombudsman evolved into a housing assistance program.

Participants imagined the housing assistance program to be a resource where returning citizens could come for guidance and placement assistance. The workgroup stated that maintaining housing information in an electronic format would likely eliminate the concern that information was not up to date. Participants were reminded that due to the economic climate, funding may be limited with respect to creating a new position for an individual to staff the housing assistance program. For that reason, participants suggested exploring other cost-effective options that would still ensure that returning citizens are receiving the assistance they need with regards to housing.

Workgroup participants suggested partnering with area social work and law school clinics to explore the idea of hiring interns to carry out many of the functions originally designed for the housing ombudsman. The workgroup researched area schools that required some type of practicum to complete the program and reviewed the summaries of various clinical program descriptions. The participants felt that social work and law students would be best suited to provide this service because of the social and legal implications that arise when a returning citizen is released from incarceration and unable to find housing. The workgroup assisted with the creation of a program description for the housing assistance program. The idea was to house the intern(s) at the ORCA office and to screen and conduct intake assessments of returning citizens. Participants envisioned the possibility of expanding the program into a full service Reentry Law Clinic in the future. The workgroup recommends this program and believes proper implementation would take a full year and additional funding.

Finding: Due to an oversaturated public housing market and a lack of private housing options, there is a severe shortage of housing options for returning citizens.

Recommendations

The housing workgroup formulated the following recommendations to enhance and improve the access to and availability of housing for returning citizens in the District. In an effort to provide productive and beneficial recommendations, the workgroup also researched initiatives in other states across the Nation to compile thoughtful, informed recommendations.

- **Outreach.** The housing workgroup stated the importance of depicting an accurate picture of reentry. Only then will the community realize that the success of a returning citizen has an effect on more than that one person. For that reason, the housing workgroup suggested outreach efforts in the community to educate and inform individuals about the hurdles that returning citizens face when coming back to the District and about the opportunities they must be extended in order to successfully reintegrate. Returning citizens comprise a high percentage of the homeless population in the District, thus it would be advantageous to advocate for more housing options by garnering media attention around public safety and returning citizens, and not necessarily around homeless individuals. The workgroup also recommended distributing the housing list to organizations that will reach a broad audience, as well as those who have direct contact with returning citizens. Individuals that would be in the best position to receive the housing list would be parole and probation officers, social workers at CSOSA and the District of Columbia Superior Court, organizations that work in the legal field, like the Public Defenders Service, the American Bar Association, the National Bar Association, and law school clinics.
- **Shelters.** During the time the workgroup convened, the District announced a nearly \$20 million budget cut to homeless assistance programs, which includes homeless shelters. Although homeless shelters are not the optimal housing choice for returning citizens, workgroup

participants acknowledge that they do house a significant number of returning citizens, especially immediately after release from incarceration. Therefore, a budget cut of that magnitude would devastate the existing shelters in the District. It would also leave many returning citizens without any form of housing, and thus at a higher risk of recidivism. The workgroup recommends that such a budget cut be reevaluated and the potential consequences of funding be addressed.

Furthermore, workgroup participants recognize that moving away from shelters and creating permanent housing options would best aid returning citizens. Therefore, the workgroup recommends the redistributing of funds to explore and provide more stable permanent housing.

- **Services.** In addition to maintaining the existing shelters in the District, the workgroup believes standardized guidelines should be instituted for the services offered in shelters. Many shelters advertise certain wrap-around services for their clients, but there is no established system for the oversight and monitoring of the services given to the clients. These guidelines would create accountability and would ensure that services offered within these facilities are similar in delivery and structure. Therefore, the workgroup recommends requiring shelters that receive District funds to follow standardized protocols when delivering services to their clientele. The workgroup appreciates that there are several shelters that are privately owned and funded and proposes exploring the possibility of offering incentive, like tax credits, for private shelters that comply with the protocols. Lastly, the workgroup recommends collaborating with Unity Healthcare for guidance regarding health services that are provided at District shelters.
- **Public Housing.** The workgroup recommends continued collaboration with the DCHA to better inform returning citizens of their ability to apply for public housing. In order to dispel the myth that returning citizens cannot reside in public housing, the creation of easy-to-read flyers that address the issue can be displayed in waiting rooms of agencies throughout the city. The flyer could direct individuals to the DCHA website in order to apply for housing, as well as highlight that only two types of convictions that bar an individual from public housing in the District (See Appendix H). Another recommendation was to create a temporary waiver that would permit

returning citizens to live with their families in public housing during the critical transition period from incarceration to the community. The workgroup proposed a temporary 90 day waiver that would entitle returning citizens to reside in public housing while they are searching for more permanent accommodations. This measure would ensure that returning citizens are in a stable environment for up to 90 days, and allow them the ability to pursue employment or other services without the worry of finding immediate housing simultaneously.

- **Housing Assistance Program.** The workgroup recommends reconvening in FY 2012 to create and expand this program. The workgroup envisions creating a reentry one-stop center, where the ORCA would serve as the primary contact, to address the needs of returning citizens, with a potential launch for FY 2013.

Juvenile Reentry

Juvenile reentry was not originally discussed during the Forum, but the Reentry Steering Committee thought the juvenile reentry was important enough that a workgroup was created to address the distinct issues, which differ from adults, facing juvenile who return to their communities. This workgroup focused on the various ways similar jurisdictions define and identify reentry services and programs, the number of reentry services and programs in the District, and the existing gaps and recommendations for reentry services and programs to be implemented in the District.

Defining Juvenile Reentry

The workgroup discussed the need for a universal definition of juvenile reentry for the District, which would be recognized, endorsed, and utilized by both District and Federal agencies. To do this, the workgroup looked to other jurisdictions that have defined juvenile reentry and instituted effective programs and services. When considering how others define juvenile reentry, the workgroup looked to states that are considered to be at the forefront of juvenile reentry concepts and practices. For instance, Ohio defines juvenile reentry as a comprehensive approach that starts the day a youth arrives to the facility and prepares juveniles for the return to their homes and community.¹ Massachusetts defines juvenile reentry as the services that begin for a youth once they are in residential confinement and continues through community supervision.² Lastly, Alameda County, California defines juvenile reentry

Juvenile Reentry

Workgroup Co-chairs:

Chris Shorter

Chief of Staff

Department of Youth Rehabilitation Services

Fannie Barksdale

Deputy Director

Court Social Services

Recommendations:

- Standardize intake assessments among agencies
- Improve case management staff reentry training
- Develop system to monitor service providers that provide reentry services
- Develop graduated response systems

¹ Ohio Department of Youth Services, <http://www.dys.ohio.gov/dnn/Reentry/ReentryServices/tabid/106/Default.aspx>

² Massachusetts Department of Youth Services, <http://www.mass.gov>

as the time of arrest being the onset of services that will be set in place to assist with the community integration and concluding once the youth is stabilized back in the community.¹⁸

The District, however, is unlike other jurisdictions since both local and federal agencies provide reentry services for juveniles. Therefore, devising a universal definition that is utilized by all agencies was a difficult task that required the consensus of all agencies that play a role in juvenile reentry. Nonetheless, the workgroup noted the similarities in the definitions around the nation, and recognized the need to include starting the process of juvenile reentry at the earliest point of entry into the system in order to achieve any measure of success. The District of Columbia defines juvenile reentry as the process of ensuring court-involved youth, who have been securely detained, are prepared for reintegration with their families and communities by linking them with the necessary services and supports that address known risk and protective factors.

When defining reentry, the workgroup identified transition and aftercare as distinct phases during the reentry process. The workgroup defined the transition phase as the period prior to release when a juvenile is preparing to reenter their community. This is when pre-release planning services take place. Reentry was defined as the period when a juvenile is physically released from commitment and begins the process of reentering their community. Lastly, aftercare was defined as the period after a juvenile has reentered society but is still vulnerable, thus needing services and supports to ensure they do not return to the juvenile justice system.

The workgroup also incorporated an individual's age into the definition. The workgroup appreciated that youth develop physically, cognitively, emotionally, and socially, at different ages. The workgroup divided juveniles into three age groups: early adolescents, consisting of youth between the ages of eleven and fourteen, middle adolescents, youth between the ages of fifteen and seventeen, and late adolescent, youth aged eighteen to twenty-one. During the early adolescent phase, youth are primarily influenced by parents and subsequently run the risk of facing greater challenges when returning to the

¹⁸ Alameda County, California Juvenile Justice Reentry Blueprint Study

community, especially if the return is to an unstable family setting or living situation.¹⁹ At the middle adolescent stage, there is a greater emphasis on peer relationships and acceptance. Lastly, as youth transition into the late adolescent phase, they tend to develop a strong sense of independence and more mature relationships. The goal of establishing such relationships is to develop a sense of empathy, trust, self-disclosure, and loyalty with peers, family and adults.²⁰

In addition to age groups, the workgroup acknowledged the common presence of behavioral and mental health issues in youth involved in the juvenile justice system. There is a critical need for programs and services to address the cognitive development of youth as they are returning into their communities. The lack of housing is another area that needs to be addressed. Youth without stable housing are vulnerable and may make poor decisions as a result. Strong community ties are also needed to strengthen the youth as they are returning. This includes a youth's family, as well as other social institutions such as neighbors, schools, churches, and recreation centers.

District Reentry Services and Programs

There are a host of programs and services available to juveniles who are reentering the community. These services are implemented by a vast array of District and Federal agencies that all play unique roles in the juvenile justice system (See Appendices I, J, K, L, M and N). Despite these services available to juveniles, there are challenges facing the juvenile reentry system that must be addressed in order to improve the care offered to youth in the District. The workgroup felt it was important to seek input from individuals that were involved in the juvenile reentry process on a more intimate level to gauge the effectiveness of juvenile reentry programs.

The workgroup elected to compose focus groups of individuals participate in the juvenile reentry process. The workgroup's goal was to hold focus groups in order to guide the analysis and better inform the recommendations, in order to, ultimately improve the juvenile justice reentry process. Parents of youth involved in the juvenile justice system, case managers and probation officers, and youth who

¹⁹ National Reentry Resource Center, <http://nationalreentryresourcecenter.org/topics/juveniles>

²⁰ National Reentry Resource Center, <http://nationalreentryresourcecenter.org/topics/juveniles>

experienced the reentry process participated in the focus groups. All focus groups were facilitated by staff from Court Social Services (CSS) or the Department of Youth Rehabilitation Services (DYRS). The focus group attendees answered a series of questions evaluating the current juvenile reentry services available in the District. Additionally, the participants were able to address areas within juvenile reentry that are in need of improvement.

Parents/Family Member Focus Group

- Parents often felt uninvolved in the decisions that were made concerning their child while in the custody of CSS or DYRS. They also stated that the transition into the community could have been more coordinated.
- Parents asked to be included in the therapy sessions because the experience is equally stressful on family members.
- Parents also reported that while they were familiar with the process of reentry, they were unfamiliar with the term ‘reentry.’ They also stated that they were involved in discussions concerning the return of their child.
- When a parent is not included in the reentry process it creates an added obstacle, which can hinder the process for a youth reentering to his or her community. This focus group recommended the involvement of parents to the fullest extent when planning the reentry process for a youth.

Case Manager/Probation Officer Focus Group

- Feedback focused on the poor delivery of programming and services to youth.
- Case managers and probation officers stated while there are an abundance of programs and service providers, some providers provided excellent services while others were not as reliable.
- Furthermore, participants spoke of the ‘blanket’ services that are offered to each youth because age, maturity level, and developmental levels of youth are not usually considered

when making decisions. Members stated that programming should be tailored to each individual, because the needs of the youth they encounter vary so greatly.

- There is a need for residential treatment centers in or close to the District to ensure that families are continuously part of the reentry process. Furthermore, additional independent living programs in the District would positively contribute to a youth's reentry.

Youth Focus Group

- One of the main comments made by the youth participants was the tendency to 'over-program' youth involved in the juvenile reentry system. Youth participants stated that many of the programs are redundant, and as a result they quickly lose interest or stop attending all together. Youth recommended the creation of practical structured programming, instead of multiple programs for sake of taking up time.
- Another concern among youth pertained to those that are dual jacketed, meaning they are under the supervision of both CSS and DYRS. These youth must attend duplicative meetings for services received as a part of their reentry. Youth recommended the need for collaboration among CSS and DYRS to avoid or reduce duplicate reentry services.
- Youth participants also spoke of the need to be held accountable for their actions and for their probation officers and case managers to be harder on them.
- Youth participants expressed the need for quality over quantity when selecting programming and service providers. Specifically, youth stated that educational programs that meet their needs and interests should be developed.
- Youth participants expressed the need for jobs while going through the reentry process to help them stay on the right track. Participants also mentioned the need for additional independent living programs.

- Youth also stated that mentoring programs provide them with an individual they trust and feel comfortable speaking with.

Finding: In order to provide effective services to youth, further information sharing among juvenile agencies and enhanced oversight of community-based service providers is required.

Recommendations

- **Standardization.** Because a youth involved in the juvenile justice system will often interact with several District and Federal agencies, there is a need for standardization of juvenile assessments. Also, the sharing of these assessments across agencies would help eliminate duplication. The workgroup recommends tailoring the services available to juveniles by their cognitive behavioral and developmental needs.
- **Training.** Enhanced training should be provided to both juveniles who receive reentry services as well as the staff that deliver these services. In order to provide juveniles with the best services and programs, the staff that serves youth within residential and non-residential settings must be properly trained using the current best practices and treatment techniques. The workgroup believes that an effective residential treatment program must have continuity with, and be followed-up by, quality non-residential programs and treatment. Because the juvenile reentry field is developing and evolving, there are new theories, concepts, and best practices that would be beneficial all involved. Equipping staff with the latest training and skills will ensure that juveniles are provided with the best care to address their needs during reentry.

The workgroup also highlighted the need to more effectively integrate residential programming staff and community-based service providers. The workgroup believed that reinforcing what youth have accomplished in placement by employing the same treatment approach after they are released increases their likelihood of success in the community. Because many community based providers deliver important services to juveniles, it is imperative that they work closely with the other agencies to obtain necessary information and get guidance on best ways to serve youth.

Lastly, the workgroup agreed that more workforce development and job training programs need to be offered. This would include interviewing skills, resume building, mock interviews, and other skill building and development training. This training should take place during all phases of reentry.

