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A Letter from the BFR Co-Chairs

November 1, 2019

To Governor Pritzker and Members of the General Assembly:

On behalf of the Budgeting for Results (BFR) Commission, we are pleased to submit our ninth annual report.

The past year BFR capitalized on the gains of the previous year’s work and the continued investment of resources during Fiscal Years 2019 and 2020. With this investment BFR has been able to complete ten comprehensive program assessments across the Adult and Juvenile Criminal Justice policy domains. These assessments have impacted the development of the state budget and the formulation of policy for the Illinois Department of Corrections and the Illinois Department of Juvenile Justice. With the continued support of the Governor and the Legislature, the Commission and staff look forward to producing additional informative assessments to positively impact the budget development process.

The 2018-2019 mandates reduction process saw unprecedented collaboration between the Commission and our legislative partners. Through legislative action in Spring 2019, the Commission recommended repeal or modification of eight out-of-date or unduly burdensome statutory mandates. In addition, the Commission recommended repeal or modification of 39 defunct funds of the State Treasury. This effort resulted in increased efficiencies and taxpayer value. The Commission anticipates a similar collaborative effort in the 2019-2020 mandate review process, which will result in increased efficiencies for the people of Illinois.

We are also excited to begin utilizing data visualization and geospatial analysis in performance budgeting. Through the deployment of the Illinois Interactive Budget and the use of Geographic Information Systems (GIS) to display the concentrations of homeless individuals in our state and the geographic distribution of resources to address the problem, BFR has applied new technology to give decision makers additional lenses through which to see and address issues.

The Commission and staff continue to make significant progress. However, much work remains. The Commission is grateful to the Office of the Governor and the General Assembly whose support allows for the continued implementation of the Budgeting for Results mandate.

This report conveys the broad scope of work, the accomplishments of the BFR Commission and staff, and the ambitious plans for the upcoming year. We encourage your involvement in the Commission’s work through bi-monthly public meetings and annual public hearings. Your voice and participation are important to us.

We thank you for your support for this important work.

Sincerely,

James Lewis
Co-Chair

Heather Steans
Co-Chair
Budgeting for Results Commission

Co-Chair: James Lewis Ph.D.
Senior Researcher, University of Illinois at Chicago

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State Senator

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Former State Senator

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Executive Summary

- Established under State Budget Law (15 ILCS 20/50-25), the Budgeting for Results Commission is appointed by the Governor to provide advice in setting statewide outcomes and goals, and best practices in program performance evaluation and benefit-cost analysis.

- The Commission and BFR Unit of the Governor’s Office of Management and Budget continue to refine and implement a comprehensive methodology to evaluate program performance. The objective of statewide program analysis is to aid in quantifying program impacts and to inform decision makers as programs are compared across Result Areas.

- The program evaluation framework developed under the BFR Commission utilizes three tools: (1) the Illinois Performance Reporting System (IPRS), (2) the Pew-MacArthur Results First benefit-cost model, and (3) the State Program Assessment Rating Tool (SPART).
  - IPRS is the state’s web-based database for collecting program performance data from over 400 state agency programs. State agencies utilize IPRS to report programmatic level data to GOMB on a regular basis.
  - The Results First Initiative utilizes clearinghouses on hundreds of evidence-based programs and national best practices in state-level programming. The Results First model provides vetted data analytics to compute quantitative program assessments and optimal benefit-cost ratios at a program level.
  - The SPART is an integrated program evaluation tool that incorporates both quantitative and qualitative elements. The SPART analyzes program performance to assign overall program ratings which allow policy makers to compare programs within and across statewide Result Areas.

- At the direction of the BFR Commission, the BFR Unit continued to build upon the work completed in 2018, finishing the Juvenile Justice policy domain and beginning to create the program inventory of the Substance Use Disorder policy domain. Full program assessment reports are available via the GOMB website at Budget.Illinois.gov.

- Three programs within the Illinois Department of Juvenile Justice were selected for analysis utilizing the Results First benefit-cost model and SPART:
  - Incarceration-Based Therapeutic Communities
  - Substance Use Disorder Program
  - Mental Health Program (SPARCS)

- Quantitative program analysis predicts that the optimal return on investment from the three programs will be greater than the program cost, if the programs are implemented with fidelity to evidence-based best practices. The analysis also quantifies an anticipated reduction in recidivism correlated with the completion of each program, based on the programs being implemented with fidelity to best practices.

- From a qualitative perspective, program analysis supports the determination that all three Juvenile Justice programs are rated as effective or moderately effective as implemented in the State of Illinois as compared to national best practices.

- In June 2019 BFR began working on our third policy domain, Substance Use Disorder (SUD). BFR met with the Illinois Department of Human Services, the Department of Healthcare and Family Services, the Department of Public Health, the Department of Corrections and the Department of Juvenile Justice to begin organizing a conceptual framework for the multi-agency task of creating an SUD program inventory. Over the next year BFR will compile a comprehensive SUD program inventory and begin completing program assessment reports.
- The Results First benefit-cost tool and the SPART have significantly enhanced the State’s ability to perform program analytics. The potential to better inform the state budget process through fact-based program assessment reports creates a tangible deliverable from the BFR mandate. The BFR Commission will continue to promote the incorporation of evidence-based program reports into all aspects of the budget process.

- To date, the Commission has identified and the General Assembly has passed legislation to modify or repeal 257 statutory mandates. Twenty-three more mandates were identified for repeal or modification in 2019. In addition, the Commission with the assistance of GOMB approved a list of 13 cleanup items for funds within the State Treasury. A list of mandates and fund cleanup items is provided as Appendix C.

- This report also includes updates on six recommendations from the 2018 BFR Annual Report. Three (new or continued) recommendations have been identified by the BFR Commission to be addressed during calendar year 2020. The recommendations include incorporating a geospatial component into BFR analysis, continued investment in BFR, and reporting on the method for determining how new dollars are allocated to horizontal capital projects.
Introduction

Over the past year there have been many strides in the implementation of the Budgeting for Results statute. In particular, efforts have focused on transforming raw data into information that policymakers can use to inform budgetary decisions. This report highlights the BFR accomplishments since the last annual report and outlines the strategic priorities identified by the BFR Commission for the future.

BFR is “a method of budgeting where each priority must be justified each year according to merit rather than according to the amount appropriated for the preceding year” (Public Act 96-958). BFR is targeted at moving the state budget process towards measuring the performance of each government program within a set of predefined statewide priority outcomes and informing budgetary allocation decisions to optimize the achievement of these outcomes.

The goals of BFR are to help the public and government decision makers understand:
- The allocation of tax dollars to fund programs rather than line items;
- If funded programs are operating as designed;
- If funded programs are achieving performance goals;
- If funded programs are achieving statewide outcome goals; and
- How to utilize program performance data as a supporting element in funding determinations.

A chronology of the significant events in the Budgeting for Results process over the preceding nine years can be found in Appendix A of this report.

BFR Quick Facts:
- State spending is classified into seven statewide Result Areas.
- The statewide Result Areas are further delineated into nine statewide priority outcomes, as identified by Governor Pritzker and the Commission.
- There are more than 60 state agencies under the Governor.
- State agencies have defined over 400 distinct programs across state government.
- Over 1,200 performance measures have been identified for state agency programs.
The following table shows the seven statewide Result Areas along with their associated nine outcome areas and definitions.

<table>
<thead>
<tr>
<th>Result Area</th>
<th>Statewide Outcome</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>Improve School Readiness and Student Success for All</td>
<td>Increase percentage of Illinoisans equipped with skills and knowledge needed for postsecondary and workforce success.</td>
</tr>
<tr>
<td><strong>Economic Development</strong></td>
<td>Increase Employment and Attract, Retain and Grow Businesses</td>
<td>Close the opportunity gap in Illinois by ensuring the labor force has the skills necessary to meet the needs of employers and maximize earning potential. Increase business investment and entrepreneurship in Illinois.</td>
</tr>
<tr>
<td><strong>Public Safety</strong></td>
<td>Create Safer Communities</td>
<td>Reduce incidence of death, violence, injury, exploitation and fraud.</td>
</tr>
<tr>
<td></td>
<td>Improve Infrastructure</td>
<td>Improve the condition of infrastructure to protect citizens and support commerce.</td>
</tr>
<tr>
<td><strong>Human Services</strong></td>
<td>Meet the Needs of the Most Vulnerable</td>
<td>Ensure all residents—but particularly children, the elderly, and persons with disabilities—are able to experience a quality life by meeting basic living needs, and providing protection from abuse and discrimination.</td>
</tr>
<tr>
<td></td>
<td>Increase Individual and Family Stability and Self-Sufficiency</td>
<td>Reduce demand on the human service system by providing services to help individuals and families better support themselves.</td>
</tr>
<tr>
<td><strong>Healthcare</strong></td>
<td>Improve Overall Health of Illinoisans</td>
<td>Lower healthcare costs by improving the health of Illinoisans.</td>
</tr>
<tr>
<td><strong>Environment and Culture</strong></td>
<td>Strengthen Cultural and Environmental Vitality</td>
<td>Strengthen and preserve our natural, historic and cultural resources to make Illinois a more attractive place for people to visit, live and work.</td>
</tr>
<tr>
<td><strong>Government Services</strong></td>
<td>Support Basic Functions of Government</td>
<td>Improve the basic infrastructure of state government and provide the tools necessary to operate more efficiently and achieve statewide outcomes.</td>
</tr>
</tbody>
</table>
Progress Report

Program Assessment

The statute that created Budgeting for Results (BFR) states that in Illinois, budgets submitted and appropriations made must adhere to a method of budgeting where each priority is justified every year according to merit. The BFR Commission has worked since 2011 to create and implement a merit-based framework for data-driven program assessment useful to decision makers in the state.

BFR’s program assessment framework utilizes three tools: (1) the Illinois Performance Reporting System (IPRS), (2) the Pew-MacArthur Results First benefit-cost model and (3) the State Program Assessment Rating Tool (SPART). These tools have distinct purposes and collectively enable BFR to produce comprehensive program analysis.