- **Monitoring.** The workgroup recommends monitoring and evaluating programs offered by community based service providers. Since these organizations are not part of the District or Federal government, there are not many systems in place to determine if the programs are effectively addressing the needs of juveniles reentering their communities. The workgroup recommends instituting standardized performance and outcome evaluations, administered by the contracting agencies, for every community based service provider that serves youth in the D.C. juvenile justice system. Input from the focus groups revealed that case managers and probation officers echoed the need to improve community based service delivery and identify programs that interest the youth. Through comprehensive evaluations of the community providers, the contracting agency will be able to determine whether the programs are meeting the needs of the youth. Additionally, recommendations have been made for service providers to be brought into the process early. This would ideally involve the indentified providers participating in the development of the reentry plan and/or being invited to pertinent meetings such as Family Group Counseling (FGC) and Youth and Family Team Meetings (YFTMs). The goal would be a more educated, and thus smoother, reentry transition for the youth.
- **Continuing Juvenile Reentry Workgroup.** The workgroup recommends continuing the work of the juvenile reentry workgroup. This workgroup is comprised of representatives from relevant health, mental health, housing, child welfare, education, substance abuse, victims services, employment services, and local law enforcement agencies, in order to examine different methods effectively allocate resources, collect data, and examine the best practices in juvenile reentry from stakeholder agencies and other organizations. The workgroup also believes it could facilitate a

citywide training and monitoring effort, as well as search for and identify grant funding opportunities. The workgroup could expand upon the feedback from the focus groups to guide their initiatives. One initiative could be that the group could collectively work together on is the identification and/or creation of additional bed space that is within closer proximity to the District.

- **Graduated Response Systems.** This concept was derived from the Juvenile Reentry in Concept and Practice Presentation, by the National Reentry Resource Center (NRRC). The workgroup recognizes the importance of graduated response systems that are structured, formalized, and applied for both positive and negative behaviors. The workgroup recommended that youth serving agencies within the District's juvenile justice system develop graduated response systems focused on achievement and accomplishment, as well as failure and noncompliance that can be applied to youth receiving residential or non-residential treatment. Recommended incentives or consequences from the NRRC presentation included behavioral contracts and a continuum of reinforcements and sanctions.
- **Overarching Case Management.** The workgroup acknowledged that the vast majority of youth sent to residential placements will eventually return to the community. In the interest of both public safety and positive youth development, an assessment of a child's needs, risk, and protective factors early as possible is required. The workgroup believes the individualized plans should include what occurs during, and after, residential placement. In addition, each plan should call for the establishment of the necessary program and service linkages with the full range of public and private sector organizations and individuals in residential and community settings that can address known risk and protective factors, and ensure the delivery of prescribed services and supervision. The workgroup specifically recommended that youth serving agencies in the juvenile justice system develop consolidated facility and community case plans that incorporate family and social network perspectives for each youth upon commitment. The consolidated case

plan should establish a process used to determine treatment needs, as well as promote consistency and continuity through a collaborative team incorporating facility and aftercare staff.

- **Parental and Family Support.** A recommendation that stems from the focus groups was the need for additional supports for parents and families of court-involved youth. This need could be met through establishing a support group. Another option presented was the development of a comprehensive list of frequently asked questions (FAQs) that can be made available to parents and families to inform them of what to expect while their child is navigating through the juvenile justice system and reentry.
- **Widen Services.** Because many youth that come in contact with the juvenile justice system are never securely detained or committed to DYRS or CSS custody, the workgroup recommends creating a system where youth in this position receive services and supports to assist them after such an experience, which may include an arrest or an overnight stay at the Youth Services Center (YSC).

APPENDIX A: District of Columbia Education and Training Programs

<u>Program/School Name</u>	<u>Contact Information</u>	<u>Ages Accepted</u>	<u>Criminal Record Restrictions</u>	<u>High School Diploma or GED Required</u>	<u>Cost</u>	<u>Industry/ Program</u>	<u>Certifying Body/ Program Evaluator</u>	<u>Intake to Completion – Completion to Placement Ratios</u>	<u>Certifications</u>
Academy of Hope	601 Edgewood St. Washington DC 20017 www.aohdc.org 202-269-6623	18+	NO	NO	30	ABE	OSSE		
Academy of Hope	601 Edgewood St. Washington DC 20017 www.aohdc.org 202-269-6623	18+	NO	NO	30 (Varies)	Computer	OSSE		
Academy of Hope	601 Edgewood St. Washington DC 20017 www.aohdc.org 202-269-6623	25+	NO	NO - Must be on at least a 4th Grade reading level.	30	EDP	OSSE		
Academy of Hope	601 Edgewood St. Washington DC 20017 www.aohdc.org 202-269-6623	18+	NO	NO	30	GED	OSSE		
Academy of Hope	601 Edgewood St. Washington DC 20017 www.aohdc.org 202-269-6623	18+	NO	NO	\$30	Work Place Literacy	OSSE		
A-Men - Southeast Ministries	3111 Martin Luther King, Jr. Ave Washington DC 20032 Phone: (202) 562-2636 http://www.reformationdc.org	18+	NO	NO	Free	GED	OSSE		

ARRIBA Center	1010 Vermont Ave Washington DC 20005 202-393-7490 http://www.arribacenter.org/	18+	NO	NO	Free	ABE		90 participants 70% completion rate 80% job placement rate	
AYT Institute Inc.	1630 14TH St., NW, 2nd Floor Washington, DC 20009 Phone: (202) 797-1008 Fax: (202) 797-1007 E-mail: admin@ayti.us	18+	NO	YES - High School Diploma or GED	\$4,000	Automotive		98% acceptance rate 98% completion rate 95% job placement rate	Certificate of Completion
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com /	18+	NO (Must be out of incarcerati on for 6 months to a year)	NO	Free	Addiction Counselor Training		35 participants 23 graduates	
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com /	18+	NO	NO	Free	Automotive		50 participants 5 graduates	ASDE Certification
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com /	18+	NO	NO	Free	Barbering		100 participants 10 graduates 100% job placement rate	Barber Certification
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com /	18+	NO	NO	Free	Cosmetology & Barbering		50 participants 7 graduates	Certified Beauticians

Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com/	18+	NO	NO	Free	Culinary Arts		25-30 participants 50% completed 2% job placement rate	ServSafe Certification Food Handlers License
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com/	22+	NO	NO	Free	EDP			
Ballou STAY Senior High School	3401 4th Street, SE Washington, DC 20032 http://www.ballouknights.com/	18+	NO	NO	Free	GED		120 participants 35 graduates	
Beulah Baptist Church GED Center	Beulah Baptist Church 5901 Dix Street, NE Washington, DC 20019 202-388-4165 (evening) 202-396-5368 (day)	16+	NO	NO	Free (\$20 Book Fee)	GED		17 participants 9 complete program	Certificate of Completion
Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	18+	NO	NO - (Must work towards a GED or HS.)	Free	Construction (Core Curriculum - Pre-Apprentice)		250 participants	NCCER Certification
Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington, DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	22+	NO	NO - (Must work towards a GED or HS.)	Free	EDP	OSSE		NCCER Certification

Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington, DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	18+	NO	NO - (Must work towards a GED or HS.)	Free	Electrical	OSSE		
Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington, DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	18+	NO	NO - (Must work towards a GED or HS)	Free	GED	OSSE		
Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington, DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	18+	NO	NO - (Must work towards a GED or HS)	Free	HVAC	OSSE		NCCER Certification
Booker T. Washington Charter School for Technical Arts	1346 Florida Avenue, NW Washington, DC 20009 Tel: 202-232-6090 http://www.btwschool.org/adulteducation/default.htm	18+	NO	NO - (Must work towards a GED or HS.)	Free	Stationary Steam Engineering	OSSE		NCCER Certification
Byte Back, Inc	815 Monroe Street NE, Washington DC 20017 Telephone: (202) 529-3395 Fax: (202) 529-4684	No Age Requirement	NO	NO - (For Beginners Classes)	FREE (For low Income and those who meet certain requirements)	Computers		1,000 participants 70-75% completion rate	Microsoft Office Certification A+ Certification Linux Certification

Carlos Rosario International Public Charter School	1100 Harvard Street., NW Washington, DC 20009 202-797-4700 www.carlosrosario.org	18+	YES (Use a panel to determine admittance on a case by case basis, but they do have students attending with criminal records)	NO - Reading and Writing on a 7th Grade	FREE	Computers			
Carlos Rosario International Public Charter School	1100 Harvard Street., NW Washington, DC 20009 202-797-4700 www.carlosrosario.org	18+	YES (Use a panel to determine admittance on a case by case basis, but they do have students attending with criminal records)	NO - Reading and Writing on a 5th Grade Level	FREE	Culinary Arts			ServSafe Food Protection Manager Certification
Carlos Rosario International Public Charter School	1100 Harvard Street., NW Washington, DC 20009 202-797-4700 www.carlosrosario.org	18+	YES (Use a panel to determine admittance on a case by case basis, but they do have students attending with criminal records)	NO	FREE	GED			

<p>Carlos Rosario International Public Charter School</p>	<p>1100 Harvard Street., NW Washington, DC 20009 202-797-4700 www.carlosrosario.org</p>	<p>18+</p>	<p>YES (Use a panel to determine admittance on a case by case basis, but they do have students attending with criminal records)</p>	<p>YES - GED or High School Diploma Required</p>	<p>FREE</p>	<p>Nursing</p>			
<p>CCDC Community College of The District of Columbia</p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	<p>18+</p>	<p>NO</p>	<p>NO</p>	<p>FREE</p>	<p>Computer Basics</p>	<p>OSSE</p>		

<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	GED	OSSE		
<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center, Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	Mathematics Development	OSSE		

<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	Heating and Air Conditioning (HVAC) Program	OSSE		
<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	Hospitality	OSSE		

<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	Highway Construction Trades	OSSE		
<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	18+	NO	NO	FREE	Reading Development	OSSE		

<p>CCDC <i>Community College of The District of Columbia</i></p>	<p>Ward 5- Backus Campus 5171 South Dakota Avenue, NE Washington, DC 20017 (202) 274-7209 Ward 7-Fletcher-Johnson Education Center Room 2018 4650 Benning Road, SE Washington, DC 20019 (202) 274-5617 Ward 8-PR Harris Educational Center 4600 Livingston Road, SE Washington, DC 20032 (202) 274-6999</p>	21+	NO	NO (Need a Valid Driver's License)	\$7,500	CDL	OSSE		
<p>Center for Empowerment and Employment Training (CEET)</p>	<p>600 W Street NE Washington, DC 20020 202-832-4070 www.ceet.org</p>	16+	NO	NO	\$50 (Scholarships are available)	ABE		20 participants 35% completion rate	Certificate of Completion
<p>Center for Empowerment and Employment Training (CEET)</p>	<p>600 W Street NE Washington, DC 20020 202-832-4070 www.ceet.org</p>	16+	NO	NO	\$50 (Scholarships are available)	Business/ Entrepreneurial		15 participants 80% completion rate	Certificate of Completion

Center for Empowerment and Employment Training (CEET)	600 W Street NE Washington, DC 20020 202-832-4070 www.ceet.org	16+	NO	NO	\$50 (Scholarships are available)	Computer		4-5 participants 100% completion rate 100% job placement rate	Certificate of Completion
Center for Empowerment and Employment Training (CEET)	600 W Street NE Washington, DC 20020 202-832-4070 www.ceet.org	16+	NO	NO	\$50 (Scholarships are available)	GED		25 participants 50% completion rate	
Citiwide Computer Training Center	3636 16th St NW Apt # AG-49 Washington, DC 20010 info@mycitiwide.com 202-667-3719	No Age Requirement	NO	YES - GED or High School Diploma Required	\$25 (Free for low-income individuals as defined by the federal poverty guidelines)	Computers		60 participants 75-80% job placement rate	IC3, A+, CompTia, MOS, MCAS Certification
Citiwide Computer Training Center	3636 16th St NW Apt # AG-49 Washington, DC 20010 info@mycitiwide.com 202-667-3719	All	NO	NO	\$25 (Free for low-income individuals as defined by the federal poverty guidelines)	GED		60 participants 75-80% job placement rate	ESL and Life Skills Certifications, GED
Community Empowerment Training Academy (CETA)	1920 Martin Luther King, Jr. Ave Washington DC 20020 (202) 610-1080	22+	NO	YES - GED or High School Diploma Required	FREE	CDL			

Community Empowerment Training Academy (CETA)	1920 Martin Luther King, Jr. Ave Washington DC 20020 (202) 610-1080	All	NO	YES - GED or High School Diploma Required	FREE	Computer		12 participants 100% completed 4 placed in jobs	
Concerned Black Men, Inc.	Covenant Baptist Church 3845 South Capitol Street, SW Washington, DC 20032 202-783-0177	17+	NO	NONE	FREE	ABE		45 participants	
Concerned Black Men, Inc.	Covenant Baptist Church 3845 South Capitol Street, SW Washington, DC 20032 202-783-0177	17+	NO	NONE	FREE	GED		45 participants	
Congress Heights Trading Center	3215 Martin Luther King Jr. Ave Washington DC 20032 - (202) 563-5200 http://chctdc.org/default.aspx	18+	NO	YES - GED or High School Diploma and reading on an 8th grade reading level.	FREE	Barbering	OSSE	25 participants 13 completed program 8 placed in jobs	Barber Certification
Congress Heights Trading Center	3215 Martin Luther King Jr. Ave Washington DC 20032 (202) 563-5200 http://chctdc.org/default.aspx	18+	NO	NO - 8th Grade Reading Level	FREE	Childcare Development Associate	OSSE	80 participants 75 completed program 50 placed in jobs	Child Development Associate Certification
Congress Heights Trading Center	3215 Martin Luther King Jr. Ave, SE Washington DC 20032 Phone: (202) 563-5200 http://chctdc.org/default.aspx	18+	NO	NO - 8th Grade Reading Level	FREE	Construction	OSSE	100 participants 90 complete program 50 placed in jobs	Core Construction, General Laborer, Weatherization Green Build
Covenant House	3845 South Capitol Street, SW Washington, DC 20032 202-783-0177	18-24	NO	NO	FREE	ABE	OSSE		

Covenant House	2001 Mississippi Avenue, SE Washington, DC 20032 202-610-9600 www.covenanthouse.org/about_loc_dc.html	18-24	NO	NO	FREE	GED	OSSE		
DC Central Kitchen <i>(Letter of referral from a case manager or letter of support from a sponsor is needed)</i>	425 2nd Street NW Washington, DC 20001 Phone: 202-234-0707 Fax: 202-986-1051	18+	NO	NO	Free	Culinary Arts		22-25 participants 92% completion rate 87% job placement rate	Certificate of Completion Food Protection Management Certificate
Jobs for Homeless People, Inc.	1526 Pennsylvania Ave. Washington DC 20003 (202) 544-9128 http://www.jobshavepriority.org	All	NO	NO	Free	ABE		300 participants 50% completed program 80% job placement rate	
Jubilee Jobs	2712 Ontario Road Washington DC 20009 Phone: (202) 667-8970 http://www.jubileejobs.org	18+	NO	NO	FREE	Employment Services and Job Placement for Returning Citizens		380-400 participants 75% completion rate	
Kennedy Institute – A Program of Catholic Charities (Must Be Referred From DOES)	801 Buchanan Street NE Washington, DC 20017 202-529-7600 ext. 728 www.ccs-dc.org	16+	NO	NO	Free	BASIC SKILLS (Does Not Provide a Certification) Clerical	OSSE	15-25 participants	

Kennedy Institute – A Program of Catholic Charities (Must Be Referred From DOES)	801 Buchanan Street NE Washington, DC 20017 202-529-7600 ext. 728 www.ccs-dc.org	16+	NO	NO	Free	BASIC SKILLS (Does Not Provide a Certification) Janitorial Maintenance	OSSE	15-25 participants	
Kennedy Institute – A Program of Catholic Charities (Must Be Referred From DOES/DDS)	801 Buchanan Street NE Washington, DC 20017 202-529-7600 ext. 728 www.ccs-dc.org	18+	NO	NO	Free	ABE (Job Readiness)	OSSE	15-25 participants	
Kennedy Institute – A Program of Catholic Charities (Must Be Referred From DOES/DDS)	801 Buchanan Street NE Washington, DC 20017 202-529-7600 ext. 728 www.ccs-dc.org	16+	NO	NO	Free	BASIC SKILLS (Does Not Provide a Certification) Food Services	OSSE	15-25 participants	
Living Wages	4235 4th Street SE Washington, DC 20032 202-574-3962 1401 V Street SE Washington, DC 20020 202-610-0974 http://www.livingwages.org	25+	NO	NO	\$130 Over The Course of a Year	EDP			Ballou STAY High School Diploma

LVA-NCA (Literacy Volunteers and Advocates)	635 Edgewood Street, NE Suite B Washington, DC 20017 202-387-1772 www.lvanca.org	18+	NO	NO - At or below a 6th grade reading level.	Free	ABE/Literacy (This includes Financial Literacy)		200+ participants	
Marshall Heights Community Development Organization	3939 Benning Rd. Washington DC 20019 202- 584-1800 http://www.mhcd.org	16+	NO	NO	Free	GED	OSSE	150 participants 10 graduates	
OIC/DC (Opportunities Industrialization Center)	Headquarters: 3707 Martin Luther King, Jr. Avenue SE Washington, DC 20032 202-373-0330 http://www.oicdc.org/oicdc.html	21+	NO	NO - 9th Grade Reading Level	FREE	Computers	OSSE	533 participants 381 graduates 76% job placement rate	Microsoft Certification
OIC/DC (Opportunities Industrialization Center)	Headquarters: 3707 Martin Luther King, Jr. Avenue SE Washington, DC 20032 202-373-0330 http://www.oicdc.org/oicdc.html	21+	NO	NO - 5th Grade Reading Level	FREE	Job Readiness Training also referred to as DC Works	OSSE	562 participants since 2009 79% completion rate 74% job placement rate	
OIC/DC (Opportunities Industrialization Center)	Headquarters: 3707 Martin Luther King, Jr. Avenue SE Washington, DC 20032 202-373-0330 http://www.oicdc.org/oicdc.html	21+	NO	NO - 9th Grade Reading Level	FREE	Office	OSSE	533 participants 381 graduates 76% job placement rate	

Roosevelt STAY High School	4301 13th Street, N.W. Room 102 Washington D.C. 20011 202-576-8991 / 202-541-6440	25+	NO	NO	FREE	EDP			
Roosevelt STAY High School	4301 13th Street, N.W. Room 102 Washington, DC 20011 202-576-8991 / 202-541-6440	18+	NO	NO	FREE	High School Diploma			
SamariCorp Community Development Corporation (Currently Wait listing)	1016 Florida Avenue, NE Washington, DC 20002 202-339-3995	18+	NO	NO -Fifth Grade Reading Level	FREE	ABE		15 participants	
SamariCorp Community Development Corporation (Currently Wait listing)	1016 Florida Avenue, NE Washington, DC 20002 202-339-3995	18+	NO	Fifth Grade Reading Level	FREE	GED		15 participants	
Sasha Bruce Youth Build	2804 Martin Luther King Jr. Avenue, SE Washington, DC 20032 202-675-9355	18-24	NO	At or above a 6th grade reading level.	Free	Carpentry			
Sasha Bruce Youth Build	2804 Martin Luther King Jr. Avenue, SE Washington, DC 20032 202-675-9355	18-24	NO	At or above a 6th grade reading level.	Free	GED			

SOME Center for Employment Training	2300 Martin Luther King Jr. Avenue, SE Fourth Floor Washington, DC 20020 202-292-4460 cetinfo@some.org	18+	NO	NO	\$6,793	Building Maintenance Service Technician	OSSE	60 accepted 42 complete program - Jobs paying an average of \$12.48/hr 80% of the jobs provide benefits	
SOME Center for Employment Training	2300 Martin Luther King Jr. Avenue, SE Fourth Floor Washington, DC 20020 202-292-4460 cetinfo@some.org	18+	YES (No violent Offense)	NO	\$7,000	Business & Customer Relations Associate	OSSE	60 accepted 42 complete program - Jobs paying an average of \$12.48/hr 80% of the jobs provide benefits	
SOME Center for Employment Training	2300 Martin Luther King Jr. Avenue, SE Fourth Floor Washington, DC 20020 202-292-4460 cetinfo@some.org	18+	NO	NO	\$7,000	Medical Administrative Assistant:	OSSE	60 accepted 42 complete program -Jobs paying an average of \$12.48/hr 80% of the jobs provide benefits	
Spingarn STAY Senior	2500 Benning Road, NE Washington, DC 20002 202-724-4538 202-724-3919 www.k12.dc.us/dcps/home.html	25+	NO	NONE	\$50	EDP		50-60 participants 12 graduates	High School Diploma

Spingarn STAY Senior	2500 Benning Road, NE Washington, DC 20002 202-724-4538 202-724-3919 www.k12.dc.us/dcps/home.html	17+	NO	NONE	FREE	High School		320 participants 60 graduates	High School Diploma
The Excel Institute ("Excel")	2851 V Street, NE Washington, DC 20018 info@theexcelinstitute.org 202- 387-1550	18+	NONE	NONE	\$50 (Application Processing Fee) The program is free.	Automotive		minimum of 100 participants 60% completion rate 80% goal job placement rate	Certificate of Completion

Urban ED	2041 Martin Luther King Jr Ave., SE Suite M-2 Washington, DC 20020 202-610-2344 info@UrbanEd.org www.UrbanEd.org	18-30	NO	NO - (Need to be literate)	FREE	Computer		20 participants	A+ IT Technician certification, the Microsoft Certified Desktop Support Technician (MCDST) certification (being retired), the Help Desk Institute (HDI) Customer Support Representative certification, and the Microsoft Certified IT Professional (MCITP) in Windows 7.
Virtual Enterprise Program	1346 Florida Ave NW # 101 Washington, DC 20009 (202) 332-8022	18+	NO	Have an interest in pursuing a GED/EDP or have a GED or High School Diploma	Fee	Computers Business Administrative Entrepreneurial		10-15 participants 7 graduates 50% job placement rate	Microsoft Officer User, Systems Certification, Entrepreneurial Certification

Virtual Enterprise Program	1346 Florida Ave NW # 101 Washington, DC 20009 (202) 332-8022	18+	NO	NONE	Fee	GED		40-50 participants 50% completion rate 50% job placement rate	
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*Shaded cells reflect information that was not obtainable from the educational program.

Appendix B: Work Opportunity Tax Credit Factsheet



You and the WOTC



The Work Opportunity Tax Credit Program (WOTC) is a tax credit available to employers that hire individuals most in need of employment. Hired employees must fall into one of nine target groups.

- **Have you or anyone in your family received TANF for at least 18 consecutive months?**
- **Are you a veteran?**
- **Have you been convicted of a felony and released from prison within the past year?**
- **Are you between the ages of 18 and 39 and a member of a family that received SNAP (Food Stamps) benefits?**
- **Are you a D.C. resident?**
- **Have you received Supplemental Security Income (SSI) benefits in the past 60 days?**

If you answered yes to any of the above questions, you may be able to reduce your employer's cost of doing business!

Tell your employer that you fall within one of the WOTC target groups and by hiring you they may get significant tax savings!

Your employer must request and receive a certification from its state workforce agency to determine that the new hire is a member of at least one of the nine WOTC target groups before the employer can claim the WOTC on its federal income tax return.

SPEAK UP and GET HIRED!

For more information and a detailed explanation of all target groups, go to:

<http://www.doleta.gov/business/incentives/opptax/eligible.cfm>

DOES Contact: Mr. James Clopton
WOTC Coordinator
Department of Employment Services, DC Government
4058 Minnesota Avenue, N.E. 3rd Floor
Washington, DC 20019
202-698-5136
www.does.wotc.dc.gov

Appendix C: Federal Bonding Program Factsheet

Federal Bonding Program Facts

The Federal Bonding Program (FBP) is an employer job-hire incentive that guarantees the job honesty of at-risk job seekers. This program offers fidelity bonding insurance protection to you, if you hire qualified individuals who are usually denied coverage by other commercial carriers because of:

- Record of arrest, conviction or imprisonment
- History of alcohol or drug use
- Poor credit history
- Lack of employment history (e.g. youth, displaced home maker)
- Dishonorable Discharge, etc.
- Bankruptcy-Special situations requiring a fidelity bond

If you hire an individual that falls into any of the above categories, you may be able to obtain federal bonding insurance!

This bond can cover a period of six months at no cost to you. If you desire continued coverage after six months, the McLaughin Company will provide it at standard commercial rates, but only through the Federal Bonding Program.

If you are interested in hiring an individual or wish to obtain additional information on the Federal Bonding Program, contact:

State Bonding Coordinator
The Federal Bonding Program
DC, Department of Employment Services
4058 Minnesota Ave, NE, Suite 3400
Washington DC, 20019
202 698-5810

Appendix D: National Homeocmer's Academy Recommendations

DISTRICT OF COLUMBIA PRISONER RELEASE PLAN

First and foremost, we as Homecomers realize that if the suggestions we are about to make are not written into policy, it is likely that they will never occur.

1. 2 years prior to release Prisoners should have a release plan meeting with the entire Unit Team. The Unit Team will discuss with Prisoners every facet of the release process.

Such as:

- A. A complete medical assessment that shall be updated on six month intervals until his release.
- B. A psychological assessment that shall be updated 1 year prior to release.
- C. A vocational readiness training that exists until his release.
- D. Unit Team particularly his (Case Manager) shall assist prisoner with establishing Family ties as well as support groups in his community.
- E. Prisoner's identification including Birth Certificate and Social Security Card should be provided.
- F. Health Insurance for prisoners should be made possible which would activate upon his release.
- G. Paperwork should be provided to prisoners pertinent to acquiring financial assistance and food stamps.
- H. Suitable housing should be made available to those who may not have family or support in the community.

We believe that the implementation of these necessities would give a returning citizen a fair chance to succeed.

Appendix E: Reentry Healthcare Factsheet

Returning to D.C. from Jail or Prison?

Health Information YOU Should Know

Unity Health Care Reentry Health Center

1604 Morris Road, SE

On the Grounds of Our Lady of Perpetual Help

Monday - Friday from 8:15am - 3:45 pm

Phone: (202) 715-1601 for an appointment, or walk in until 2:00 pm each day

Services Offered: Primary care, Infectious disease, Psychiatry, case management, mentoring, mental health treatment, insurance enrollment, individual and group counseling, social service referrals.

Or

Call the Scheduling Center--202-469-4699--for an appointment at any of Unity's community sites

D.C. Department of Mental Health (DMH)

- DMH Reentry Coordinator can be reached at 202-698-5667

- Call the 24 hour Access Helpline at 1-888-793-4357 for linkage to a Core Service Agency (CSA)

-Mobile Crisis Services at 202-673-9300

-Homeless Outreach Program (HOP) at 202-671-0388g

Services Offered: Mental Health Providers, Intensive Case Management, Assertive Community Treatment, Day Services, Crisis Services, In-patient hospitals, housing/residential services

“Take your health into your own hands”

Appendix F: University Legal Services Mental Health Training Recommendations



August 23, 2011

TO: CJCC Healthcare Working Group

Proposal for Improving Interdepartmental Expertise in Response to the Needs of Individuals with Co-Occurring Disorders

1. Trainings recommended for DMH core service agencies/Unity-DOC clinicians

Currently Available¹

- *Stages of Change*—open to the public introduces the transtheoretical Model of Stages of Change and how to motivate change
- *SSI/SSDI Outreach, Access and Recovery*—learn to increase access to benefits
- *Motivational Enhancement/Motivational Interviewing*—open to the public

Needing Development

- Dialectical Behavioral Therapy—currently available at St. Elizabeth’s hospital but not available to any consumers of community treatment providers. See SAMHSA report on prevalence and evidence-based treatment at <http://store.samhsa.gov/shin/content/SMA11-4644/SMA11-4644.pdf>. One training agency can be found at <http://behavioraltech.org/training/schedule.cfm>
- Stigma Reduction and Recovery Model (currently included with A.C.T. Core training but not for other providers) Wellness Recovery Action Planning resources/training are available through www.mentalhealthrecovery.com. DC has a number of WRAP facilitators. Recovery Evidence-Based Practices Toolkit available at SAMHSA website <http://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/SMA09-4463>
- Trauma Specific Care currently available to child mental healthcare providers but not adult service providers via DMH. Community Connections is the only adult service provider that advertises that it houses fully certified staff—can they offer discounted rates of training/consulting to other DC agencies?

¹ All trainings noted in *italics* are currently scheduled through the DMH Training Institute available through <http://dmh.dc.gov/dmh/cwp/view,a,3,q,625894,dmhNav,|31262|.asp>

220 I Street, N.E. Suite 130, Washington, D.C. 20002
(202) 547-0198 Fax: (202) 547-2662 . TTY: (202) 547-2657
www.ulsdc.org

- Supporting individuals with criminal justice involvement –how to navigate court, jail and supervision procedures(trainings provided to ACT teams but other CSAs have requested as well).