The Illinois Performance Reporting System (IPRS) is an inventory of state-funded programs. The BFR unit publishes quarterly program performance data on nearly 1,200 specific performance measures across over 400 state programs. IPRS data promotes transparency by requiring every state program to report at least one performance metric and making these metrics available to the public. BFR’s partnership with the Pew-MacArthur Results First Initiative allows Illinois access to a powerful cutting-edge benefit-cost model that helps quantify the return on investment Illinois gets from the programs it supports. Finally, BFR developed the State Program Assessment Rating Tool (SPART). SPART data collected in IPRS, and from other agency sources, is analyzed along with the benefit-cost model to generate a comprehensive program score. The program score enables decision makers to draw comparisons between programs and evaluate impacts within and across Result Areas.¹

The following sections discuss these three tools in greater detail.

Illinois Performance Reporting System

The Illinois Performance Reporting System (IPRS) is the state’s web-based database for collecting program performance data from over 400 state agency programs. The IPRS database allows agencies to report programmatic-level data to GOMB on a regular basis. Performance data collection utilizing the IPRS database began in fiscal year 2015. BFR staff upload program performance reports for each state agency to the GOMB public website quarterly. The reports

¹ The Commission would like to extend its sincerest thanks to the University of Illinois for assistance in providing research tools to the GOMB BFR Unit to enable the Unit to produce comprehensive program assessments. This work could not be completed without the university’s generous assistance.
contain summary program information, appropriations and key performance measure information associated with each program.

The reports can be accessed by visiting the “Budgeting for Results” tab on the GOMB public website at www.Budget.Illinois.gov.

The BFR unit continues to work with agency Chief Results Officers (CROs) to review IPRS data and improve program definitions and performance metrics. Many program metrics are focused on traditional output and activity measures, rather than more meaningful measurements on program outcomes. In particular, the Results First and SPART program assessment process has resulted in improvements to IPRS programs and metrics in the Department of Corrections and the Department of Juvenile Justice. The continued evolution of IPRS program data will strengthen the applicability of IPRS data to future program assessments, as well as the data’s usefulness to the public.

**Results First**

BFR partnered with the Pew-MacArthur Results First Initiative to adopt the Results First benefit-cost model for statewide use in 2017, at no cost the State of Illinois.²

Results First works with dozens of states and local governments to implement this innovative evidence-based policy framework to help policymakers prioritize policies and programs with proven results.

The Results First benefit-cost model uses national research to predict the outcomes of state programs, and uses Illinois-specific data to account for the state’s unique population characteristics. The model includes separate projections for benefits that could be realized by taxpayers, program participants, and others in society when programs are implemented effectively and program goals are accomplished. The Results First model is currently applicable in eleven policy domains: adult crime, K-12 education, general prevention, health, adult mental health, higher education, juvenile justice, child welfare, child mental health, substance use disorders, and workforce development.

**State Program Assessment Rating Tool (SPART)**

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² The State of Illinois has been using the Results First model for criminal justice policy analysis since 2011 through the Illinois Sentencing Policy Advisory Council (SPAC).
The SPART is the culmination of six years of research and development to create an integrated program evaluation tool that incorporates both quantitative and qualitative elements. It is modified from the federal Program Assessment Rating Tool (PART).³

The introductory section of the SPART contains summary program information such as statutory authority and performance measures. An evaluability summary highlights Illinois-specific program design or agency implementation factors that contributed to the complexity of conducting the program evaluation.

The SPART tool consists of weighted questions, which tally to give a program a numerical score of 1-100. Numerical scores are converted into four categories of program performance: effective, moderately effective, marginal and not effective.

Weighted questions are divided into two sections: Program design and benefit cost analysis, worth up to 60 points; and performance management/measurement, worth up to 40 points. Full points are awarded if a program meets all the elements of the question. Partial points are awarded if the program meets the majority of the question elements, or if the program manager(s) have developed and implemented a plan to correct deficiencies so that the majority of the elements will be fulfilled within the next fiscal year. Once the points awarded for each question are tallied, a final program score is computed.

³ The results of the federal PART program reviews are available on the archived website ExpectMore.gov, https://www.whitehouse.gov/sites/default/files/omb/assets/omb/expectmore/index.html
The SPART provides a universal rating classification to allow policymakers and the public to more easily compare programs and their performance based on qualitative analysis.

The table below contains the SPART program ratings and their score ranges.

<table>
<thead>
<tr>
<th>Performing Programs</th>
<th>Score Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effective</td>
<td>75-100</td>
<td>Programs that set ambitious goals, achieve results, are well-managed and improve efficiency.</td>
</tr>
<tr>
<td>Moderately Effective</td>
<td>50-74</td>
<td>Programs that set ambitious goals and are well-managed. Moderately Effective programs likely need to improve their efficiency or address other problems in the programs' design or management in order to achieve better results.</td>
</tr>
<tr>
<td>Marginal</td>
<td>25-49</td>
<td>Programs that need to set more ambitious goals, achieve better results, improve accountability or strengthen management practices.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Not Performing Programs</th>
<th>Score Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ineffective</td>
<td>0-24</td>
<td>Programs receiving an “ineffective” rating are not using tax dollars effectively. Ineffective programs have been unable to achieve results due to a lack of clarity regarding the program's purpose, design, goals, poor management, or some other significant weakness.</td>
</tr>
<tr>
<td>Results Not Demonstrated</td>
<td>N/A</td>
<td>Programs which have not developed acceptable performance goals or have not gathered data necessary to determine how the program is performing.</td>
</tr>
</tbody>
</table>

The SPART questionnaire is designed for completion by a BFR Program Analyst in collaboration with the applicable GOMB Budget Analyst and agency Chief Results Officer (CRO). The SPART is
based on research by the BFR unit, information compiled by the state agency that administers the program and external program evaluations, when available. Detailed explanations of the evidence and reasoning behind each answer are included, along with supporting documentation as needed. Once the initial SPART review is completed and documented, the state agency reviews the results and provides further evidence and clarifying information. As necessary, changes to SPART answers are made in light of new information. The final SPART review and score is posted to GOMB’s website along with the Results First analysis for the benefit of policymakers and the public.

The SPART is designed to be implemented in tandem with the Results First benefit-cost analysis. The benefit-cost analysis provides a quantitative measure of the optimal return on investment that can be expected from an Illinois program if it is implemented according to best practices. The SPART adds necessary context to the benefit-cost analysis by examining how the relevant state agency has designed and implemented the program in Illinois, and whether the actual program as implemented has independent evaluations and performance measures that confirm the results predicted by the benefit-cost analysis. Both the Results First benefit-cost analysis and the SPART are necessary to achieve a comprehensive assessment of state programs.

2019 BFR Reports

BFR continued to build upon the work completed in 2018. During the past year BFR has improved processes for identifying state funded programs and standardizing program assessment reports. Collaboration and stakeholder engagements have been refined to improve identification of state-funded programs and program-specific outcomes. Program assessments have become more thorough and efficient, providing increasingly valuable information to inform the budgeting process.

Since publication of the 2018 Annual Report, BFR has completed three program assessments in the Juvenile Justice domain and begun to create the Illinois Substance Use Disorder policy domain program inventory. The programs completed in the Juvenile Justice domain are the Substance Use Disorder program, Incarceration-based Therapeutic Communities and the Mental Health program (SPARCS). These programs are run by the Illinois Department of Juvenile Justice. For each program, a description of the program costs, services and assessment is available on the GOMB website.

Juvenile Justice

The DJJ Substance Use Disorder program provides residential drug treatment for youth offenders with substance use disorder (SUD). DJJ facilities base this program on the Forward Thinking curriculum from The Change Companies. The Forward Thinking curriculum is tailored to juveniles
involved with the criminal justice system. The Change Companies specializes in a clinical tool called Interactive Journaling (IJ). DJJ began using this curriculum in 2012. From December 2018 through March 2019, BFR completed the three-stage assessment of this program.

Incarceration-based Therapeutic Communities (TC) are an intensive, residential substance use disorder treatment for youth offenders with serious substance use disorder (SUD). TCs are highly structured interventions where participants spend large portions of their waking hours in structured programming and activities. DJJ began transitioning its facilities to a Therapeutic Communities (TC) model in 2015. The incarceration-based Therapeutic Communities program is offered at four of five DJJ facilities. Throughout April and May of 2019, BFR completed the three-stage assessment of this program.

DJJ adopted the SPARCS (Structured Psychotherapy for Adolescents Responding to Chronic Stress) curriculum in 2010 to provide mental health programming for youth who have experienced complex trauma. SPARCS’ design was adapted from three successful evidence based practices. The implementation of SPARCS has varied based on resources available, staff training and youth need. Throughout June and July of 2019, BFR completed the three-stage assessment of this program.

The Results First benefit-cost model calculates the optimal return on investment (OROI) for programs run according to best practices of program core principles determined by evidence. The SPART assessment score provides a rating out of 100 to help understand how likely the program is to achieve its OROI. Together, the Results First benefit-cost model and the SPART deliver a quantitative and qualitative assessment of a program, providing a more complete picture of the program’s impact on its intended outcome.

The chart below lists the program assessments completed by BFR with their prospective optimal return on investment and their effectiveness at achieving their intended outcomes.

<table>
<thead>
<tr>
<th>Program</th>
<th>OROI</th>
<th>SPART Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incarceration-based Therapeutic Communities</td>
<td>$2.52</td>
<td>75/100 - Effective</td>
</tr>
<tr>
<td>Substance Use Disorder program</td>
<td>$1.06</td>
<td>62/100 - Moderately Effective</td>
</tr>
<tr>
<td>Mental Health program (SPARCS)</td>
<td>$53.97</td>
<td>65/100 - Moderately Effective</td>
</tr>
</tbody>
</table>

4 Optimal Return on Investment (OROI) reflects program best practices. Net program costs are equal to the program cost minus comparison cost.

5 The higher OROI for the SPARCs program is due to both a larger predicted impact on youth recidivism and significantly lower program costs compared to the Therapeutic Communities and Substance Use Disorder programs. For more information, please see the full assessments.
Criminal Justice Technical Appendix

To improve transparency in the program assessment process, the BFR Unit completed a technical appendix for assessments in the Adult Criminal Justice and Juvenile Justice policy domains. This appendix explains the costs and benefits that are included in the Results First benefit-cost model for these two domains, and details the Illinois-specific data BFR has collected to populate the model. The technical appendix is available along with the full program assessments at www.budget.illinois.gov.