2. Training recommended for DOC/FBOP residential reentry center staff and residents

Currently Available

- *Mental Health First Aid (12 hour course on de-escalating crises and providing comfort and service referrals)*--ULS has requested DMH partner to provide the trainings on site at requesting halfway houses.
- *Stages of Change*—open to the public introduces the transtheoretical Model of Stages of Change and how to motivate change
- *Applied Suicide Intervention Skills Training (ASIST)*—open to the public
- *SSI/SSDI Outreach, Access and Recovery*—learn to access benefits (available currently through DMH/DHS with ULS/PRA outreach planned for 2013)
- *Motivational Enhancement/Motivational Interviewing*—open to the public

Needing Development

- DMH's Trauma Learning Collaborative currently focuses on treatment for children
- Understanding DMH Resources (last joint training by ULS/DMH offered in 2008)

3. Training recommended for RSAT staff, RSC staff, SRTP and APRA Residential program staff

Currently Available

- *Co-Occurring Clinical Competency Certification Training Series*—9 months (bi weekly)
- *Motivational Enhancement/Motivational Interviewing*—open to the public

4. Training recommended for DOC Correctional officers

Currently Available

- *Mental Health First Aid (12 hour course on de-escalating crises and providing comfort and service referrals)*

220 I Street, N.E. Suite 130, Washington, D.C. 20002
(202) 547-0198 . Fax: (202) 547-2662 . TTY: (202) 547-2657
www.uls-dc.org

- *Applied Suicide Intervention Skills Training (ASIST)*—open to the public
- Needing Development
- Crisis Intervention Team Training (March 2011 interagency team tasked with development)
 - Trauma Informed Care (offered by National Association of State Mental Health Program Directors/National Association for Trauma Informed Care in the past for free; expert consulting available from Community Connections for a fee)

5. **Training recommended for DOC Case managers and CSOSA Officers**

Currently Available

- DMH-CSOSA Cross Training scheduled in the fall
- *Mental Health First Aid (12 hour course on de-escalating crises and providing comfort and service referrals)*
- *Applied Suicide Intervention Skills Training (ASIST)*—open to the public
- *SSI/SSDI Outreach, Access and Recovery*—(available currently through DMH/DHS with ULS/PRA outreach planned for 2013)

Needing Development

- DMH or mental health community resource training for DOC casemanagers
- Crisis Intervention Team Training (March 2011 interagency team tasked with development)
- Trauma Informed Care (offered by National Association of State Mental Health Program Directors/National Association for Trauma Informed Care in the past for free; expert consulting available from Community Connections for a fee)
- Stigma Reduction and Recovery Model (currently included with A.C.T. Core training but not for available to the public) Wellness Recovery Action Planning resources/training are available through www.mentalhealthrecovery.com. DC has a number of WRAP facilitators. Recovery Evidence-Based Practices Toolkit available at SAMHSA website <http://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/SMA09-4463>

APPENDIX G: Housing List of Resources for Returning Citizens

The following housing chart is a compilation of available housing options for citizens returning to the District of Columbia from incarceration. Halfway houses included in this chart are available for individuals under supervised release. The halfway house information is for informational purposes only, since residing in one of these locations is reserved for referrals from CSOSA. The other housing options are classified by the stated definitions below. CJCC defined the housing options contained in this list based on the services provided in the housing facility, and may not necessarily reflect the type of housing a location self-identifies with.

The majority of the housing options were obtained from the Public Defender Service Housing Directory and the Office of Ex-Offender Affairs Ex-Offender Resource Locator Database. Once the housing options were identified, they were classified into the appropriate categories presented below. Each housing resource was called and a representative of that location was asked a series of questions in an effort to obtain information pertaining to entry and eligibility requirements, services provided for residents, other general inquiries.

Shelters- Overnight: Overnight shelters are available on a first come, first serve basis. Individuals must depart on a daily basis and are permitted to return at a designated time. The majority of these shelters provide a bed, meals, and shower facilities.

Shelters-Temporary: Temporary shelters are shelters that permit individuals to stay for a longer specified duration than overnight shelters, but do not necessarily offer wrap-around services.

Transitional Housing: Transitional housing provides stable housing and wraparound services to individuals in an effort to transition them to Permanent Supportive Housing.

Single Room Occupancy: Single Room Occupancy is affordable housing that is not linked to any other supportive services.

Permanent Supportive Housing: Supportive housing is affordable housing linked to accessible mental health, substance addiction, employment, and other support services. There is no time limit attached to residence in permanent supportive housing.

Public Housing: Public Housing units and housing vouchers provided to individuals by the D.C. Housing Authority after an application process.

Halfway Houses

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions	Capacity/At Capacity	Services to Families	Entry Requirements
EFEC Efforts for Ex-Convicts 1514 8th St, NW 20001 Rudolph Yates, Director	(202) 232-1932 Fax (202) 483-3338 TTY dial 711	Men		DC & Federal PSA & DC residents returning from BOP			
Extended House 810 14th St, NE 20002 Darryl Brown Director	(202) 396-2272 Fax (202) 399-8637 TTY dial 711	Men		Pretrial, Sentenced Misdemeanants			
General Frederic Davidson House 87 New York Avenue, NW 20001 Arthur Rochee, Program Director	(202) 265-4425 Fax (202) 265-3872	Men		Court sanctioned Halfway Back program. Placement thru CSOSA, Court			
Hope Village 2840 Langston Place, SE 20020 Joseph Wilmer, Director	(202) 678-1077 Fax (202) 678-2569 TTY dial 711	Men		DC residents returning from state & BOP facilities Onsite medical services available thru Unity Health			
Mickey Leland House 455/457 Florida Ave, NW 20002 Arthur Rochee, Program Director	(202) 588-1375 Fax (202) 588-0059	Men		Court sanctioned Halfway Back program. Placement thru CSOSA, Court			
(The) Fairview (Reynolds and Associates) 1430 G St, NE 20002 Agnes Brown, Director	(202) 396-8982 Fax (202) 396-9595 TTY dial 711	Women		DC & Federal Halfway Back program. Placement thru CSOSA, Court			

Shelters - Overnight

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions	Capacity/At Capacity	Services to Families	Entry Requirements
801-East Making Life Better Lane, SE Washington, DC 20032 (St Elizabeth's Campus)	(202) 561-4014	Men	Emergency shelter, need to be homeless. 6 month temporary housing, need to speak with intake program manager for entry.	7pm to 7am	Emergency Shelter- 380 Regular. Nov thru March- 432 beds (hypothermia season)	Clothing and emergency shelter; dinner; medical care; employment. Separate 24-hr drug/alcohol recovery program. Transportation to/from downtown 6am leaves 801 E to 10th & G Sts NW, returns 6pm	Photo ID TB test Police Clearance needed for 6 month temporary housing.
New York Ave Shelter 1355-57 NY Ave, NE Washington, DC	(202) 832-2359 (202) 772-4300	Men	Over 18 Meet with counselor at intake	7pm to 7am First come, first served	360	Year-round shelter, housing assistance center with comprehensive medical; substance abuse; medical care; vocational and mental health services.	Photo ID
Adams Place 2210 Adams Pl, NE Washington, DC	(202) 832-8317	Men	Over 18	7pm to 7am First come, first served	180-Hyperthermia weather 150-normal capacity	Year-round shelter, housing assistance center with comprehensive medical care, substance abuse, vocational and mental health services.	Photo ID
Calvary Shelter 928 5th St, NW Washington, DC	(202) 783-6651	Women, elderly & mentally ill	Over 18	5pm to 8am (limited availability)	Unknown	Breakfast, dinner; shower facilities; laundry. Part-time psychiatrist; job & life skills program support groups and case manager.	Photo ID
Central Union Mission 1350 R St, NW Washington, DC	(202) 745-7118	Men	Over 18	5pm to 8am 3 night's wk. Max. 1st come/1st serve	82 beds in emergency shelter	Supper, breakfast; clothing; showers; social services. Bible studies available. Spiritually based residential substance abuse program (see this Chapter).	Photo ID and Social Security Number needed
Community for Creative Non-Violence (CCNV) 425 2nd Street, NW Washington, DC	(202) 393-1909	Men, single	Over 18	24 hour First come, first served opens at 8:30am	1300	Breakfast, dinner, shower facilities, mail receipt, comprehensive medical care (Unity Health), and Case management.	Photo DC ID
DC General (Families Forward) 1900 Mass Ave, SE Washington, DC 20003	Parchelle Brooks (202) 547-5702	Families	Adults with children	Hypothermia 24 hours	Unknown	Meals; social services; medical clinic; case management; housing placement assistance.	Need referrals through Virginia Williams Center
Capital Interfaith Hospitality Network - 4200 Butterworth Place, NW Washington, DC 20016 www.cihn.org	(202) 363-5198 Fax (202) 363-7735 Shayna Hadley, Network Director.	Families	Must be working with a case manager at Capitol Hill Group Ministry.	Night Shelter 7pm to 7am (Daily).	Three families at a time	Provides meals on Friday and Saturday only. Families are to keep their own food in the large open kitchen.	None

Shelters-Overnight

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions	Capacity/At Capacity	Services to Families	Entry Requirements
Father McKenna Center Hyperthermia Shelter 19 I Street, NW Washington, DC	(202) 842-1112	Men	None	Open Nov 1 st – Apr 1 st	About 113 men during the daytime drop in center. 25 Men for overnight hypothermia shelter.	Case management; counseling. Men contribute to the upkeep of the facility. Laundry and shower facilities.	Photo ID
Georgetown Ministry Center 1041 Wisconsin Ave, NW Washington, DC	(202) 338-8301	Men Women	Adults only 18-21 is special consideration	Winter Shelter Nov-Spring. Must return each day No couples or families	10 beds	Goal is to keep the same 10 individuals throughout the entire winter time period. There is access to case management. Try to encourage involvement in services to end homelessness.	No ID needed Proof of PPD Required
Harriet Tubman DC General Shelter Main Hosp Cafeteria	(202) 547-1924	Women	None	24 hours 1st come/1st serve 7pm-7am	100	Meals (dinner), shower and referrals. Day program w/ rehab counselors.	Photo ID preferred
Hermano Pedro 6010 Georgia Ave, NW Washington, DC	(202) 487-2012 (301) 728-8307	Women 18 and over	None.	7pm to 7am First come, first serve	20	Dinner.	None
Madison Shelter- House of Ruth 651 10th St, NE Washington, DC www.houseofruth.org	(202) 667-7001 Shirley Malone, Supervisor	Single, adult women No children	Complete application between 5-6:30pm on Monday, Wednesday or Friday.	Daily intake @ 4:30pm 7pm to 7am First come, first serve.	At capacity. 50 beds	3 meals daily; must see case manager within 3 days of residency; day center & other services; transportation to job interviews. (see this Chapter)	No ID needed
John L. Young Women's Center 119 D Street, NW Washington, DC	(202) 639-8469	Single, adult women	18 and over. Arrive by 7pm. If no beds are available, during hypothermia months, van will pick up women and take them to another shelter.	7pm to 7am First come, first serve.	85 beds	Case management; job training; life skills and drug counseling.	No ID needed
La Casa Shelter 1436 Irving Street, NW Washington, DC 20010	(202) 673-3592 Fax (202) 462-5669, Michael Nettles, Director, Glen Rothen, Social Worker	Men	None.	Must leave trailer daily by 7am and take all belongings. Open 7pm-7am, first come first serve	Unknown	Residents sleep in remodeled trailers. Dinner served at 5pm, showers and laundry facilities available. Substance abuse counseling; AA meeting; employment; housing;	Line up for admission at 4pm and admitted between 5pm to 8pm.
Open Door 425 2nd St, NW Washington, DC	(202) 639-8093	Single, adult women	18 & older	7pm to 7am- If individual returns by curfew each night, they are allowed to keep their same bed. No restriction on duration of stay.	108	Meals, showers, no laundry.	Photo ID needed

Shelters –Temporary

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Calvary Women's Shelter 928 5th Street, NW Washington, DC 20001	(202) 289-2111 Fax (202) 783-4219, Robin Aycock, Executive Director	Homeless (unattached) women 18 and over	Residents must be physically able to perform light duty household chores.	Length of stay according to need.	Must call for availability	Life skills and case management.	Self referrals accepted. Call between 3 and 4pm for intake.
Community for Creative Nonviolence (CCNV) 425 2nd Street, NW Washington, DC 20001	(202) 393-1909, (202) 393-4409, Rico Harris, Program Manager	Men/Women Ages 18-50	Residents must agree to participate in case management services. Over 50 yrs or disabled, have priority.	24-hour shelter First come first serve Intake line forms at 8:30am daily	148 Male Beds- for drop ins. 48 extra beds during hypothermia for women. Regular Residency: Over 300 beds combined	Dinner (4pm to 6 pm). Provides toiletries, towels, showers, sheets and blankets. Lockers available (residents furnish their own lock). Employment assistance.	Applicants must present two forms of ID, including a valid picture ID.
Dwelling Place (S.O.M.E.) 2812 Pennsylvania Ave, SE Washington, DC 20020	David Lemason (202) 583-7602	Men or Women	Abused DC residents over 60 yrs	24 hour emergency intake 3 month maximum, but determined on case by case basis.	7 beds	Social services: clothing; medical; dental housing assistance; counseling. Crisis intervention and transportation.	Photo ID needed TB test

Shelters-Temporary							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Freedom Place - (Safe location)	(202) 667-7001 Shelia DaShiells, Program Director ext 232	Women and Children No boys over 12 yrs	Must be 18 or over. Suffer from Domestic violence and in imminent danger.	24-hour emergency shelter; 90 days with extension available at discretion of staff.	Just moved to new location. Need to call hotline for availability on any given day.	Emergency intermediate housing for abused women and their children.	None
Herspace I - (Safe location)	(202) 667-7001, Fax (202) 667-7047 Nadine Earlington ext 231	Women and Children No boys over 12 yrs	Must be 18 or over. Suffer from Domestic violence and in imminent danger.	24-hour emergency shelter; 90 days, extension available at discretion of staff.	Just moved to new location. Need to call hotline for availability on any given day.	Emergency intermediate housing for abused women and their children.	None
My Sister's Place (Safe Location) P.O. Box 29596, DC 20017 www.mysistersplacedc.org	202) 529-5261, Fax (202) 529-5984, (Adm. Office), Hotline (202) 529-5991 Carlita Moore, Chief Program Officer	Victims of domestic violence who reside in DC and their children	Must be 18 or over. Suffer from Domestic violence and in imminent danger.	24-hour emergency shelter; no boys over 12 yrs; 90 days with extension available at discretion of staff.	Just moved to new location. Need to call hotline for availability on any given day.	24 hour hot-line. DV emergency shelter & transitional housing; support groups for battered women. Advocacy services, legal and job assistance.	None
RAP, Inc. 1949 4th Street, NE Washington, DC 20002	(202) 462-7500, Fax (202) 462-7507 Wanda Langram-Walker, Program Manager	Men	Must be single, living with HIV/AIDS	60 days maximum	5 beds	Wrap around services, mental health, other ancillary services, Intensive case management; medical care; individual counseling, group seminars.	Proof of status, PPD, and photo ID for DC residency verification.
Crossing Place (Woodley House, Inc.) 2731 Connecticut Ave, NW Washington, DC 20008	(202) 328-4070, Fax (202) 328-5845, Kerek Guidry, Director	Men/Women	Adults with chronic mental illness diagnosis.	14 days	8	Transitional "step-down" or crisis stabilization beds to avoid or delay hospitalization.	Direct referrals (202) 518-0061 or through DMH

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
<p>Blair House (Coalition for the Homeless) 635 I Street, NE Washington, DC 20002</p> <p>Coalition for the Homeless-202-347-8870 Director: Michael Ferrell</p>	<p>202) 727-2832/33 Fax (202) 547-1619, Ted Kirt, Program Manager Walk-in interviews Mon, Tues, Thurs 8am to 11am</p>	<p>Over 18 Men</p>	<p>(18 yrs +); no serious medical problems; police clearance and negative TB test, psychosocial report if applicant has a mental illness. Accepts agency referrals and walk-ins. Incarcerated applicants submit Blair House admission form to Intake Coordinator for provisional acceptance. A 2nd personal interview will be arranged upon applicant's release.</p>	<p>6 months</p>	<p>85</p>	<p>Temporary Housing for homeless and residential treatment program. Case management; psychosocial assessment and individual service plan. Workshops on anger management; domestic violence; sexual, physical, mental, emotional abuse, Adult Education program. AA meetings in house. Resources to attend other meetings.</p>	<p>DC Resident requirement Homeless Referral Letter from Coalition for the Homeless</p>
<p>Camille's Place (Our Place, DC) – 1236 Pennsylvania Avenue, SE Washington, DC 20003</p>	<p>(202) 543-6903, Fax (202) 548-2403, www.ourplacedc.org Tonie Rhones, Case Manager</p>	<p>Women</p>	<p>Self referrals only. Will consider referrals from other housing programs, shelters or ½ way houses. For women who are deemed homeless at the point of release from prison/jail.</p>	<p>Minimum 60 days and maximum 6 months.</p>	<p>4 beds/ not at capacity.</p>	<p>Provides supportive housing and case management until woman can secure longer term housing or drug treatment. Assists with clothing, birth certificates, ID, transportation, mental health counseling, medical referrals, aftercare, and HIV education/counseling.</p>	<p>HIV positive, or AIDS diagnosis, and released from jail/prison/halfway house within 6 months prior. No chronic mental health issues or other serious medical issues.</p>
<p>Capitol Hill Group Ministry (Congregation Based Shelter Project) 1338 G Street, SE 20020</p>	<p>(202) 544-3150, Parchelle Brooks, Case Manager brooks@chgm.net</p>	<p>Adult plus one or two children</p>	<p>Families who are homeless and on waiting list for emergency shelter</p>	<p>Out within 4 to 5 months Goal is to move them to transitional housing</p>	<p>2 families</p>	<p>Case management services.</p>	<p>Need referral from the Virginia Williams Resource Center</p>
<p>Careco, Inc – Main Office 6323 Georgia Avenue, NW Washington, DC 20011</p> <p>See Annex B for listing of all locations</p>	<p>(301) 565-9400 Linda Richards, Director of Operations</p> <p>Janna McCargo, (202) 722-7214, Program/Clinical Director</p>	<p>Single Men/Women</p>	<p>For persons with mental illness or diagnosed mental retardation</p>	<p>Varies by location</p>	<p>Housing located throughout the DC area (single and double room occupancy). Varies from 3 beds to 7 beds.</p>	<p>Case management; 24-hour counseling services.</p>	<p>Need referral from DMH, Anchor Mental Health, or Community Connections.</p>

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Community Family Life Services – 305 E Street, NW Washington, DC 20001	(202) 347-0511, Fax (202) 347-0520, www.cfls1.org Claudia Thorne, Director Transitional Housing: Angela Bennett, Program Manager ext 304	Transitional Housing is for homeless families. Single Room Occupancy is for single men and women.	Basic eligibility requirements: DC resident, (18 +), income below \$19,500 or homeless/in imminent danger of homelessness.	No walk-ins. Families must be registered on the homeless rolls.	Trinity Arms-19 families Partner Arms -14 families Milestone Place-35 single men & women	Case management; employment counseling; budgeting & money management; substance abuse, health and wellness counseling; and referral to therapy services.	Must be registered with Virginia Williams Resource Center
Community of Hope - 1413 Girard Street, NW 20009	(202) 232-7356, Fax (202) 232-1014, Kelly McShane, Program Director	Transitional Apartments for families	For families. Eligibility determined by Virginia Williams Family Resource center intake coordinators.	Case by case basis. 6 months to 2 years average stay	15 families. Currently, at capacity.	Case management; substance abuse counseling; medical services; spiritual and motivational guidance; children's activities; tutoring and GED; employment.	Need referrals from Virginia Williams Family Resource Center.
Covenant House 2001 Mississippi Avenue, SE Washington, DC 20020 1922 Ridgecrest Court, SE, Apt. 201 (Apartment residences)	(Intake Office) (202) 610-9632, Fax (202) 610-9640, Patricia Jackson, Resident Manager Apartment Residences- (202) 610-9690, Fax (202) 610-3089	Youth, Ages 18-21 Male and Female	Mothers with infant and/or toddlers accepted Must be employed or job ready	8 to 10 years	17 males 21 females 9 children	Structured living program that provides the opportunity to transition from crisis and dependency to stability and independence. Comprehensive support services include parenting, empowerment sessions, and individual and family therapy.	Interview and committee review before acceptance.
East of the River Clergy-Police Community Partnership (ERCPCP) 4115 First Street, SE Washington, DC 20032 www.ercpcp.org	(202) 563-3690, Fax (202) 563-3693 Yolanda Bland, Program Coordinator	Men	Based interview and acceptance.	Up to 6-months stay. Participant must work or receive regular support.	Up to 30 individuals. Independent Living-\$500/month.	Transitional housing for returning prisoners. Case management, life skills education; financial management; job search assistance.	Rent is \$125 per week. Residents must also contribute to a personal escrow account which is returned upon their completion of the program. CSOSA and other social services referrals, no self referrals.

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Emery Shelter (Work-to-Bed Program) 1725 Lincoln Road, NE Washington, DC 20002	(202) 635-1041, Fax (202) 635-0302 Pam Browner, Program Coordinator	Men	Must be assessed by clinical psychologist and social worker during interview. Submit to drug screening. Must be alcohol and drug free, be employed (at least 20 hrs per week), accept case management services and participate in personal escrow savings program (must save 30% of income).	Up to 6 Months	100 beds.	Transitional housing/Recovery Program Assigned beds, 24-hour access to the facility, secure storage for personal belongings. Program provides meals and toiletries. Rent free.	Must have current TB test within past 6 months, police clearance w/in past 30 days, 3 recent pay stubs, letter from employer (on company letterhead) verifying employment and letter from place applicant is currently residing.
Gift of Peace, Missionaries of Charity 2800 Otis Street, NE Washington, DC 20018	(202) 269-3313, (202) 635-9788, Ms. Masdala	Men/Women Homeless 18 and over	Homeless, HIV + or other medical need	No restriction	45 beds	Residential program for the elderly and physically or mentally challenged	Call for interview.
Good Hope House – 1715 V Street, SE Washington, DC 20020 www.Bethanyinc.org	202-678-4084, Fax (202) 678-4080	Homeless Families	For formerly homeless families in recovery from substance abuse.	2 Years	7 two bedroom apartments	Transitional housing program Individual, group and family counseling; 12-step NA/AA participation; case management; and referrals. After school tutoring for children and encouraged participation in school and community activities.	Referrals from 90-day shelter programs and substance abuse treatment programs
Guest House - 1 East Lurray Ave, Alexandria, VA 22301 www.friendsofguesthouse.org	(703) 549-8072, Fax (703) 549-4717 Kari Galloway, Executive Director director@friendsofguesthouse.org	Female Returning citizens. Single and without children. Accepts DC residents	Female ex-offenders (19 yrs +) with at least one year left on probation or parole. Application process- need criminal history, current physical with PPD results, and autobiography from the offender, which chronicles their life from childhood. Phone panel interview scheduled for possible admittance.	3 to 6 months. After care program lasts 6 to 9 months.	10 women	Residential program with case management, life skills education and peer drug counseling.	Considers referrals from social service agencies, treatment programs and/or Department of Corrections case workers. (Note: CSOSA "probation" clients must be approved for VA supervision by the Interstate Compact Commission.)
Hannah House , HERS Program 612 M Street, NW Washington, DC 20001 www.hannahhouse.org	(202) 289-4840, Fax (202) 289-5425 Rosemary Weathers, Program Director	Homeless (single) women.	Each woman must pursue full time activity while a resident.	6 month maximum.	15 Women	Structured program focuses on housing; employment; recovery and self-awareness; daily AA/NA meetings and/or other participation required.	Referrals required; will interview at jail.

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Hannah House , THEIRS Program 612 M Street, NW Washington, DC 20001 www.hannahhouse.org	(202) 289-4840, Fax (202) 289-5425, Charlyne Braxton, Program Director.	Homeless women and their children 3 to 12 years.	Must apply to program.	Average stay is 1 year	5 family capacity.	Focuses on reunification with children, mother support and parenting classes.	Referrals required.
Harvest House Program (SOME) 1307 First Street, NW Washington, DC 20001	(202) 328-0802, Fax (202) 328-7644, Donald Dixon, Program Coordinator	Women, single and unattached	Women in substance abuse recovery.	120 days. Seamless transfer preferred.	2 beds in Safe House. 8 Beds for women, 3 for men in Residential Treatment program 1 bed for women, 10 for men in transitional.	Required AA/NA participation. SOME does not offer transport to program	Must complete (SOME) program before coming to Harvest House.
Homestretch – 370 S. Washington Street # 400, Falls Church, VA 22046 Services directed to northern Virginia residents.	Christopher Fay, Executive Director www.homestretch-inc.org (703) 237-2035, Fax (703) 237-4540	Families DC families considered Children must be under 18.	Homeless	Placement for 2 yrs	Call for availability	Support services include: childcare support, employment counseling, skills training and job placement assistance, financial skills training, debt repayment and savings assistance, life skills training; on-site GED, ESL and tutoring; college enrollment and financial aid counseling; family focus counseling and age relative social activities; life skills training; legal assistance; age relative social activities.	Call before completing on-line application.
Hope and a Home – 1439 R Street, NW Washington, DC 20009 www.hopeandahome.org	(202) 387-7091, Fax (202) 387-7097, Dan Hall, Executive Director; Rosa Mooten, Office Manager	Families only. Children under 17yrs	Must be eligible for public housing benefits. Each tenant must have income to pay rent and utilities. Income can be from various sources (SSI, Unemployment, Disability, etc). Clients do pay rent. Portion put into interest bearing escrow account.	3 yr maximum stay	18 units -2 (\$1500), 3 (\$1600), 4 bedroom (\$1700) units	Required case management support which includes: Goal setting; budget planning; academic tutoring (children); educational advocacy; employment assistance and job retention counseling	Agency referrals and call-ins accepted. Families need not be registered with the Virginia Williams Center to be considered.
House of Ruth- Familyspace 1421 Columbia Road, NW, Apt 101 20009	(202) 667-7001 Natasha Brown, Program Director	Families	At least one parent must be a recovering addict.	Not disclosed	Not disclosed	One-on-one therapy provided to children affected by trauma, after school programs for children. Women attend treatment programs, receive employment assistance, and work.	Shelter Plus program referrals through Community Partnership for the Prevention of Homelessness.

Transitional Housing							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
House of Ruth- Hope Raising - (Safe location) House of Ruth-A New Way (Safe Location)	(202) 667-7001, Fatu Songuwa ext 252	Women and Children	For abused women and their children.	Not disclosed	Not disclosed	Long term transitional living	None.
House of Ruth New Beginnings 306 S Street, NE Washington, DC	(202) 667-7001	Women	Women in Recovery	Not disclosed	Not disclosed	Transitional housing Dually diagnosed accepted.	None.
Jordan House (SOME) 1509 North Capitol Street, NE Washington, DC www.some.org	(202) 526-8491, Fax (202) 526-0564, Christine O'Connor, Manager	Men/Women Homeless Returning citizens must be first linked to core service agency-Referral must come from case manager.	Must be in a psychiatric crisis, with medication.	2 day assessment period upon entry. Maximum of 14 days, short term stay.	7 beds.	Psychiatric crisis stabilization center for persons experiencing a psychiatric emergency (24 hour staff, on-call access to psychiatrist and mental health therapist; case management, assistance with housing). Provides stabilization to return to previous place of residence.	Referrals considered from all sources, including self-referrals. PPD results, Psychiatric evaluation within 25 hours of referral.
Teen Bridge for Females 3043 15th St, NW Washington, DC 20009 Latin American Youth Center (LAYC) www.layc-dc.org	(202) 319-2047 Contact Liz Wolfe or Danile Malexc	Women Females (16-21), Men ages 16-21 Accepts returning citizens from CFSA.	Group home for females in foster care system. Interview required.	Length of stay determined by emancipation from system, once they turn 18 or 21	6 beds.	Live-in program for females, with 24-hour supportive counseling and case management. Life skills; educational support and referrals; job placement.	CFSA referrals only.
Extended Housing 3636 16th St, NW 20009 Latin American Youth Center (LAYC) www.layc-dc.org	(202) 797-3909 Susan Ruether Program Manager	Runaway and homeless youth Male and Female (18-24) Reentering citizens accepted.	Must be homeless or runaway youth. Must be drug and alcohol free, or participating in a substance abuse treatment program. Must be working part time. Residents pay a percentage of their income Employment not required upon entry, youth must make commitment to actively job search or complete school (GED) but need some sort of income.	6-month maximum in supervised apartments	5 apartments throughout one building	Participants receive case management, mental health services, life skills, employment and educational counseling, and access to recreational and educational activities.	Admission is determined by the staff after an interview. Understanding that while housing is provided, youth responsible for food and daily living needs.

Transitional Housing							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Teen Bridge Program for Males 3033 15th Street, NW 20009 Latin American Youth Center (LAYC) www.layc-dc.org	(202) 319-1820 Fax (202) 518-2358 Daniel Malec, Program Coordinator	Males (16-21) Interview required	Must be drug and alcohol free, or participating in a substance abuse treatment program.	Length of stay determined by emancipation from system, once they turn 18 or 21	6	. Provides a safe and stable home-like environment while residents learn basic life skills training and fulfill educational and vocational requirements. Residents are expected to transition into an independent living situation equipped with skills to live on their own. Residents work and/or attend school; those with jobs are expected to save a percentage of their income. Provides 24 hour staffing.	CFSA referrals only.
Leland Place (S.O.M.E.) 1620 North Capitol Street, NW Washington, DC 20001	(202) 483-0831 Reginald McCall, Director Alphonso White, Addictions Counselor	Men returning from substance abuse treatment.	For formerly homeless men who have completed drug and alcohol program and are 30 days clean. Have their own treatment facility in WV, contact outside agencies for referrals when they have space.	90-days	23	Mandatory AA/NA meetings daily; random urine and breathalyzer testing. Three weeks world-of-work training; job placement assistance; tutoring services.	Residents transition from the Exodus House residential treatment program in West VA.
Luther Place Night Shelter (N Street Village) 1333 N Street, NW Washington, DC 20005	(202) 387-5464, (202) 319-1508, Kristyn Carrillo, Residential Program Manager	Women	High-functioning, unattached homeless women Dually diagnosed accepted.	6 to 12 months.	31 beds. Currently have one opening.	Case management. Substance abuse counseling; individual, group, peer counseling; dinner; showers; laundry; social service referrals.	Must be referred through case management at Bethany Women's Day Center (202) 939-2060
Mary House 4303 13th Street, NE Washington, DC 20017 (Main office) www.maryhouse.org	(202) 635-0534, (202) 635-9025, Fax (202) 529-5793, William Murphy, Director Sharon Murphy, Deputy Director	Homeless and struggling families	Children must be 3 years or younger, no more than 2 children per woman Targets immigrant/refugee families	Up to 2 years. Can transfer to long term supportive housing	Up to 50 families (at all 13 sites throughout Northeast DC and Takoma, MD).	Outreach services: at-risk pregnant women, nutritional home visit program, adult education classes, after school tutoring program, all other services for House participants.	Cost is based on family's needs and income.
McKenna House 1501 Park Road, NW Washington, DC 20010 www.catholiccharitiesdc.org	202-234-2399	Men	Must have income and agree to contribute to a personal escrow account	No walk-ins.	Unknown	Case management, individual and group counseling.	Referrals through Catholic Charities.