Substance Use Disorder policy domain

During the summer of 2019, BFR began working on the third policy domain, Substance Use Disorder (SUD). In June 2019, BFR met with the Illinois Department of Human Services, the Department of Healthcare and Family Services, the Department of Public Health, the Department of Corrections and the Department of Juvenile Justice to begin organizing a conceptual framework for the multi-agency task of creating an SUD program inventory. SUD representatives from the agencies and relevant trade associations spoke at the Springfield BFR public hearing to discuss progress and challenges within the State of Illinois and nationally. Within the Illinois SUD policy domain there are intersecting clients, programs and funding sources. Over the next year BFR will compile a comprehensive SUD program inventory and begin completing program assessment reports.

Grant Accountability and Transparency Act (GATA)

Two statewide mandates, BFR and the Grant Accountability and Transparency Act (GATA) focus on performance, accountability and transparency in the use of public funds. In state government, the mission of a state agency is carried out through the programs and services the agency provides. In Illinois, grants comprise approximately two-thirds of the state’s general revenue budget. Federal and federal pass-through grants are the funding source of the majority of the programs reported in IPRS. State agencies heavily utilize grantees or grant recipients to carry out agency mission through grant awards which specify mandated performance requirements. There are roughly 8,700 grantees registered in GATA systems.

State agencies establish their IPRS program inventories with input from BFR staff and Governor’s Office of Management and Budget (GOMB) Budget Analysts. BFR program inventories generally include a high-level aggregate of state agency programs. In contrast, grants subject to Federal Uniform Guidance and GATA are legal instruments of financial assistance that bind the State of Illinois to carry out a public purpose. A federal pass-through or state funded award received by a state agency equates to a program in the GATA Catalog of State Financial Assistance (CSFA).
As IPRS program inventories continue to evolve through BFR implementation, the correlation to GATA-related grant programs will become more transparent. State agencies will be tasked to link grants received and reported in the CSFA to each IPRS program. Based on this correlation, IPRS program performance measures will be compared to grant performance measures. This crosswalk of programs in the CSFA to programs in IPRS will be a natural evolution of these two statutorily driven, statewide initiatives - BFR and GATA.

**Stakeholder Engagement: Public Hearings**

The Commission’s 2019 BFR public engagement efforts included public hearings held at the following locations:

- Chicago – James R. Thompson Center on June 26, 2019, and
- Springfield – Senate Hearing Room 212 in the State Capitol Building on June 12, 2019.

The goal of the hearings was to gather feedback and testimony to help Commissioners better understand the substance use disorder policy domain and improve awareness of the executive and legislative branches’ perspective on Budgeting for Results. The hearings encompassed three components: highlights of BFR accomplishments, testimony from subject matter experts on substance use disorder prevention and treatment in Illinois, and open engagement from the public regarding BFR initiatives.

In Springfield, Maria Bruni, Senior Policy Advisor, Department of Healthcare and Family Services; Eric Foster, COO and Vice-President for Substance Abuse Policy, Illinois Association for Behavioral Health; Sam Gillespie, Substance Abuse Administrator, Clinical Division, Department of Children and Family Services; Danielle Kirby, Director, Division of Substance Use Prevention and Recovery, Department of Human Services; Marvin Lindsey, CEO, Community Behavioral Healthcare Association of Illinois; and Ronald Vlasaty, COO, Family Guidance Centers, Inc. provided testimony on substance use disorder treatment and prevention. In Chicago, Assistant Majority Leader, Representative William Davis; and Alexis Sturm, Director of the Governor’s Office of Management and Budget provided testimony regarding the utilization of BFR assessments and data in the budget process from the perspective of the executive and legislative branches.

The hearings were attended by private and not-for-profit representatives and stakeholders, state agency CROs and program personnel. Individuals from diverse sectors including human services, education, information technology, media relations, transportation and economic development also participated.

Commissioners engaged with stakeholders and agency representatives through a frank, open and informative exchange of ideas. For the second year, the hearings were broadcast live over the internet via BlueRoomStream.com. The Commission thanks the staff of BlueRoomStream.com for their efforts to publicize the events and enable more Illinoisans to view the proceedings remotely. The Commission also thanks the Illinois State Senate for allowing the use of Hearing Room 212.
National Public Radio covered the BFR Public Hearings and ran a news clip acknowledging the evolution of this statewide initiative. The recording is available at: https://www.nprillinois.org/post/will-illinois-ever-embrace-budgeting-results#stream/0.

Chief Results Officers (CROs)

Chief Results Officers remain a vital link to each state agency. Throughout the course of the year BFR staff work with CROs to modify each agency’s program inventory to more accurately align with the agency’s mission and identify appropriate outcome measures to reflect the program’s impact on outcomes. CROs regularly take part in BFR Commission business meetings. In addition, CROs have been vital to the successful assessments of programs in the Adult and Juvenile Criminal Justice policy domains, as well as the Substance Use Disorder policy domain. As the budget development process for Fiscal Year 2021 gets underway, CROs will play an important role in conveying vital performance information to GOMB analysts.

Commission Working Groups

Mandates Review Working Group

State Budget Law (15 ILCS 20/50-25) requires that the Budgeting for Results Commission “review existing mandated expenditures and include in its [November 1st] report recommendations for the termination of mandated expenditures.” State agencies are asked to identify statutory mandates that are outdated, duplicative, or unduly burdensome on agency operations.

The mandates identified for repeal or modification by the Commission in its November 2018 Annual Report were included in House Bills: (HB)1552, HB 2936, HB 2937, HB 2940, HB 2941, HB 2943 and Senate Bill 1918. All of these bills passed the General Assembly and were signed into law by the Governor. The following House Bills were presented to the General Assembly, but did not become law: HB 2938, HB 2939, and HB 2942. As a result of these efforts, to date the Commission has recommended and the General Assembly has passed legislation to modify or repeal a total of 257 statutory mandates.

In the summer of 2019, the Budgeting for Results mandates working group comprised of BFR Commissioners Lewis, Steans, Althoff, Davis, Elam, Saltmarsh, and Clemons-Mosby asked agencies to identify unduly burdensome statutory mandates. Thirteen state agencies, universities, boards and commissions responded with mandate recommendations. The agency-submitted list of mandates was compiled by GOMB and included 34 mandates.

The Budgeting for Results mandates working group met in late August 2019 to conduct an initial review of agency recommendations for the elimination or modification of mandates. The
Commission is grateful for the participation of the Budget Directors and staff from each of the four caucuses of the General Assembly. Following the review, the working group recommended 25 mandates to the full BFR Commission for approval. Mandates associated with policy change were removed from the list because policy change is not within the statutory authority of this Commission. In addition to the statutory mandate review, the Commission also considered and approved a list to clean up 13 funds of the state treasury, which are now defunct. The Commission approved 23 of the 25 recommended mandates recommended for modification or repeal, and all 13 state fund clean-up items. A full list of the approved mandates and fund modifications is included as Appendix C of this report.
Progress Update on 2018 Commission Recommendations

Explore efficiencies in program assessment

The Commission recommended that during Calendar Year (CY) 2019 the Commission would work with GOMB staff to explore additional means of obtaining program impact assessments that could supplement those developed and/or documented through Results First and its associated clearinghouses. In an effort to meet this recommendation, the Commission recommended and BFR staff instituted a process of collecting program evaluation reports compiled by evaluators external to the BFR Unit. The program evaluation library is a first step toward building a comprehensive program evaluation methodology that encompasses those programs outside of the currently established Results First policy domains. As of this publication the BFR Staff have gathered existing program evaluations that have been conducted in four of the six divisions of the Department of Human Services. BFR Staff will continue to gather program evaluations from the remainder of DHS and other state agencies in CY 2020.

Explore feasibility of an “Impact Note” attached to legislation

The BFR Commission discussed the possibility of developing brief “Impact Notes,” similar to the existing fiscal notes for proposed legislation. This concept would require BFR Unit staff to conduct thorough research on the evidence base for a wide range of proposals, with a short turn-around requirement. (The time limit for providing a fiscal note is five calendar days.) The Commission concluded that, at current and near-term BFR Unit staffing levels, it is not feasible for the BFR Unit to produce high quality notes within existing legislative timeframes. The Commission recommends that legislators instead approach the BFR Unit as a resource for information on the evidence base for legislative proposals before filing the legislation.

Work with the Illinois Office of the Comptroller to merge BFR and PAR reporting

The Commission recommended that the BFR Unit work with Illinois Office of the Comptroller (IOC) leadership to identify opportunities to merge BFR and Public Accountability reporting to avoid duplication and satisfy the spirit of the statutory mandates that govern both processes. Currently, State agencies report a different set of programs for the Public Accountability Report (PAR) than they do for BFR.

In July 2019, the BFR Unit met with IOC leadership to identify processes that could synchronize performance reporting for state agencies. With the goal of state agencies utilizing the same accountability and reporting measures for both IPRS and PAR reporting, BFR will work with IOC and state agencies over the next year to achieve uniformity in the program inventories utilized for IPRS and PAR.
Addition of a Geo-Spatial component to BFR Analysis

The Commission recommended that the BFR Unit explore opportunities to utilize Geographic Information Systems (GIS) and other technologies to enhance the data available to decision makers by communicating in a geographical context. The Commission further recommended that the Unit partner with the University of Illinois System and other colleges and universities to leverage resources and advances already available outside of state government.

GIS is software that allows for geographically assembling and analyzing data. GIS maps are created to visually display information by county, city or any defined geographic area. The maps can contain and sort through multiple layers of data to provide precise information that is helpful in understanding the gaps or surpluses of resources in a given geographic area.

As a proof of concept, BFR staff created a “Needs Atlas” of homelessness and shelter capacity in Illinois. The maps that were created show the location of every state funded emergency homeless shelter in Illinois and the density of the homeless population in the surrounding areas. The maps can be displayed by county, state house or senate district, or by the geographic area used by the federal Department of Housing and Urban Development, Continuum of Care. BFR staff gathered information from community homelessness support agencies on the number of local homeless people and the number of shelter beds available to them.

This Homelessness Needs Atlas is an illustration of what can be visualized, analyzed and better understood through the use of GIS mapping.