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Mt. Carmel House – 471 G Place, NW Washington, DC 20001	(202) 289-6315 Fax (202) 289-1710, Mary B. Klinkenbergh, Senior Program Manager	Women	25 yrs + with no dependents Must have social summary (assessment & progress report) from referral source, drug/alcohol- free at least 30 days prior to admission, enroll in aftercare program/outpatient program; if have mental illness, must be compliance in treatment	Not disclosed	20 women	Women's transitional back-to-work housing program; (). Case management; life skills; job preparation; psychiatric services by appt.	Photo ID and recent medical examination required.
N Street Village 1333 N Street, NW Washington, DC 20005	(202) 939-2057, Fax (202) 319- 1508 Kristyn Carrillo, Residential Program Manager Toni Greenwood, Program Assistant	Women with addictions or mental illnesses	Therapeutic community residence for women with co-occurring addiction and mental illness.	9-18 months during early recovery	21 women for trans. 21 women for group homes. 21 women for recovery housing.	Individual, group counseling.	Must be on DMH rolls and have CSA provider.
New Endeavors for Women 611 N Street, NW Washington, DC 20001 New Generations	(202) 682-5825, Fax (202) 371- 5653, Wanda Robinson	Women Women with children	Must be drug-free 30 days; interested, willing, capable of living independently, set and work toward goals; must save 75% of income, which is returned upon program completion.	Average stay 3- 6 months 2 years	21 women. 15 families	Teaches independent skills through housing, employment, living skills and educational programs, case management and substance abuse counseling.	Referrals through agency or person having strong knowledge of candidate.
New Beginning (Families Forward) 1448 Park Road, NW Washington, DC 20010	(202) 332-1505, Fax (202) 332- 5787, Joi Buford, Shelter Programs Manager	Homeless Families, children 18 and under. Returning citizen with family permitted.	DC Resident must show type of homelessness. No other requirements.	Duration varies based upon degree of homeless	45 families	Case management. No meals. Employment referrals, substance abuse services, partner with other programs to offer educational assistance, assistance for finding housing.	Referrals through Virginia Williams Resource Center

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
New Pathways (House of Ruth) 700 6th Street, NE Washington, DC 20002	(202) 667-7001 Laurette Usher, Contact Person	Single women only	For dually diagnosed women	No restriction	10 women	Case management and referral services.	Women must be assessed by Madison Emergency intake service prior to receiving services
Partner Arms II 4506 Georgia Avenue, NW Washington, DC 20011	(202) 722-6305 ext 206, Fax (202) 722-6307, Victoria Taylor, Senior Case Manager	Families	Drug-free at least 6 months	2 years	14 families	Job placement assistance, skills training, child advocacy counseling & substance abuse counseling.	Accepts referrals from social service providers, no walk-ins.
Partner Arms III 342 37th Street, SE Washington, DC 20018	(202) 640-1950, Fax (202) 536-5411, Patrick Williams, Senior Case Manager	Homeless families	Head of household must agree to cooperate with case management services. No rent, must maintain an escrow account during tenancy	2 years	13 families	Contract mental health, substance abuse, educational counseling and therapy.	Referrals from Virginia Williams Resource Center. Eligibility determined from them.
Reunified Families 2425 Naylor Road, SE Washington, DC 20020	(202) 667-7001, Natasha Brown, Program Coordinator	Women & their children	Mothers must have completed 28-day or longer substance abuse program or documented 30 days clean Mandatory saving program after employed	2 years	13 families	Housing; individual and group counseling; parenting classes; and job training	\$20 monthly service fee
Unity Inn (House of Ruth) – 459 Massachusetts Ave, NW Washington, DC	(202) 667-7001 – Bonita Ward, Program Coordinator	Women	Mandatory savings program after employee	Not disclosed	Not disclosed	Case managers and referral services	Referrals from other House of Ruth programs \$20 monthly service fee
Pathways to Housing 101 Q Street, NE Suite G Washington, DC 20002 www.pathwaystohousing.org	202) 529-2972, (202) 529-2976, Fax (202) 529-2976, Josh Greene, Clinical Director, Christy Respress, Program Director	Homeless living with major mental illness or substance abuse.	Applicants must be able to demonstrate homelessness, mental illness and income. ACT level of services.	No restriction	300	“Housing First” model arranges independent housing then assists with case management and referrals to promote community integration. ACT crisis assessment: intervention; medication prescription; case management and supportive therapy, psychosocial rehabilitation and skill development.	Walk-ins and referrals from all sources considered.

Transitional Housing

Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
RAP, Inc. 1949 4th Street, NE Washington, DC 20002	(202) 462-7500, Fax (202) 462-7507, Wanda Langram-Walker, Program Manager	Adult Men and Women	Must have HIV/AIDS and substance abuse issues. Must pay 30% of their monthly income, no income is okay.	6 month maximum	21 beds a year.	Wrap around services. Intensive case management; medical care; individual counseling, group seminars.	Proof of status, PPD, proof of addiction and ID.
Subira (Progressive Life Center) 1933 Montana Avenue, NE Washington, DC 20002	Mark Booth, Program Director (202) 842-2016 ext 1298, Fax (202) 846-0604	Men and Women 18- 21 years	Youth must work and/or receive educational/vocational training. Independent living program for youth transitioning to the community from a DYRS commitment.	Structured 18-month	15 to 16 residents	Youth reside autonomously in apartments located in SE Washington, DC and Hyattsville, MD. Participants receive \$580 monthly stipend along with essential clothing and food.	Referrals from DYRS and CFSA.
Samaritan Inns 2523 14th St, NW Washington, DC 20009 (for a list of Samaritan Inns programs see Annex A)	(202) 667-8831, Fax (202) 667-8026 Jesse Washington, Program Coordinator	Men and Women who are recovering substance abusers.	Residents must document 6 months drug free or transition through a recognized substance abuse program. Residents must work or received regular income.	4-6 month after 28 day detox program completion.	6-7 individuals	Six-month structural program where they receive drug education and counseling; attend AA/NA meetings daily; learn job retention and life skills. Residents graduate to independent living programs (SRO's) where they continue to receive case management support.	Walk-in admissions and referrals At present time they are only taking referrals from their own programs.
Thea Bowman House (SOME) 4065 Minnesota Ave, NE Washington, DC 20019	(202) 399-1385, Fax (202) 399-1385, Vania Fields, Program Manager	Homeless families with children (under 17 years)	Applicants must be working and agree to pay 30% of their income. Applicants must be able to demonstrate 6 months clean time, proof of income, TANF and Housing Choice Voucher eligibility and birth certificates for any family member that will reside in the program.	2-year transitional program. (Zero alcohol and drug tolerance (random urine testing).	Currently have a waiting list with 30 people. Movement off waiting list is relatively quick.	Financial literacy, job-training, case management, life skills, case management required.	Applicants must be able to demonstrate 6 months clean time, proof of income, TANF and Housing Choice Voucher eligibility, birth certificates for anyone residing in program.
Zagami House (S.O.M.E.) 1701 19th Street, SE Washington, DC 20002 Barnaby House (S.O.M.E.) 740 Barnaby St, SE Washington, DC 20032 Chesapeake Street (S.O.M.E.) 730 Chesapeake Street, SE Washington, DC 20032	(202) 292-4407 (202) 292-4420 202.292.4420	Homeless Families with Children (younger than 17)	Eligible for DCHA. Orientation required.	Long-term programs. Approximately 5 to 7 year programs.	65 units total.	After school enrichment programs, family case management services, job training, employment assistance, financial guidance.	Hotline Number : 202-292-4494 If asked for contact information, waitlist is open. If not asked, waitlist is closed.

		Transitional Housing					
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Wanda Alston House 804 46th Street, NE Washington, DC 20019	(202) 636-1646, (202) 636-1636 Luvinia Washington, House Manager	LGBT (17 -24 yrs)	Must be involved in structured activity (school, employment, vocational training) and agree to abide by program rules and pay a percentage of income toward rent.	18-months	8 rooms. One room with double occupancy.	Do offer various programs depending on site.	Applicants must be interviewed by Transgender Health Empowerment. Call (202) 636-1635. Take walk-ins and referrals
Willis Green Manor 4425 Nanny Helen Burroughs Ave, NE Washington, DC 20019	(202) 397-7886, Fax (202) 397-8980 Doreen Wilkinson, Contact Person	Men and Women	Must have an income and be clean for 3 months. Basic (non-Housing Choice Voucher) rent is \$285. Per month Units subsidized by the DCHA	No restriction	60 rooms	Shared kitchen and bath on 4 floors. Program offers case management; employment assistance; and recovery support.	Photo ID, birth certificate, social security card needed.

Single Room Occupancy							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions <i>(Duration of Stay)</i>	Capacity/At Capacity	Services to Families	Entry Requirements <i>(Referral Info, Cost)</i>

Currently, there are several programs in the District of Columbia that self-classify as Single Room Occupancy housing. However, we were unable to obtain the necessary information from these providers to include in this resource.

Permanent Supportive Housing							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Anna Cooper House (S.O.M.E.) 1338 R Street, NW Washington, DC 20009	(202) 328-6644, Fax (202) 667-5475, Treina Williams, Program Supervisor Telephone 202-797-8806 ext. 1137, Alyssa Fields for pre-screening	Formerly homeless Co-ed 18 and up	Single, low-income Section 8, SSI, SSID; handicapped (ambulatory). Must be able to live independently. After pre-screening, individual will be contacted for face to face interview w/in about a week. Long-term drug users must be 6 months clean and in treatment, need documentation.	No restriction on stay.	50 residents/ at capacity (Men on first 3 floors, women on top floor).	Assist with finding resources for education, child custody, meet with service coordinator to discuss goals and guide individual in finding services. Must pay 30% of income as rent and participate in house meetings.	Proof of income (Unemployment does not count) Must register with DC housing authority.
Building Futures – 1440 Meridian Place, NW Washington, DC 20010 www.buildingfutures.org	(202) 639-0361 Fax (202) 639-0276	Men/Women	Families and individuals living with a disability like HIV/AIDS. Applicants must be low-income	None.	Sunflower House - 20 units Daffodil House – 32 units Marigold House -7 units Current waitlist for units. May take up to 8 years for availability.	Special needs housing, provide medical case management for residents, weekly support group meetings, emergency assistance for rent, utilities, food vouchers, transportation, programs available for children.	Rent based on ability to pay
Christ House – 1717 Columbia Road, NW Washington, DC 20009	(202) 328-1100 Fax (202) 232-4972, Mary Jordan, John Craig, Intake Coordinators www.christhouse.org	Men and Women	Must be ambulatory. For homeless men and women with acute illnesses. (health care recovery facility)	No maximum stay, so long as they have a health need individuals may stay.	34 beds	Full-time medical staff, social workers, case management. Transportation and escorts to doctor appointments. Meals. AA/NA services.	Referrals recommended but not required. Entry requirements determined by Intake coordinator.
Dorothy Day House 503 Rock Creek Church Rd, NW Washington, DC	(202) 882-9649 Kathy Bolen	Women and children	Women with children, with need.	Long term, no restriction on duration of stay.	House accommodates up to 5 families. Currently 5 adults and 9 children living in house.	Admission is a consensus of residents in the house. Counseling, daily meals (when available), laundry (no dryer); No TV and no spanking your children.	Must be referred by Catholic Charities
Families Forward 1012 14th Street, NW, Suite 105 Washington, DC 20005	(202) 639-9760 Fax (202) 639-9763, Ruby King-Gregory, Director	Homeless Families (Men and Women)	Deemed homeless at Virginia Williams Resource center-homeless intake center. DC residents.	No maximum stay. 2 year program timeframe.	36 family units (2 separate programs with 18 units each).	Case management; employment; computer training; web page development training	Families must first be assessed by the Virginia Williams Resource Center (202) 526-0017
Freedom House 2125 18th Street, SE 20020 Shalom House 1876 4th Street, NE 20002	(202) 797-8806 (202) 832-3451	Men and Women, unattached.	Must have income SSI, IDA, Housing Choice Voucher eligible.	Not disclosed	Not disclosed	Single rooms, common social areas and shared baths for unattached men and women. Must pay 30% of income as rent and participate in house meetings.	Proof of Income

<u>Permanent Supportive Housing</u>							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Housing Counseling Services, Inc. (HIV/AIDS Gatekeeper Program) 2410 17th Street, NW 20009	(202) 667-2681, Fax (202) 667-0862, Elsa Zambrano, Contact Person	Individuals and families living with HIV/AIDS in DC.	Have to be HIV positive and make no more than \$45,100 for single person (housing and rental assistance). Numbers vary depending on family size.	Lifespan unless terminated from program due to behavior or make more than the allotted amount	Funding determines how many people they can assist. There is currently a waiting list of 900.	Short-term Financial Assistance (STA) toward housing related expenses (rent/mortgage, utilities). Maintains database of support services available to persons living with HIV/AIDS, Housing counseling, Case management referrals.	Can be self-referred but they do refer them to case managers. Assistance is based on income. Some participants are required to pay 30% of their income.
Holly House (Woodley House, Inc.) - 7426 13th Street, NW 20012	(202) 291-6696, (202) 265-1629 Orlando Portugal, Director	Men/Women	Mentally ill and homeless. Eligible residents receive benefits through DMH. Need some sort of income to cover rent (\$1059) (SDI/SSI). Can apply for optional state payment through DMH to cover costs.	No maximum stay.	8 beds.	Long-term residential program for the mentally ill and homeless, unattached adults. 24 hours supervision. Structured day program through core service agency.	Referrals contact Woodley House Central Intake. Individuals come from transitional program.
Jeremiah House (S.O.M.E.) #218th Street, SE Washington, DC 20003 www.some.org	(202) 543-4901, Fax (202) 546-9560, Veronica Gilliard, Service Coordinator Belinda Sealey, Program Coordinator, Yolanda Morris, Contact Person	Homeless Men/Women NO children. Allowed to be pregnant, but must leave upon giving birth	Must be eligible for Housing Choice Voucher and receiving an income (SSI, SSDI, part time employment, proof of working for at least 90 days (Proof of income (not more than 23k-24k a year) Unemployment not accepted as income. Residents pay 30% of their gross income for rent.	No limitation on stay	54	Psychosocial assessment if connected with mental health agency. Case management, drug counseling. SOME services offered here.	Professional verification stating homeless status. Photo ID, SSN Card Birth certificate, 6 months documented clean time, Police clearance, TB test.
Milestone Place (CFLS) 4860 Fort Totten Drive, NE Washington, DC 20011	(202) 635-1744, (Fax) (202) 635-3047, Lolita Mason, House Manager	Adult women, men, elderly, and physically challenged. No families or children.	Must be homeless and low-income individuals. Must be clean for at least 6 months. Only pay 30% of income towards rent. Need positive standing with DC Housing Authority.	No mandated restriction on stay.	35 apt. units (1, 2,3 bedrooms)/ 3 current male openings-over 100 individuals on the waitlist.	Employment counseling, case management, p/t nurse, emergency food available.	Applicants must apply at CFLS 305 E Street, NW (202) 347-0511.
Miriam's House - P.O. Box 73618, DC 20056 (Safe house) www.miriamshouse.org	(202) 667-1758, Fax (202) 667-4638, Deborah Randolph, Clinical Director Ext. 109 is intake	Homeless, HIV positive, and DC resident. Accept children.	Individuals pay 30% of their income towards rent but income not required to enter.	No mandated restriction on duration.	15 women	Transitional housing for women living with AIDS, some of whom have their child(ren) with them; counselor; personal care aide; substance abuse counselor.	Process requires clean drug tests, and interview process.
New Horizons New Hope (New Endeavors for Women) 611 N Street, NW , Washington, DC	202) 682-5825, Fax (202) 371-5653, Wanda Robinson	Families HIV infected single women	Must be drug-free 30 days; interested, willing, capable of living independently, set and work toward goals; must save 75% of income.	No restriction on stay	17 families 10 women	Teaches independent skills through housing, employment, living skills and educational programs, case management and substance abuse counseling.	Referrals through agency or person having strong knowledge of candidate.

Permanent Supportive Housing							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
St. Matthias Mulumba House 621 Rhode Island Ave, NW Washington, DC 20001	(202) 234-2399, Fax (202) 234-3493 Christopher Ruffin, Intake Coordinator	Men (18+)	Homeless, in recovery and documented one month drug free, willing to work, capable of living independently. Working residents pay 30% per month (service fee) of their monthly income.	No limitation on stay.	30 beds.	3 meals daily; job counseling; medical care and educational development during 3-month rehabilitation period.	Agency referrals preferred

Public and Assisted Housing							
Housing Resource	Contact Info	Population Served	Eligibility Criteria	Restrictions (Duration of Stay)	Capacity/At Capacity	Services to Families	Entry Requirements (Referral Info, Cost)
Public Housing and Housing Vouchers District of Columbia Housing Authority 1133 North Capitol Street NE Washington, DC 20002	202-535-1000 www.dchousing.org	Low income families	Anyone can apply but the following preference groups exist: homeless, unit unfit for habitation, unit code violations, involuntarily displaced, inaccessibility of unit, rent burden, working family, elderly, and disabled.	Anyone convicted of a sex offense that results in a lifetime registration requirement AND anyone convicted of manufacturing or distributing methamphetamines on government property.	8,000- Public Housing beds 11,000- Housing Vouchers Waitlist is currently 39,000.	None	Must apply online or through a paper application. Once name reaches top of waiting list, based on date, time, and preference, you will be scheduled for an interview.

Annex A

Samaritan Inns

Samaritan Inns (Independent Living Programs)		
Lazarus House 2532 14th Street, NW 20010	Tabitha's House 5020 Colorado Ave, NW 20011	Elijah House 1316 Euclid Street, NW 20009
24 hour staffed facilities. Residents must attend group counseling sessions and abide by strict house rules. Residents cook their own food and have private baths. Activity in common areas is video monitored. \$390 month (small rooms), \$435 month (large rooms)		

Annex B

Careco, Inc.

Careco, Inc. Housing Locations		
Careco Mental Health Services 3619 South Dakota Ave., NE Washington, DC 20018	3	202-584-7888
Careco Mental Health Services 3619 South Dakota Ave., NE Washington, DC 20018	6	202-408-9505
Careco Mental Health Services, Inc. 4208 19th Pl., NE Washington, DC 20019	6	202-682-3915
Careco Mental Health Services, Inc. 1412 35th St., SE Washington, DC 20020	6	202- 686-3936
Careco, Inc. 1358 Jefferson St., NW Washington, DC 20011	6	202- 483-9598
Careco, Inc. 813 Whittier Pl., NW Washington, DC 20012	6	202-682-3321
Careco, Inc. 1920 6th St., NW Washington, DC 20001	6	202-518-0496
Careco, Inc. 4603 Blagden Ter., NW Washington, DC 20011	7	202-291-4675
Careco, Inc. 4405 117th St., NW Washington, DC 20011	6	202- 722-1487
Careco, Inc. 1631 Webster St., NE Washington, DC 20017	6	202-289-4444



APPENDIX H: Public Housing Factsheet

District of Columbia Housing Authority

Client Placement Division
1133 North Capitol Street, NE, Suite 178
Washington, DC 20002

Tel: (202) 535-1000
DC Relay (202)855-1234
Fax: (202) 535-2043

KEEP YOUR LONG TERM HOUSING OPTIONS OPEN

APPLY FOR HOUSING ASSISTANCE THROUGH THE DISTRICT OF COLUMBIA HOUSING AUTHORITY ANYONE MAY APPLY

Any individual who is subject to a lifetime registration requirement under any sex offender registration program OR any individual who has ever been convicted of drug related criminal activity for the manufacture or production of methamphetamine or production of methamphetamine on the premises of federally assisted housing is PROHIBITED from admission.

TYPES OF HOUSING ASSISTANCE

The District of Columbia Housing Authority (DCHA) administers 3 subsidized housing programs, **Public Housing, Housing Choice Voucher Program** (formerly named Section 8), and **Moderate Rehabilitation**, with a separate waiting list for each program. Rental assistance is provided to low income families through each housing program and the assistance is based on household income.

TO APPLY FOR HOUSING ASSISTANCE FOR THE FIRST TIME

1. Go to www.dchousing.org
2. Click on **Apply for Housing** on right side of the screen
3. Fill in the requested information in each field
4. Click on the **Submit Securely** button at bottom of application page to submit through our secure website.

To download and print a hard copy of the application:

1. Click on the link at the top of the page
2. Mail the application to the address provided on the web page.

TO UPDATE INFORMATION ON AN APPLICATION THAT YOU PREVIOUSLY SUBMITTED

1. Go to www.dchousing.org
2. Click on **Update Housing Application** on right side of the screen
3. Fill in the requested information in each field
4. Click on the **Submit Securely** button at bottom of the update page to submit through our secure website

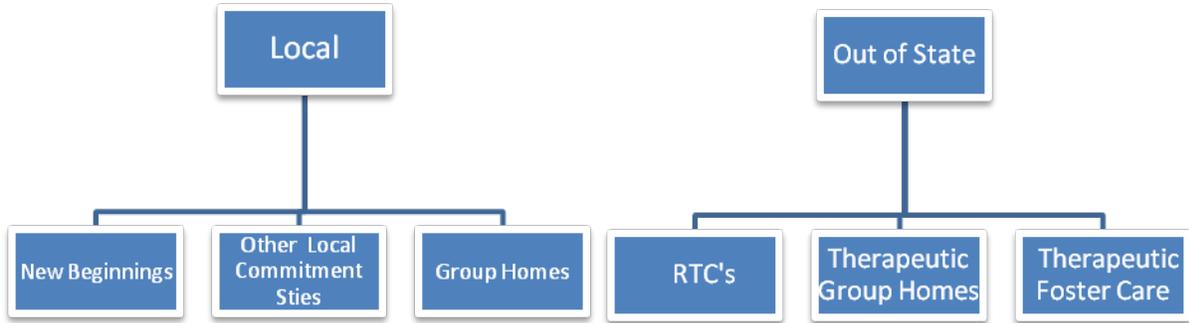
To download and print a hard copy of the update form:

1. Click on the link at the top of the page
2. Mail the update form to the address provided on the web page.

If you would like to schedule an appointment in person, you may call 202-435-3245.

Please note that the waiting list is very long and applications are selected based on date and time of application and preference.

APPENDIX I: DYRS Reentry Services Chart



DYRS	Services Provided to Local District of Columbia Committed Youth	Services Provided to Out of State District of Columbia Committed Youth
Transition	<ul style="list-style-type: none"> • Youth Family Team Meetings • Referrals to Core Service Agencies (DMH) • Referrals & Collaboration with Sister Agencies, where appropriate (DDS, CFSA, HSCSN) • GPS/Intensive Third Party Monitoring • Transition School (See Forever) • Referrals to Lead Entities • Educational Placement Identified • Living Arrangements Identified • Home Assessment and/or Interview with potential community-based placement providers 	<ul style="list-style-type: none"> • Youth Family Team Meetings/Discharge Planning Meetings • Referrals to Core Service Agencies (DMH) • Referrals & Collaboration with Sister Agencies, where appropriate (DDS, CFSA, HSCSN) • GPS/Intensive Third Party Monitoring • Transition School (See Forever) • Referrals to Lead Entities • Educational Placement Identified • Living Arrangements Identified • Home Assessment and/or Interview with potential community-based placement providers
Reentry	<ul style="list-style-type: none"> • Youth Family Team Meetings • Initial Appointments with Core Service Agencies (DMH) and Lead Entity/Service Coalition Providers • GPS/Intensive Third Party Monitoring • Drug Testing 	<ul style="list-style-type: none"> • Youth Family Team Meetings • Initial Appointments with Core Service Agencies (DMH) and Lead Entity/Service Coalition Providers • GPS/Intensive Third Party Monitoring • Drug Testing
Aftercare	<ul style="list-style-type: none"> • Youth Family Team Meetings • Aftercare Services through the Service Coalitions to include: Mentoring, Tutoring, Recreational, Life Skills, Curfew Monitoring, Functional Family Therapy, GED, Employment and/or individualized services • Consistent Meetings with Case Manager 	<ul style="list-style-type: none"> • Youth Family Team Meetings • Aftercare Services through the Service Coalitions to include: Mentoring, Tutoring, Recreational, Life Skills, Curfew Monitoring, Functional Family Therapy, GED, Employment and/or individualized services • Consistent Meetings with Case Manager

APPENDIX J: CSS Reentry Services Chart

CSS	Services Provided to District of Columbia Youth
Transition	Referrals to Core Service Agencies (Dept. of Mental Health) Drug testing/treatment referrals to APRA Drug Education (MAC Groups) Educational Placement Assistance Curfew Monitoring – calls and face to face visits Referrals to Employment Services/Vocational Training/GED Educational Advocates Tutoring Third Party Monitoring Mentoring Individual Counseling Services Family Group Conferencing BARJ Programming (Pretrial and Sanctioning)
Reentry	Referrals to Core Service Agencies (Dept. of Mental Health) Drug testing/treatment referrals to APRA for treatment if needed Drug Education (MAC Groups) Educational Placement Assistance Curfew Monitoring – calls and face to face visits Referrals to Employment Services/Vocational Training/GED Educational Advocates Tutoring Third Party Monitoring Mentoring Individual Counseling Services Family Group Conferencing BARJ Programming (Pretrial and Sanctioning)
Aftercare	Referrals to Core Service Agencies (Dept. of Mental Health) Drug testing/treatment referrals to APRA for treatment if needed Drug Education (MAC Groups) Educational Placement Assistance Curfew Monitoring – calls and face to face visits Referrals to Employment Services/Vocational Training/GED Educational Advocates Tutoring Third Party Monitoring Mentoring Individual Counseling Services Family Group Conferencing

Appendix K: DMH Reentry Services Chart

DMH	Services Provided to District of Columbia Youth
Transition	<p>High Fidelity Wraparound- DMH has two Providers: 1) DC Choices and 2) Healthy Families Thriving Community (HFTC) Collaboratives (Far Southeast Collaborative, Georgia Avenue Collaborative)</p> <p><i>Wraparound</i> is a team-based planning process intended to provide individualized, coordinated, family-driven care to meet the complex needs of children who are involved with several child- and family-serving systems (e.g. mental health, child welfare, juvenile justice, special education), who are at risk of placement in institutional settings, and who experience emotional, behavioral, or mental health difficulties. The wraparound process requires that families, providers, and key members of the family’s social support network collaborate to build a creative plan that responds to the particular needs of the child and family. Team members then implement the plan and continue to meet regularly to monitor progress and make adjustments to the plan as necessary. The team continues its work until members reach a consensus that a formal wraparound process is no longer needed.</p> <p>Functional Family Therapy (FFT) is an empirically grounded, well-documented and highly successful evidenced-based home-based family intervention for at-risk and juvenile justice involved youth.</p> <p>Multisystemic Therapy (MST) is an intensive family and community-based evidence-based treatment program that focuses on the entire world of chronic and violent juvenile offenders, their homes and families, schools and teachers, neighborhoods and friends.</p>
Reentry	<p>High Fidelity Wraparound</p> <p>Community-Based Intervention(CBI) - Community-Based Intervention services are time-limited intensive mental health intervention services delivered to children, youth and adults and intended to prevent the utilization of an out-of-home therapeutic resource by the Consumer (i.e., psychiatric hospital or residential treatment facility). Community-Based Intervention is primarily focused on the development of Consumer skills and is delivered in the family setting in order for the Consumer to function in a family environment. These services are available twenty-four hours a day, seven days a week.</p> <p>Functional Family Therapy (FFT)</p> <p>Multisystemic Therapy (MST)</p>
Aftercare	<p>Day Services - Day Services is a structured clinical program intended to develop skills and foster social role integration through a range of social, psycho educational, behavioral and cognitive mental health interventions. Day Services are rendered only in the setting of a DMH-certified Community Mental Health Rehabilitation Services Agency and are not eligible for reimbursement when provided in the home, community setting or residential facility of 16 beds or less. Day Services are curriculum-driven and psycho educational and assist the Consumer in the retention or restoration of community living, socialization and adaptive skills</p>

APPENDIX L: APRA Reentry Services Chart

APRA	Services Provided to District of Columbia Youth
Transition	<p>Adolescent Substance Abuse Treatment Expansion Program (ASTEP) Provider Network The ASTEP network currently consists of four co-occurring capable chemical dependency treatment providers within the District:</p> <ul style="list-style-type: none"> • Federal City Recovery Services- HYPPER (Ward 6) • Hillcrest Children and Family Center (Ward 1) • Latin American Youth Center (Ward 1) • Riverside Treatment Center (Ward 8) <p>All of these treatment providers conduct a comprehensive assessment of every youth seeking services (using the GAIN I and GAIN Q instruments). This assessment is designed to determine the specific needs of each individual, not only in addiction recovery, but in a broad range of life areas (mental health, family issues, legal issues, vocational/educational). This assessment data is used to generate an individualized treatment plan which will serve as a blueprint for adopting a sober and productive lifestyle.</p>
Reentry	<p>Adolescent Substance Abuse Treatment Expansion Program (ASTEP) Provider Network Clients at ASTEP providers receive a broad range of services designed to address the full gamut of needs areas. These include:</p> <ul style="list-style-type: none"> • Individual psychotherapy • Group psychotherapy • Family psychotherapy • Case management • Advocacy <p>Clients experiencing reentry are offered a safe and productive outlet for sharing their experiences as well as a venue for modeling and practicing adaptive behaviors and developing a sober peer network. Family interventions are an effective tool to reinforce sobriety in the primary environment and undergird new behavior patterns. This reinforcement contributes to lower recidivism and better long-term outcomes.</p>
Aftercare	<p>Case Management and Discharge Planning Services From the beginning of treatment, needs for ongoing ancillary services are identified and addressed. These needs areas may include:</p> <ul style="list-style-type: none"> • External mental health services • Housing • Job training and placement • Coordination with school-based services • Primary medical care <p>As required, coordination with these services is incorporated into the treatment plan. As the youth nears discharge from chemical dependency treatment, a discharge plan is developed incorporating a plan for the services the youth will require post-discharge. Also included is a summary of tools he/she will use to maintain sobriety into the future.</p>