Continued Investment in BFR

The BFR Commission recommended continued investment in staff and technology for BFR in the state Fiscal Year 2020 budget development process. Special thanks are given to the legislative members of the BFR Commission for their efforts to secure a $350,000 appropriation in the final Fiscal Year 2020 budget. Of that total, $100,000 is dedicated to hire two additional staff prior to the end of the fiscal year. The remaining $250,000 has been set aside for BFR operations, including engaging additional evaluator capacity to conduct a comprehensive program evaluation of programs that achieved a score of 49 or lower on their comprehensive program evaluation conducted by BFR staff.

Mandatory Program Evaluations for Programs Receiving 49 or Less in SPART

The Commission explored the feasibility of requiring programs with an SPART score of “marginal” (49 or less out of 100) to undergo a comprehensive program evaluation. Of the ten BFR program assessments completed since 2018, two received marginal SPART scores. The Commission determined that if program assessments and scoring continue in similar patterns, it is reasonable to conduct additional evaluation on marginal programs. The State Fiscal Year 2020 budget included $250,000 for this purpose. The BFR Unit is currently working to identify qualified external
program evaluators to conduct an evaluation of Illinois’ electronic monitoring program, operated by the Department of Corrections in conjunction with the Prisoner Review Board.

2019 Commission Recommendations

Continued Investment in BFR

With small investments made in BFR over the past two fiscal years, the BFR staff has been able to shift the goal of producing comprehensive program reports from the realm of the theoretical to the actual. With continued investment, this Commission believes that the BFR staff will be able to advance program analysis to a greater role in budgetary decision-making. Therefore, the BFR Commission recommends continued investment in staff and technology for BFR in the State Fiscal Year 2021 budget development process.

Continue Work on the Development of a Geo-Spatial component to BFR Analysis

The BFR staff have demonstrated the value of geo-spatial analysis of BFR data with the development of the pilot GIS map of Illinois homelessness. Therefore, the Commission recommends that the BFR Unit explore opportunities to utilize Geographic Information Systems (GIS) and other technologies to enhance the data available to decision makers by communicating in a geographical context.

The Illinois Capital Budget

The enacted Capital Budget of the State of Illinois totals $46.5 billion in Fiscal Year 2020, which includes the state-funded portions of the six-year Rebuild Illinois Program as well as remaining appropriations from prior capital programs. The total incorporates $28.3 billion for transportation (also known as horizontal capital), and $18.2 billion for the construction or retrofitting of state buildings and facilities and institutions of higher education; investments in the environment and for conservation purposes; broadband deployment; and economic and community development projects (also known as vertical capital). Horizontal capital is the largest portion of the capital budget, making up two-thirds of the total program.

As such, the Commission recommends that the GOMB BFR staff work with the Department of Transportation to document the current process utilized by IDOT to allocate capital dollars to horizontal capital projects, and report on best practices in other states for potential incorporation into future capital planning where appropriate. Staff should submit their final report to the Commission as soon as practicable.
Conclusion

The BFR Commission is committed to using program assessments to inform State budget deliberations. The Commission is proud of Illinois’ progress in the development and production of comprehensive program assessments. The Commission looks forward to the work and assessments the BFR staff will complete in the area of Substance Use Disorder over the coming year. BFR will have an additional opportunity to demonstrate its value in providing clear evidence-based information to decision-makers in this consequential policy area.

The Commission anticipates substantial progress in the development of geo-spatial analysis to analyze BFR data. The Commission believes that further development of this tool will allow for better understanding of where issues of concern occur in our state, and better analysis of the distribution of resources to address issues. The Commission looks forward to working with staff, the executive and legislative branches to more fully develop and utilize this resource.

The Commission also looks to legislative colleagues and the Governor to continue to support the work of BFR at current levels of funding, and where possible achieve modest increases to expand this statewide initiative. More staff and technology dedicated to BFR will result in more comprehensive analysis of state spending. This will allow for data-based reports shared with decision-makers to better inform budgetary decisions.

The Commission looks forward to working with legislators, state agencies, community-based organizations and stakeholders at large to advance progress of the BFR initiative. Working together, we can achieve much for the people of this great state.
Appendices

Appendix A: Chronology

Appendix B: Glossary

Appendix C: 2019 Commission Mandate Repeal or Modification Recommendations

Appendix D: 2019 Comprehensive Program Assessment Reports

Appendix E: Adult and Juvenile Justice Results First Technical Appendix
Appendix A

Chronology

The following lists chronologically the significant events in the Budgeting for Results process over the preceding nine years.

- July 2010
  Public Act 96-0958 establishing the Budgeting for Results (BFR) process was signed into law by Governor Quinn.

- August 2010-January 2011,
  Governor’s Office of Management and Budget (GOMB) in conjunction with the Governor’s Office established the first six statewide result areas to evaluate the impact/success of state funds.

- February 2011
  GOMB presented the Governor’s fiscal year (FY) 2012 budget which included state spending divided into six statewide result areas: Education, Economic Development, Public Safety and Regulation, Human Services, Quality of Life, and Government Services.

- February 2011
  Public Act 96-1529 establishing the Budgeting for Results Commission was signed into law by Governor Quinn.

- March 2011-January 2012
  GOMB worked with over 70 state agencies, universities, boards and commissions to delineate discrete programs linked to line item appropriations. Each program was assigned to one of the statewide result areas to facilitate future performance measurement.
  The Budgeting for Results Commission conducted its first meeting. Among the Commission’s many activities, it established the seventh statewide result area, Healthcare.

- February 2012
  GOMB presented the Governor’s FY 2013 budget with state agency spending delineated by program. Each program was assigned to one of the seven statewide result areas.

- March 2012-Janary 2013
  To establish basic performance measures for each state agency program, GOMB in conjunction with the Government Finance Officers Association (GFOA) provided training to state agency personnel on the development of program logic models. Each agency produced a logic model for each program. The logic model helped identify the potential performance measures for each program.
  In addition, during the period of July to September 2012, GFOA in conjunction with GOMB engaged experts and stakeholders from across the spectrum of result areas to engage in strategy mapping.

- March 2013
GOMB presented the Governor’s FY 2014 budget, including performance measures in each agency narrative submission.

- April 2013-February 2014
  GOMB in conjunction with state agencies worked to refine agency program inventories and performance measures. GOMB, worked with agencies, to identify agency Chief Results Officers (CROs). CROs are senior level agency staff with responsibility for performance and change management at the agency. They serve as a conduit for BFR information between the agency and GOMB. In late 2013, GOMB began the process of developing the Illinois Performance Reporting System (IPRS), a SharePoint database that allows for the centralized reporting of program performance measures and summary program information.

In October 2013, GOMB partnered with Mission Measurement, a performance measurement consulting firm, to complete a pilot around one outcome area of BFR. The pilot developed and tested a methodology for evaluating the performance of State of Illinois programs within the Education result area. Funding for the pilot was provided by a number of private foundations including generous contributions from the Chicago Community Trust, the John D. and Catherine T. MacArthur Foundation, and the Steans Family Foundation, along with pro bono support from Mission Measurement Corp.

- March 2014
  GOMB presented the Governor’s FY 2015 budget with at least one performance measure for each agency program.

- April 2014-January 2015
  State agencies were trained on the use of IPRS and begin the process of collecting a full fiscal year’s program performance data.

In late 2014, GOMB developed a reporting function in IPRS utilizing a PDF format. This reporting capability enhanced transparency because it allowed the performance measures to be publicly posted to the GOMB website.

- February 2015
  GOMB presented the FY 2016 budget with a full year of performance measure data for each agency program.

- February 2015-August 2015
  GOMB continued to work with agencies to refine programs and metrics. In August, GOMB posted the first set of IPRS program performance PDFs to the GOMB website: Budget.Illinois.gov.

- September 2015-July-2016
  GOMB with support from experts in the academic community began the development and pilot process for the State Program Analysis Reporting Tool (SPART) and the cost-benefit analysis tool.

- July 2016-January-2017
  In July, 2106 the BFR Commission established the Cost-Benefit Analysis Working Group. The working group was tasked to examine the catalog of state programs to identify significant gaps in the data
available to conduct cost-benefit analysis, and to make recommendations to remediate the deficiencies. Furthermore, the working group was assigned the responsibility to identify a methodology or methodologies that could be applied across the universe of state programs to produce a valid and meaningful cost-benefit analysis. The Working Group met throughout the summer and fall.

- February 2017
  Based upon the recommendation of the Cost-benefit Analysis (CBA) Working Group, the BFR Commission passed unanimously a resolution encouraging GOMB to adopt the Results First cost-benefit analysis model, developed by Pew-MacArthur Foundation, as the standard CBA model to be implemented as a component of the SPART. The Commission further recommended that GOMB add at least one additional FTE to implement the model.

- March 2017
  GOMB signed a letter of intent with the Pew-MacArthur Results First initiative to begin use of the Results First model in Illinois.

- April 2017
  GOMB worked with Legislative members of the BFR Commission to move the 2017 BFR Mandates Relief bill (SB1936) through the legislative process.

- June 2017
  GOMB hired a full-time data analyst to oversee the implementation of the Results First CBA model. In addition, GOMB in conjunction with the Illinois Sentencing Policy Advisory Council (SPAC) identified the Adult Criminal Justice domain as the first area to employ the Results First Model to general analysis of programs.

- July 2017
  GOMB, SPAC, and IDOC participated in in-depth training and discussion on the Results First Model with representatives from the Pew-MacArthur Results First Initiative. Staff engaged with SPAC and IDOC to begin collecting the initial data necessary to conduct a CBA analysis.

- August 2017 - September 2017
  BFR worked with IDOC to compile a program inventory of the Adult Criminal Justice policy domain. Once completed, BFR matched Illinois state funded programs to the evidence-based programs in the Results First Clearinghouse Database. BFR and IDOC identified three programs operated in adult prison facilities in Illinois from the program inventory for further analysis: Adult Basic Education/GED, Vocational Education, and Post-Secondary Education. BFR determined through the clearinghouse matching process that the design of these three programs match established best practices that rigorous research has shown to reduce criminal recidivism.

- September 2017 – October 2017
  BFR collected and calculated all the data needed to run the Results First benefit-cost analysis model on the three pilot programs. BFR also conducted an SPART evaluation for each program.

- October 2017
BFR completed three separate benefit-cost analyses and three SPART program evaluation reports for the Adult Criminal Justice policy domain on Adult Basic Education/GED, Vocational Education, and Post-Secondary Education.

- **November 2017 – January 2018**
  BFR completed the three-stage assessment of the incarceration-based Therapeutic Communities program run by the Illinois Department of Corrections at two facilities, Sheridan Correctional Center and Southwestern Illinois Correctional Center (SWICC).

- **February 2018 - March 2018**
  BFR completed the three-stage assessment of the Housing Assistance/Placements program run by the Illinois Department of Corrections and administered by the Illinois Parole Re-Entry Group.

- **April 2018 - May 2018**
  BFR completed the three-stage assessment of the GPS Monitoring program run by the Illinois Department of Corrections and administered by the Illinois Prisoner Review Board.

- **May 2018 – June 2018**
  BFR completed the three-stage assessment of the Electronic Monitoring program run by the Illinois Department of Corrections and administered by the Illinois Prisoner Review Board.

- **September 2018**
  BFR in conjunction with Pew-MacArthur Results First held its first annual convening of CROs in Springfield, Illinois.

- **October 2018**
  BFR hired a Data Analyst.

- **November 2018 – February 2019**
  BFR completed and published the Illinois Interactive Budget v1.0

- **December 2018 – March 2019**
  BFR completed the three-stage assessment of the SUD program run by the Department of Juvenile Justice.

- **May 2019**
  BFR completed the three-stage assessment of the Incarceration-based Therapeutic Communities program run by the Department of Juvenile Justice.

- **July 2019**
  BFR completed the three-stage assessment of the residential Mental Health program run by the Department of Juvenile Justice.

- **September 2019**
  BFR completed and published the Illinois Interactive Budget v2.0
Appendix B

Glossary

Best Practices: Policies or activities that have been identified through evidence-based research to be most effective in achieving positive outcomes.

Budgeting for Results Commission: Established under the Budgeting for Results law (15 ILCS 20/50-25), the Commission is appointed by the Governor to provide advice in setting statewide outcomes and goals, and best practices in program performance evaluation and benefit-cost analysis.

Budgeting for Results Unit: A unit established within the Governor’s Office of Management and Budget to implement the Budgeting for Results law (15 ILCS 20/50-25). The Unit coordinates the collection of program performance data from state agencies under the authority of the Governor. The unit conducts program performance and benefit-cost evaluations of state programs. The Unit also serves as support and research staff for the Budgeting for Results Commission.

Chief Results Officer (CRO): CROs are the conduit for dissemination of BFR information and process through their agencies. CROs also serve as the central point for change management within the agencies. CROs are generally agency senior staff, with the authority to initiate change and implement new BFR-oriented initiatives. One of the primary responsibilities of CROs is to review and update the agency’s performance measures and provide performance measure data to GOMB on a quarterly basis via IPRS.

Effect Size: The extent of the influence of a program or policy on outcomes.

Evidence-Based: Programs or interventions that have undergone multiple rigorous evaluations which demonstrate the efficacy of the program’s theory of change and theory of action.

Illinois Performance Reporting System (IPRS): The state’s web-based database for collecting program performance data. The IPRS database allows agencies to report programmatic level data to the Governor’s Office of Management and Budget on a regular basis.

Intervention: An intervention is a combination of program elements or strategies designed to produce behavior changes or outcomes among individuals or an entire population.

Optimal Return on Investment (OROI): A dollar amount that expresses the present value of program benefits net of program costs that can be expected if a program is implemented with fidelity to core principles or best practices.

Outcome Measures: Outcomes describe the intended result of carrying out a program or activity. They define an event or condition that is external to the program or activity and that is of direct importance to the intended beneficiaries and/or the general public. For example, one outcome measure of a program aimed to prevent the acquisition and transmission of HIV infection is the number (reduction) of new HIV infections in the state.

Output Measures: Outputs describe the level of activity that will be provided over a period of time, including a description of the characteristics (e.g., timeliness) established as standards for the activity. Outputs refer to the internal activities of a program (i.e., the products and services delivered). For
example, an output could be the percentage of warnings that occur more than 20 minutes before a tornado forms.

**Program**: A separately identifiable and managerially discrete function within an organization designed to meet a statutory requirement or a defined need; a set of activities undertaken to realize one common purpose with an identifiable end result or outcome.

**Recidivism**: Reconviction after a release from prison or sentence to probation.

**Results First Clearinghouse Database**: One-stop online resource providing policymakers with an easy way to find information on the effectiveness of various interventions as rated by eight nation research clearinghouses which conduct systematic research reviews to identify which policies and interventions work.

**Target**: A quantifiable metric established by program managers or the funding entity established as a minimum threshold of performance (outcome or output) the program should attain within a specified timeframe. Program results are evaluated against the program target.

**Theory Informed**: A program where a lesser amount of evidence and/or rigor exists to validate the efficacy of the program’s theory of change and theory of action than an evidence-based program.

**Theory of Change**: The central processes or drives by which a change comes about for individuals, groups and communities

**Theory of Action**: How programs or other interventions are constructed to activate theories of change.
Appendix C

2019 Commission Mandate Repeal or Modification Recommendations
<table>
<thead>
<tr>
<th>Issue Date</th>
<th>Mandate Number</th>
<th>Mandate Description</th>
<th>Mandate Impact on Agencies</th>
<th>Mandate Background/History</th>
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<tbody>
<tr>
<td>1/1/2020</td>
<td>730 ILCS 5/5-4-3a(c)</td>
<td>This mandate requires the Department of State Police (DPS) to provide forensic biology and DNA analysis services.</td>
<td>Requires the Illinois Board of Higher Education to post a link to each college and assembly's veterans survey.</td>
<td>Requires the department to annually include information regarding the percentage and level of detail. The State Police has compiled with the mandate every quarter since its inception.</td>
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<td>1/1/2020</td>
<td>20 ILCS 1305/10-25(a)</td>
<td>This mandate requires the Illinois Board of Higher Education (IBHE) to submit a report to the General Assembly each quarter showing the status of obligations and expenditures for the WIC nutrition program, and make recommendations for expending all available federal funds.</td>
<td>Requires the Illinois Board of Higher Education to post a link to each college and assembly's veterans survey.</td>
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<td>1/1/2020</td>
<td>20 ILCS 605/605-340</td>
<td>This mandate requires the Department of Human Services (DHS) to submit a quarterly report to the Governor and General Assembly regarding the findings of the Task Force on Service Member and Veterans Education.</td>
<td>Requires the Department of Human Services to post a link to each college and assembly's veterans survey.</td>
<td>Requires the department to annually include information regarding the percentage and level of detail. The State Police has compiled with the mandate every quarter since its inception.</td>
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This mandate is outdated and should be repealed. Further, this mandate is no longer central to the Department's core mission or that funds are available. The Department would have to pivot funds from programs directly fulfilling it's core mission and most likely is duplicative of programs run by the Illinois Housing Authority.

The mandate establishes the Illinois Literacy Council and lists DCEO as an organization that must provide a representative. DCEO reports that the council has not met since 2008, however DCEO reviewed an audit finding in 2016 for a representative of the council. DCEO would like the mandate repealed.

The mandate establishes a council that must have a representative from DCEO. DCEO reports that the council has not met since Gov. Quinn, but according to audit generally, it's likely the only entity who reviewed an audit finding.

The Department is authorized to provide technical and advisory assistance to the Housing Authorities Act, and establishes the process by which monies can be provided for qualified projects.

The Department did not appoint a representative to the Illinois Literacy Council. This mandate has no connection to the mission of the Department, which is first and foremost to promote economic and business development and economic opportunity throughout the state. Furthermore, the Department did not comply with this mandate if funding is made available.

This mandate requires DCEO to create a website to assist individuals wanting to create or relocate new businesses in the State. To the extent this mandate is made permissive, the Department would have to pivot funds from programs directly fulfilling it's core mission and most likely is duplicative of programs run by the Illinois Housing Authority.

This mandate as written is unduly burdensome in that there are no funds to support it and it must be business owners in the State. They have a 2018 audit finding for noncompliance with the Civil Administrative Code.

The mandate requires the Department to provide for liaison between the State and regional/local planning agencies to perform state-wide planning and as needed. Also, research local government problems as directed.

The mandate requires the Department to provide technical and advisory assistance to the Illinois Housing Authorities Act, and establishes the process by which monies can be provided for qualified projects.

The mandate was to create a website to assist individuals wanting to create or relocate new businesses in the State. It may be unrealistic to assume that there are no other websites that could be utilized instead of the mandated website. As a result, this mandate will require the Department to provide technical and advisory assistance to the Housing Authorities Act, as specified.

The mandates requires the Department to create and maintain a website to assist individuals wanting to create or relocate new businesses in the State. This mandate as written is unduly burdensome in that there are no funds to support it and it may be outdated because there are more effective ways to assist individuals wanting to create or relocate new businesses in the State.

The mandate directs the Department to provide for liaison between the State and regional/local planning agencies to perform state-wide planning and as needed. Also, research local government problems as directed.

The mandates requires the Department to provide technical and advisory assistance to the Illinois Housing Authorities Act, and establishes the process by which monies can be provided for qualified projects.

This mandate as written is unduly burdensome in that there are no funds to support it and it must be business owners in the State. They have a 2018 audit finding for noncompliance with the Civil Administrative Code.

The mandate requires the Department to do so would be unduly burdensome. Making this mandate permissive will resolve Audit Finding No. 2018-005. Audit Finding No. 2018-004 of Compliance Examination for the two years ending June 30, 2018: (Noncompliance with Statutory Mandates) The Department did not comply with the portion of the Civil Administrative Code.
This mandate is unduly burdensome in that it requires GOMB IT staff to code and place the report with that timeline. GOMB produces the report as required by statute, but does not prepare a quarterly report on the status of capital projects statewide.

Therefore, we will never fulfill the requirement that allows us to stop doing the report – however, statute was passed that removed the requirement to repay these funds.

This mandate establishes the Illinois 21st Century Workforce Development Fund Advisory Committee. This mandate is duplicative because this Committee was replaced by the Workforce Innovation Board. Convening this Committee for the sake of compliance is waste of finite resources.

Therefore, this mandate should be repealed.

The current deadline is the first day after the end of a quarter. Due to the need to collect data which was not anticipated, the IT staff did not have enough time during the reporting period to do the report. Effectively, we would have to file a blank report forever.