APPENDIX M: CFSA Reentry Services Chart

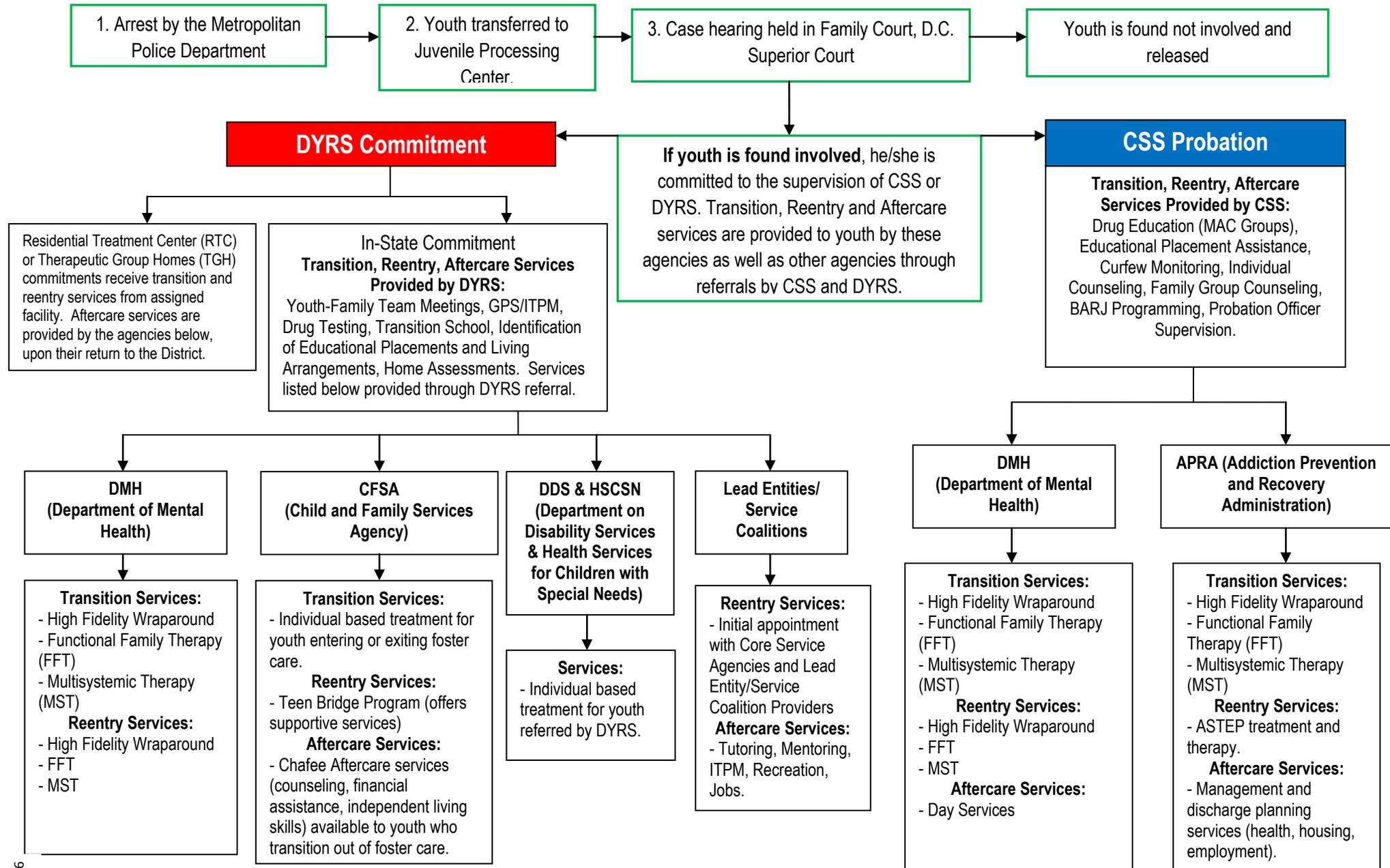
CFSA	Services Provided to District of Columbia Youth
Transition	<p>Entering Foster Car</p> <p>CFSA provides a range of out-of-home care placements, ranging from traditional foster family care to independent living and special residential treatment facilities. Our services are individually based per treatment recommendations with the focus of placing children and youth in the most family-like setting possible regardless of initial entry or re-entry into the foster care system. The Agency also strives to expand placement capacity for youth with particular needs.</p> <p>Recommendations regarding initial placements (i.e., children entering care for the first time) are made by trained social workers who must consider the child’s immediate needs, the likelihood of their ability to thrive in a family-based setting, and their best interest in regards to a permanency goal. Considerations may include the youth’s preferences (if old enough to express them); current functioning and behaviors; medical, educational and developmental needs; past experiences; religion and culture; and connection with their community. Among the key factors for placement decisions is the extent to which individual placement resources and supports will help to facilitate a positive permanency outcome for the child or youth.</p> <p>Exiting Foster Care</p> <p>The full transition planning process occurs in two phases. The first includes the Ansell Casey Life Skills Assessment commencing within 30 days of the youth’s 15th birthday along with an Individual Transitional Independent Living Plan (ITILP) meeting. The second phase begins 30 days prior to a youth’s 18th birthday with the Youth Transition Plan (YTP) meeting. The entire process is always youth-driven. Both ITILP and YTP transition planning meetings are co-facilitated by the Office of Youth Empowerment (OYE) Independent Living (IL) specialists and social workers who provide a summary of ongoing services/supports to the youth, as well as a summary of the youth’s progress towards the identified goals. Transition planning seeks to identify overarching expectations and responsibilities not only for the youth but for his or her family, extended family members, caregivers, social workers, and other identified stakeholders.</p> <p>The formal YTP process supports understanding of the complexities of a youth’s transition from foster care as well as the ability to acquire the skills necessary as part of the transition to adulthood and exit from the foster care system. In addition, the YTP meetings provide a forum for the youth to make known his/her individual concerns about moving on to independence.</p> <p>Both ITILP and YTP meetings require teaming and open dialogue with stakeholders (family, identified friends and adults of importance to the youth, community-members, service providers, etc.) who are invested in the youth’s future. Together, the youth and his or her team develop a sound plan for transition. If necessary, the transition team will assist the youth to refocus goals, as appropriate.</p>
Reentry	<p>CFSA’s array of placements includes the Teen Bridge program, which is offered by two DC community-based organizations. The Teen Bridge program serves teens who have a history of behavioral concerns and who are not ready for traditional independent living programs (ILPs). Teen Bridge programming provides a short-term placement (maximum of six months) in a supervised group home environment for youth aged 16 to 21 with highly structured preparation for self-sufficiency. This program has been successful for youth who have had a history of running away and placement disruptions, as well as those who are returning from residential treatment centers (RTCs), and/or youth who did not adjust well to living independently in an ILP setting.</p> <p>Similar to more traditional programs, daily structured programming and a behavior management system are offered through the Teen Bridge experience. These settings also provide the same services as traditional group homes.²¹ The hallmark of the Teen Bridge program, however, is the heightened structure, boundaries and intensive work by the staff which has proven more useful for those youth who are challenged by too much independence. A lack of structure can sometimes be a deterrent for maintaining jobs, curfews or healthy relationships with landlords and others. The foundational services, combined with the extra support provided by Teen Bridge programming, affords youth the opportunity to stabilize and focus their attention on developing important life skills and becoming better prepared for independence and adulthood.</p> <p>The Teen Bridge program has also shown success with stabilizing and providing services to the male youth that have been placed. This includes a number of very high-risk and difficult-to-place youth with compound challenges, e.g., criminal history.</p>

²¹ Traditional group home services include on-site psycho-educational groups, medication management, social skill development, etc. Additionally, the Teen Bridge program offers individualized and group counseling, alcohol and substance abuse services, educational and vocational support services, therapeutic recreation, and health care services. These are provided either onsite or by external providers. Community connections and transportation services maintain provision of supportive services with external organizations.

Aftercare	<p>The <i>Foster Care Independence Act of 1999</i> established the John H. Chafee Foster Care Independence Program. As a result of this legislation, OYE is able to use federal funding to provide support and services to youth who leave foster care after age 18 but who have not yet reached age 21. The goal of the Chafee Aftercare Services is to help improve outcomes for youth transitioning from foster care and to help alleviate homelessness. The program also requires that participants recognize and accept their personal responsibility for making the successful transition from adolescence to adulthood and reaching self-sufficiency.</p> <p>Chafee Aftercare Services Eligibility:</p> <ul style="list-style-type: none"> • At least age 18 years but less than 21. • Transitioned out of CFSA care. • Proof of financial need (i.e. signed lease, utility bill, etc.). • Chafee funding is the sole subsidy for meeting the youth’s housing needs, i.e., the youth cannot be receiving Rapid Housing Funds, Section 8, or funding for transitional living programs. • Enrolled in an educational or vocational program. • Demonstrates satisfactory academic standing or employment (as applicable). • Participates in life skills training or agrees to complete money management and budgeting workshops. <p>The following services are included under the program:</p> <p>Financial assistance (when available and based upon need) - an eligible youth may receive up to \$4,800 of accumulated payments and up to \$800 per month to cover the cost of rent, utilities, and security deposits.</p> <p>Counseling - youth who struggle with daily or personal challenges related to transitioning to adulthood are eligible for counseling.</p> <p>Independent living skills training - services include but are not limited to career planning, communication skills, daily living, education, home life, housing, money management, self care, social relationships, study skills and work life.</p> <p>Assistance with referrals to community resources - assistance from the neighborhood collaborative may include but is not limited to financial, medical, child care, and/or other services on an as-needed basis.</p>
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District of Columbia Juvenile Reentry Process and Services

The following illustration depicts the juvenile reentry process and the services provided to a youth that is found involved and as a result, under the supervision of Court Social Services (CSS) or the Department of Youth Rehabilitation Services (DYRS).



Appendix O: List of Workgroup Participants

Education and Training Workgroup Participants:

- Andre L. Booze, Community Member
- Cedric Hendricks, Court Services and Offender Supervision Agency
- Lisa Henig, D.C. Job Corps
- Rodney Mitchell, Reentry Legal Services
- Vernard Portis, Opportunities Industrialization Center of Washington, D.C.

Employment Workgroup Participants:

- Tina Brown, YouthBuild
- Bill Cimino, Federal Bureau of Prisons
- James Clopton, Department of Employment Services
- Valerie Emerson, Department of Corrections
- Dr. James C. Greene, Department of Corrections
- Robert Greene, Department of Corrections
- Cedric Hendricks, Court Services and Offender Supervision Agency
- Larry W. Hicks, Department of Employment Services
- Carl Johnson, Court Social Services
- Charles Jones, Department of Employment Services
- Nathaniel Massaquoi, Office of the Attorney General
- Ed Moody, Department of Employment Services
- Elijah Moses, YouthBuild
- Judith Phillips, Department of Employment Services
- James C. Riddick, Jr., Department of Corrections
- Patricia Ross, Department of Employment Services
- Michael Smalls, Department of Employment Services
- Tawana Stewart, Justice Grants Administration
- Charles Thornton, Office on Ex-Offender Affairs
- Phil Whatley, Department of Employment Services
- Pete Wilner, Council for Court Excellence

Physical, Mental, and Substance Abuse Workgroup

- John D. Bess, Public Defender Service
- Rodney Brown, Department of Employment Services
- April Frazier, Public Defender Service
- Cedric Hendricks, Court Services and Offender Supervision Agency
- Sarah Joseph, Father McKenna Center
- Wallace Kirby, University Legal Services
- Brent Kiser, Federal Bureau of Prisons
- Diana Lapp, Unity Health Care
- William T. Lawson, National Homecomers Academy
- Henry Lesansky, Department of Corrections
- Cherryl Litsey, Federal Bureau of Prisons
- Ilana Marmon, University Legal Services
- Cortez McDaniel, National Homecomers Academy/ Father McKenna Center
- Kenyan McDuffie, Deputy Mayor for Public Safety and Justice
- Michele May, Department of Mental Health
- Jordana Randall, United States Parole Commission
- Giona Robertson, Department of Corrections
- Gretchen Rohr, University Legal Services

Appendix O: List of Workgroup Participants (Continued)

- Josh Sargent, Free Minds Book Club
- Corrine Simmons, Community Member
- Gregory Smith, Court Services and Offender Supervision Agency
- Cathy Thompson, Federal Bureau of Prisons
- Nancy Ware, Court Services and Offender Supervision Agency
- Sharon Winget, Unity Health Care

Housing Workgroup

- John Bess, Public Defender Service
- Michael Bonds, Court Services and Offender Supervision Agency
- Rodney Brown, Department of Employment Services
- Anetha Christmas, Community Member
- Reba Anderson-Graham, District of Columbia Housing Authority
- Betty Green, Department of Corrections
- Elba Gonzalez, Court Services and Offender Supervision Agency
- Charles Jones, Department of Employment Services
- William T. Lawson, National Homecomers Academy
- Cortez McDaniel, National Homecomers Academy/ Father McKenna Center
- Rada Moss, Corporation for Supportive Housing
- Margaret Quick, Court Services and Offender Supervision Agency
- Wendy Pohlhaus, United States Attorney's Office
- LaTria Rogers, University Legal Services/Department of Corrections
- Josh Sargent, Free Minds Book Club
- Charles Thornton, Office on Ex-Offender Affairs

Juvenile Reentry Workgroup

- Kathy Ashe, Department of Youth Rehabilitation Services
- Fannie Barksdale, Court Social Services
- Jerry Brown, Office on Ex-Offender Affairs
- Sheila Clark, Department of Youth Rehabilitation Services
- Desiree Coleman, Department of Youth Rehabilitation Services
- Denise Dunbar, Department of Mental Health
- Nkenge Garrett, Department of Youth Rehabilitation Services
- Kenyan McDuffie, Deputy Mayor for Public Safety and Justice
- Marie Morilus-Black, Department of Mental Health
- Terri Odom, Court Social Services
- Christopher Shorter, Department of Youth Rehabilitation Services
- Maurice Rawles, Department of Youth Rehabilitation Services
- Jamie Rodriguez, Public Defender Service
- Fred Rogers, Department of Youth Rehabilitation Services
- Gitana Stewart-Ponder, Deputy Mayor for Public Safety and Justice
- Stephanie Thomas, Office of the State Superintendent for Education
- Michael Umpierre, Department of Youth Rehabilitation Services