The mandate creates a burden on the agency with regard to the current deadline in statute. The mandate was created in conjunction with the 2009 Capital Development inaugural year (SB 2290) that was to have the BFR Commission propose the percentage of spending measures for the next fiscal year and post the results at the end of February.

The intent was to provide public input for the original BFR process, however, as very little of the distribution is discretionary, the public input, even if they did participate, would have very little impact on the shape of the budget at the most basic level. The mandate does nothing to promote these goals. It is unduly burdensome for the State. This mandate has no connection to the mission of the Department, which is first and foremost to promote the economic and business development and economic opportunities throughout the State. Therefore, we should not have to do this report again.

The mandate is unduly burdensome in that it requires GOMB IT staff to code and place the survey on the GOMB public website to allow residents to prioritize proposed capital projects for the next fiscal year and post the results at the end of February.

The mandate isSSIP Statutory Reauthorization, which was to have the BFR Commission propose the percentage of the total of spending measures for the next fiscal year. However, due to the need to collect data which was not anticipated, the IT staff did not have enough time during the reporting period to do the report. Effectively, we would have to file a blank report forever.

The mandate is unduly burdensome in that it requires GOMB IT staff to code and place the survey on the website during the annual budget development process. This is the mandated period of time for an already stretched thin IT staff. Furthermore, records show that no member of the public has participated in the survey since 2012. The survey reflects public attitudes toward the distribution of funding across the seven statewide result areas established by BFR. However, as very little of the distribution is discretionary, would have very little impact on the shape of the budget at the most basic level. The mandate does nothing to promote these goals. It is unduly burdensome for the State. This mandate has no connection to the mission of the Department, which is first and foremost to promote the economic and business development and economic opportunities throughout the State. Therefore, we should not have to do this report again.

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<table>
<thead>
<tr>
<th>Agency Recommendation</th>
<th>Fiscal Impact</th>
<th>Statutory Language Change Sought</th>
<th>Agency Contact Name</th>
<th>Contact Position</th>
<th>Contact Email</th>
<th>Contact Phone</th>
<th>Follow-up to Statute</th>
<th>Final Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>110 ILCS 49/15(c) should be modified to reduce the duplication of work performed by the IBHE.</td>
<td>Staff time to complete the mandate results in staff not being available to work on other critical projects.</td>
<td>Modification of 110 ILCS 49/15(c), see Word document</td>
<td>Bruce Bennett</td>
<td>Budget Officer</td>
<td><a href="mailto:bennett@ibhe.org">bennett@ibhe.org</a></td>
<td>217-557-7344</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for BFR omnibus bill</td>
</tr>
<tr>
<td>The statute is duplicative.</td>
<td></td>
<td>Strike a sentence from 20 ILCS 1305/10-25(a)</td>
<td>Stephanie Bess</td>
<td>Interim Assoc. Director</td>
<td><a href="mailto:stephanie.bess@illinois.gov">stephanie.bess@illinois.gov</a></td>
<td>217-524-3353</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for BFR omnibus bill</td>
</tr>
<tr>
<td>The mandate only needs to be modified.</td>
<td></td>
<td>ISP has emailed statutory language.</td>
<td>Robin Woolery</td>
<td>Assistant Deputy Director</td>
<td><a href="mailto:Robin.Woolery@illinois.gov">Robin.Woolery@illinois.gov</a></td>
<td>312-433-8000 ext.2012</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for BFR omnibus bill</td>
</tr>
<tr>
<td>Repeal. Program no longer exists.</td>
<td></td>
<td></td>
<td>Megan Buskirk</td>
<td>External Accountability Manager</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for DCEO bill</td>
</tr>
<tr>
<td>ID</td>
<td>Description</td>
<td>Contact</td>
<td>Email</td>
<td>Phone</td>
<td>Action</td>
<td>Notes</td>
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<td>-------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Repeal. Not mission critical</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>None Known</td>
<td>Repeal discussion with IDEETERS about if and by whom this is currently being done</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CDB response: “We have a document which is Illinois Construction–Related Statutes and Rules on our website. <a href="https://www2.illinois.gov/cdb/business/codes/Documents/Illinois_Construction-Related_Statutes_and_Rules_Directory.pdf">https://www2.illinois.gov/cdb/business/codes/Documents/Illinois_Construction-Related_Statutes_and_Rules_Directory.pdf</a> We also are required to keep a list of all reported code adoptions by municipalities and counties throughout the State. Ray Boosinger is listed as a resource on our webpage as the help answer questions and direct people to the correct information regarding building construction. (This covers what DCEO has also been talked to do (let them write a policy on a) duplications of services and they do not need to provide this service also).”</td>
<td>Approved for IDEETERS bill</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Move forward in BFR mandate process</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>Move forward in BFR mandate process</td>
<td>None Known</td>
<td></td>
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</tr>
<tr>
<td>3</td>
<td>Repeal. Old program that has been replaced</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>None Known</td>
<td>Repeal. Old program that has been replaced.</td>
<td></td>
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<td>Move forward in BFR mandate process</td>
<td>Approved for IDEETERS bill</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Repeal. Office no longer needed, and duplication functions with WIOA</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>None Known</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for IDEETERS bill</td>
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</tr>
<tr>
<td>5</td>
<td>Move forward in BFR mandate process</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>Move forward in BFR mandate process</td>
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<tr>
<td>6</td>
<td>Repeal. Additional steps of homeless in workforce program</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>None Known</td>
<td>Repeal. Additional steps of homeless in workforce program</td>
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<td>Approved for IDEETERS bill</td>
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<tr>
<td>7</td>
<td>Repeal. Immediate predecessor omitted</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>None Known</td>
<td>Repeal. Immediate predecessor omitted</td>
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<tr>
<td>8</td>
<td>Repeal. Responsibilities have been transferred. No other statutes appear to</td>
<td>Megan Buskirk</td>
<td><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
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<td>Repeal. Responsibilities have been transferred. No other statutes appear to</td>
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<td>ID</td>
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<td>Sponsor for DCEO bill</td>
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<td>19</td>
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<td>21</td>
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<td>None Known</td>
<td></td>
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</tr>
</tbody>
</table>

DCEO requests mandate be modified to remove the Department’s requirement to participate, as council has not met since 1999.

DCEO requests mandate be repealed due to lack of funding and because mandate is out of date.

DCEO requests mandate be permissive to give the Department the flexibility to create the program in the future.

The council has not met since 1999. Quinn, but according to auditor general’s site, DCEO is the only listed org who has received an audit finding.

Warrants further discussion due to recency of mandate

Warrants further discussion due to recency of mandate

Warrants further discussion due to recency of mandate

Warrants further discussion due to recency of mandate
DCEO requests mandate be repealed as Committee was replaced by the Workforce Innovation Board.

None Known

Megan Buskirk  
External Accountability Manager  
Megan.Buskirk@illinois.gov  
217-785-6479

Move forward in BFR mandate process

Approved for BFR omnibus bill

DCEO requests mandate be modified to remove the Department's requirement to appoint a liaison to serve as an ex-officio nonvoting member.

None Known

Megan Buskirk  
External Accountability Manager  
Megan.Buskirk@illinois.gov  
217-785-6480

DCEO to run omnibus bill with help from BFR staff

Approved for DCEO bill

DCEO requests mandate be modified to allow DCEO director to appoint a designee rather than attending personally.

None Known

Megan Buskirk  
External Accountability Manager  
Megan.Buskirk@illinois.gov  
217-785-6481

DCEO to run omnibus bill with help from BFR staff

Approved for DCEO bill, as modification instead of repeal

Repeal the section

Curt Clemons-Mosby  
Unit Director, Budgeting for Results  
curt.clemonsmosby@illinois.gov  
217-782-0838

Move forward in BFR mandate process

Approved for BFR omnibus bill

Repeal the section as this is an overly burdensome requirement, without public participation to warrant the expenditure

None

DCEO to remove 50-7

DCEO to remove 50-7

curt.clemonsmosby@illinois.gov  
217-782-0838

Move forward in BFR mandate process

Approved for BFR omnibus bill

Extend the deadline to the 45th day after the end of the quarter to give sufficient time to prepare and present the report.

None

Modify section language to 45 days after the end of the quarter.

Curt Clemons-Mosby  
Unit Director, Budgeting for Results  
curt.clemonsmosby@illinois.gov  
217-782-0838

Move forward in BFR mandate process

Approved for BFR omnibus bill
Proposed Fund Cleanup/Amendatory Items for Spring 2020 BFR Legislation

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Statutory Reference</th>
<th>Affected Fund Number</th>
<th>Affected Fund Name</th>
<th>Change and Rationale</th>
<th>Original Public Act</th>
<th>Sponsor</th>
<th>Date of Dissolution</th>
<th>Current Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>fca-1</td>
<td>20 ILCS 210/6</td>
<td>0438</td>
<td>Illinois State Fair Fund</td>
<td>This Section omits the word &quot;Illinois&quot; from the fund name, which is inconsistent with other references at 30 ILCS 105/5.364, at 20 ILCS 210/10, and by IOC.</td>
<td>P.A. 89-96</td>
<td>Bost</td>
<td>active fund</td>
<td>$8,172.3</td>
</tr>
<tr>
<td>fca-2</td>
<td>35 ILCS 5/507/DDD</td>
<td>0073</td>
<td>Special Olympics Illinois and Special Children's Charities Fund</td>
<td>This Section lists the fund name with the word &quot;Checkoff&quot;, which is inconsistent with the name listed in the State Finance Act, the Illinois Lottery Law, by IOC, and in annual appropriations bills. The draft also strikes redundant language governing distributions from the fund, which are already specified in the Illinois Lottery Law. The tax checkoff generated revenue for the fund only in FY2017.</td>
<td>P.A. 93-292</td>
<td>Maloney</td>
<td>active fund</td>
<td>$336.7</td>
</tr>
<tr>
<td>fca-3</td>
<td>705 ILCS 105/27.1b</td>
<td>0030</td>
<td>Supreme Court Special Purposes Fund</td>
<td>This Section lists the fund name with the word &quot;Purpose&quot; in one instance, which is inconsistent with other references in the same Section and other Sections of the Clerks of Courts Act, at 30 ILCS 105/5.844, at 805 ILCS 10/12, at 805 ILCS 180/50-45, at 805 ILCS 305/10, by IOC, and in annual appropriations bills.</td>
<td>P.A. 98-324</td>
<td>Raoul; Andersson</td>
<td>active fund</td>
<td>$6,777.4</td>
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<tr>
<td>fca-4</td>
<td>705 ILCS 135/15-20</td>
<td>0865</td>
<td>Domestic Violence Shelter and Service Fund</td>
<td>This Section lists the fund name with the word &quot;Services&quot;, which is inconsistent with the name listed in the State Finance Act, the Domestic Violence Shelters Act, other Sections of the Criminal and Traffic Assessment Act, by IOC, and in annual appropriations bills.</td>
<td>P.A. 82-783</td>
<td>Catania; Andersson</td>
<td>active fund</td>
<td>$822.4</td>
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<tr>
<td>fca-5</td>
<td>730 ILCS 5/5-9-1.22</td>
<td>0697</td>
<td>Roadside Memorial Fund</td>
<td>This Section incorrectly cites the previous Section constituting the fund that was repealed by P.A. 100-987.</td>
<td>P.A. 96-687</td>
<td>Mendoza; Steans</td>
<td>active fund</td>
<td>$857.5</td>
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</table>

Funds That Have Run Their Course

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Statutory Reference</th>
<th>Affected Fund Number</th>
<th>Affected Fund Name</th>
<th>Change and Rationale</th>
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<th>Sponsor</th>
<th>Date of Dissolution</th>
<th>Current Balance</th>
</tr>
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<tbody>
<tr>
<td>fca-6</td>
<td>20 ILCS 665/4b; 30 ILCS 105/8k rep.; 235 ILCS 5/1-3.37 rep.</td>
<td>0530</td>
<td>Grape and Wine Resources Fund</td>
<td>The fund was effectively abolished by P.A. 93-839 and has been closed out by IOC. Other references to the fund were repealed by P.A. 99-933. Other references to the Grape and Wine Resources Council were repealed by P.A. 100-621. These changes will repeal unused statutory authority for both the fund and Council.</td>
<td>P.A. 90-77</td>
<td>Luechtefeld</td>
<td>#N/A</td>
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<tr>
<td>fca-7</td>
<td>20 ILCS 1305/10-6 rep.; 30 ILCS 105/5.748 rep.; 35 ILCS 5/507TT rep.</td>
<td>0777</td>
<td>Crisis Nursery Fund</td>
<td>The fund last received revenue in FY2011 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund.</td>
<td>P.A. 96-627</td>
<td>Frerichs</td>
<td>$0.0</td>
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<tr>
<td>fca-8</td>
<td>20 ILCS 2310/2310-358 rep.; 30 ILCS 105/5.599 rep.; 35 ILCS 5/507AA rep.</td>
<td>0061</td>
<td>Lou Gehrig's Disease (ALS) Research Fund</td>
<td>The fund last received revenue in FY2008 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund.</td>
<td>P.A. 93-36</td>
<td>Schoenber</td>
<td>$0.0</td>
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### Proposed Fund Cleanup/Amendatory Items for Spring 2020 BFR Legislation

Items are numbered ‘fca-xx’ in sequence for reference.

<table>
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<tr>
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<th>Current Balance</th>
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<tbody>
<tr>
<td>fca-9</td>
<td>30 ILCS 105/6a; 30 ILCS 105/5.72 rep.; 30 ILCS 105/6w rep.</td>
<td>old # has been recycled by IOC</td>
<td>Cooperative Computer Center Revolving Fund</td>
<td>The fund last received revenue in FY1999 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund. IOC has since assigned this abolished fund's old fund number to a new fund in the state treasury.</td>
<td>P.A. 89-4</td>
<td>Dillard</td>
<td>#N/A</td>
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<tr>
<td>fca-10</td>
<td>30 ILCS 105/8k rep.</td>
<td>0743</td>
<td>Statewide Economic Development Fund</td>
<td>The fund was effectively abolished by P.A. 93-839 and has been closed out by IOC. Other references to the fund were repealed by P.A. 100-621, P.A. 101-10, and P.A. 101-31. These changes will repeal unused statutory authority for the fund.</td>
<td>P.A. 92-208</td>
<td>Novak</td>
<td>#N/A</td>
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<tr>
<td>fca-11</td>
<td>35 ILCS 5/507BB rep.</td>
<td>0713</td>
<td>Asthma and Lung Research Fund</td>
<td>The fund last received revenue in FY2005 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund.</td>
<td>P.A. 93-292</td>
<td>Maloney</td>
<td>6/29/2009</td>
<td>$0.0</td>
</tr>
<tr>
<td>fca-12</td>
<td>35 ILCS 405/13</td>
<td>0815</td>
<td>Estate Tax Collection Distributive Fund</td>
<td>This fund (cited as the Transfer Tax Collection Distributive Fund) was abolished by P.A. 97-732. This change repeals the obsolete reference to the fund left over from its abolition.</td>
<td>P.A. 81-1105</td>
<td>Egan</td>
<td>10/18/2012</td>
<td>$0.0</td>
</tr>
<tr>
<td>fca-13</td>
<td>305 ILCS 40/Act rep.</td>
<td>0348</td>
<td>Nursing Home Grant Assistance Fund</td>
<td>The Nursing Home Grant Assistance Program was active only during FY1993. The fund was effectively closed out as a result of P.A. 94-91.</td>
<td>P.A. 87-863</td>
<td>Maitland</td>
<td>7/1/2005</td>
<td>#N/A</td>
</tr>
</tbody>
</table>
Appendix D

2019 Comprehensive Program Assessment Reports
Budgeting for Results
Department of Juvenile Justice
Mental Health Program Report
Table of Contents

1. Introduction and Summary
2. Program Overview
3. Benefit-Cost Analysis Results
4. State Program Assessment Rating Tool (SPART)
5. Supplemental Information
Introduction

The statute that created Budgeting for Results (BFR) states that in Illinois, “budgets submitted and appropriations made must adhere to a method of budgeting where priorities are justified each year according to merit” (ILCS 20/50-25). The BFR Commission, established by the same statute, has worked since 2011 to create and implement a structure for data-driven program assessment useful to decision makers. The BFR framework utilizes the Results First benefit-cost model\(^1\) and the State Program Assessment Rating Tool to produce comprehensive assessments of state funded programs.

The Pew-MacArthur Results First Initiative developed a benefit-cost analysis model based on methods from the Washington State Institute for Public Policy (WSIPP). The Results First model can analyze programs within multiple policy domains, including: adult crime, juvenile justice, substance use disorders, K-12 and higher education, general prevention, health, and workforce development.

The State Program Assessment Rating Tool (SPART) combines both quantitative (benefit-cost results) and qualitative components in a comprehensive report. It is based on the federal Program Assessment Rating Tool (PART)\(^2\) developed by the President’s Office of Management and Budget and has been modified for Illinois use. The SPART provides a universal rating classification to allow policy makers and the public to more easily compare programs and their performance across results areas.

Methods

BFR begins each assessment by examining an Illinois program’s design and assessing its implementation. Each program is then matched with an existing rigorously studied program or policy in the Results First model. BFR completes a comprehensive review of related program literature to inform the matching process.

Each rigorously studied program has an effect size determined by existing national research that summarizes the extent to which a program impacts a desired outcome. The effect size is useful in understanding the impact of a program run with fidelity to established core principles and best practices.

The Results First benefit-cost model uses the effect size combined with the state’s unique population and resource characteristics to project the optimal return on investment (OROI) that can be realized by taxpayers, victims of crime, and others in society when program goals are achieved.

The SPART contains summary program information, historical and current budgetary information, the statutory authority for the program, and performance goals and measures. The SPART tool consists of weighted questions which tally to give a program a numerical score of 1-100. Numerical scores are converted into qualitative assessments of program performance: effective, moderately effective, marginal and not effective.

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\(^1\) https://www.pewtrusts.org/en/projects/pew-macarthur-results-first-initiative
\(^2\) https://georgew bush-whitehouse.archives.gov/omb/performance/index.html
Section 1

Program Overview
Program Overview – DJJ Mental Health Program

A majority of youth who enter the Illinois Department of Juvenile Justice (DJJ) need some level of mental health treatment. Mental health issues are a significant concern for DJJ because of their substantial impact on the youth’s welfare and on other outcomes of concern for the criminal justice system. There are numerous benefits to youth and their communities from the provision of mental healthcare in detention, including its role in curbing other destructive and criminal behavior.

Upon entry into DJJ custody each youth is assessed by a Mental Health Professional (MHP) and assigned a mental health level that determines the type and intensity of treatment received (see Supplemental Documentation). Most youth receive individual therapy and participate in group therapy.

In 2010 DJJ began using the Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS) group therapy curriculum. Most youth in DJJ custody have experienced complex trauma. The SPARCS curriculum is a cognitive-behavioral program designed to improve emotional, social, academic and behavioral functioning of adolescents exposed to chronic trauma and stress. It was specifically created for teens who have been traumatized and who continue to live with high levels of stress. Importantly for DJJ, SPARCS was chosen to help youth build skills to handle the effects of trauma without needing to disclose the nature of the trauma they experienced in a group context.

Recent budget appropriations for the comprehensive mental health program are presented in Table 1.

Table 1: Mental Health Program Appropriations and Expenditures by Fiscal Year ($ thousands)

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriated</td>
<td>$6,151</td>
<td>$270</td>
<td>$270</td>
<td>$5,502</td>
<td>$5,358</td>
<td>$6,107</td>
</tr>
<tr>
<td>Expended</td>
<td>$5,811</td>
<td>$5,679</td>
<td>$4,923</td>
<td>$4,693</td>
<td>$5,030&lt;sup&gt;4&lt;/sup&gt;</td>
<td>N/A</td>
</tr>
</tbody>
</table>

While all aspects of DJJ’s mental health program are integrated and important to improving youth outcomes, the benefit-cost analysis portion of this report focuses only on the SPARCS group therapy element. DJJ does not report appropriations or expenditures for the SPARCS therapy in isolation, but information on per-participant cost estimates can be found in Section 2 of this report.

Using national literature and program information gathered with DJJ, BFR matched the SPARCS program

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<sup>3</sup> During fiscal years 2016-2017, DJJ received only federal funds appropriations for this program due to the budget impasse. Actual expenditures were higher due to court orders.

<sup>4</sup> Estimated.
with the program profile “Cognitive behavioral therapy (CBT) for juvenile offenders” in the Results First benefit-cost model. This profile is based on national research on a variety of CBT programs offered to juvenile offenders in both detention and community settings. More information on the evidence base for the SPARCS curriculum can be found in the SPART section of this report.

The major takeaways from this analysis can be found in Table 2 below along with the program’s comprehensive SPART score.

Table 2: Report Summary

<table>
<thead>
<tr>
<th>DJJ SPARCS Program Report Results⁶</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Optimal Benefits</td>
<td>$15,596</td>
</tr>
<tr>
<td>Real Cost (Net) per participant</td>
<td>$289</td>
</tr>
<tr>
<td>Benefits – Costs (Net Present Value)</td>
<td>$15,307</td>
</tr>
<tr>
<td>Benefits/Costs (OROI)</td>
<td>$53.97</td>
</tr>
<tr>
<td>Chance Benefits Will Exceed Costs</td>
<td>94%</td>
</tr>
<tr>
<td>SPART Score</td>
<td>65 – Moderately Effective</td>
</tr>
</tbody>
</table>

This benefit-cost analysis examines the effect of SPARCS group therapy on reducing youth recidivism. It does not include potential effects of the mental health program on other outcomes of interest such as trauma symptoms or non-recidivism behavioral outcomes.

The optimal return on investment calculated by BFR on the SPARCS program determined that for every one dollar spent by DJJ, $53.97 of future benefits from reduced crime could be realized by Illinois taxpayers and crime victims.

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⁵ Further program profile and meta-analysis information available at: https://www.wsipp.wa.gov/BenefitCost/Program/438

⁶ The optimal benefits are the benefits the program can expect to achieve if run with fidelity to best practices or core principles. Benefits per participant are projected over fifty years after program participation. The per participant real costs of the program are the sum of its direct and indirect costs, minus the cost of treatment as usual. The benefits and the costs are discounted to present value. The benefit/cost ratio is the optimal return on investment (OROI) Illinois can expect from implementing the program with fidelity.
Section 2

Benefit-Cost Results
**Benefit-Cost Results - DJJ Mental Health Program**

The Results First benefit-cost model uses the effect size determined by the program profile for “Cognitive behavioral therapy (CBT) for juvenile offenders.” The SPARCS program costs were provided by DJJ.

The standard practice in Illinois is to track youth cohorts released from DJJ in the same year and record their recidivism over the next three years. Based on national studies on juvenile offenders in CBT programs, the benefit-cost analysis predicts the three-year recidivism rate\(^7\) for participants in the SPARCS program to be under 64%, compared to just under 68% for the general juvenile population – a decrease of over four percentage points, as shown in *Figure 1*.

*Figure 1*

![Graph showing the effect of DJJ Mental Health program on recidivism rate](image)

The baseline recidivism rate used in the benefit-cost analysis is a predicted likelihood of future adjudication after release from custody. DJJ also tracks the actual percentage of youth who return to juvenile facilities within three years of release. This percentage was 52.1% for youth released in FY 2015. It is lower than the baseline recidivism rate used in the model because it does not include youth who are sentenced as adults and sent to the Department of Corrections, or youth who are adjudicated for a new offense but not returned to detention. DJJ does not currently track SPARCS program completers who return to juvenile facilities, but plans to begin tracking this in the near future.

\(^7\) Recidivism for juveniles is defined as an adjudication after release from custody.
The annual costs and benefits for the DJJ SPARCS program can be seen below in Figure 2. For this program all costs are incurred in the first year while benefits accrue over time. The red line depicts annual program costs. The cost per person for the DJJ SPARCS program includes staff time and staff training. The curriculum uses journals and other materials. Journals are reused from year to year, while other materials are currently purchased out-of-pocket by program staff.

The green line shows total program benefits. As illustrated, the program benefits exceed the program costs beginning in the first year of investment. Although not depicted in Figure 2, BFR projected the program benefits out 50 years and found that total expected program benefits are $15,307 when discounted to present value. Most of these benefits occur in the first ten years after program participation.

The return on investment from the benefit-cost analysis only calculates the benefits from reducing recidivism. Other benefits or costs related to mental health treatment are not included in this report. Based on additional data that will be obtained from future studies this program will be reevaluated to determine outcomes in other result areas.

Figure 2

The DJJ SPARCS program accumulates benefits over time to various groups. The benefits to Illinois are based on avoided criminal justice expenses and avoided private costs incurred as a result of fewer crime victims. The private victimization costs include lost property, medical bills, wage loss, and the pain and suffering experienced by crime victims.

Taxpayers avoid paying for additional criminal justice system costs of arrests and processing; prosecutions, defense, and trials; and incarceration and supervision. Lower incarceration rates lead to
fewer prisoners that need to be paid for by the State. The benefits to DJJ are determined by calculating DJJ’s avoided future costs, classified as either fixed, variable or step costs. Fixed costs do not change based on the DJJ population. Variable costs change as the population increases or decreases marginally. Step costs only change once a threshold level of DJJ population numbers are reached. The costs that could be avoided by reducing recidivism are determined by calculating the fixed, variable and step costs that would change with a change in the DJJ population\(^8\).

Additional indirect benefits accrue to society as well. When tax revenue is spent on one program, it has an opportunity cost of revenue that cannot be spent on other beneficial programs and services like public safety or economic development. Money that is taxed is also not available for private consumption and investment. The indirect benefits of making effective, economically efficient investments to reduce criminal recidivism are quantified within the Results First model using the Deadweight Cost of Taxation. This inefficiency creates both a benefit and a cost in this model – the initial spending on the program generates a cost. Later savings for Illinois due to reduced recidivism decrease the deadweight cost of inefficient government taxation and spending. The deadweight cost of initial program spending is subtracted from indirect benefits in the first year.

*Figure 3* below illustrates how benefits accumulate to different Illinois stakeholders. The majority of the benefits come from future avoided victimization costs in society. The remaining benefits come from taxpayer costs and other avoided indirect deadweight costs.

*Figure 3*

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All program benefits are predictive, and there is uncertainty when forecasting future outcomes. To help account for the uncertainty, BFR runs each benefit-cost analysis 10,000 times with random variations in the costs and benefits. The histogram in *Figure 4* shows the range of OROI resulting from running the simulations. The optimal program benefits exceeded the program costs in 94 percent of the simulations.

*Figure 4*
Section 3

State Program Assessment Rating Tool
State Program Assessment Rating Tool (SPART)

Mental Health Program

425-Department of Juvenile Justice

This report was compiled by the Budgeting for Results Unit of the Governor's Office of Management and Budget with the support of the Department of Juvenile Justice (DJJ). The SPART is an assessment of the performance of state agency programs. Points are awarded for each element of the program including: Program Design and Benefit-Cost and Performance Management/Measurement. This combined with benefit-cost analysis through Results First establishes an overall rating of the program's effectiveness, which can be found on the final page of this report.

Part 1: General Information

Is this program mandated by law? Yes _X_ No ___
Identify the origin of the law: State _X_ Federal ___ Other ___
Statutory Cite: 730 ILCS 5/3-15-3(a)
Program Continuum Classification: Treatment, Case Identification

Evaluability

Provide a brief narrative statement on factors that impact the evaluability of this program.

The SPARCS curriculum is one part of the comprehensive mental health services provided to youth by DJJ. It is challenging to isolate the SPARCS curriculum costs and services within the holistic approach needed for successfully treating DJJ youth.

SPARCS is used to address the mental health needs of youth at all DJJ facilities. DJJ has worked with the authors of the SPARCS curriculum to adapt the length of the program to meet the varying needs of their youth. As the program continues to adapt, research is necessary to understand how well it is achieving its intended outcomes.

<table>
<thead>
<tr>
<th>Key Performance Measure</th>
<th>FY 2013</th>
<th>FY 2014</th>
<th>FY 2015</th>
<th>Reported in IPRS Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall DJJ recidivism rate (return to juvenile facilities)</td>
<td>58.7%</td>
<td>57.8%</td>
<td>52.1%</td>
<td>Y9</td>
</tr>
</tbody>
</table>

### Part 2: Program Design and Benefit-Cost

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Evidence Level</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 What is the program evidence level?</td>
<td>25</td>
<td>Evidence Based</td>
<td>25</td>
</tr>
<tr>
<td>- Evidence Based 25 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Theory Informed 15 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Unknown Effect 0 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Negative Effect -5 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Provide core principles in narrative section)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Explanation:**

The SPARCS group therapy curriculum is an adaptation of three interventions that have been nationally studied: Dialectical Behavior Therapy for Adolescents, Trauma Adaptive Recovery - Group Education and Therapy (TARGET), and School-Based Trauma/Grief Group Psychotherapy Program. According to DJJ staff, SPARCS is a form of cognitive-behavioral therapy, a widely studied therapeutic approach that encompasses a variety of curriculums.

Although there is not yet sufficient rigorous evidence on the SPARCS curriculum in particular, cognitive-behavioral therapy (CBT) more generally has been studied extensively and found to be effective. The benefit-cost analysis section of this program assessment is based on national research on CBT, including a range of specific curriculums.

SPARCS was developed specifically for adolescents exposed to chronic trauma, and has been used in various settings, including juvenile justice facilities. The core principles of SPARCS align with the general best practices of juvenile justice programming. Programming is most effective when it targets the “specific needs of offenders known to be associated with criminal behavior” and when “the delivery of interventions [is] matched to their learning styles.”

In 2006, the Illinois Department of Children and Family Services (DCFS), in partnership with Northwestern University, completed pilot tests of three evidence-based mental health treatment programs for youth who had experienced significant trauma and were wards of the state. SPARCS was piloted for youth aged 12-17. The pilot tests were not intended to establish the evidence-based nature of the treatments, but rather to analyze how well treatment programs could be successfully implemented with fidelity and could be associated with positive outcomes in a complex child welfare system.

The programs were piloted in both Chicago and other areas of Illinois to account for the unique challenges of urban and rural communities. The study concluded that all three treatment programs were “both feasible and effective.”

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According to the pilot study’s recommendations, “If the Department decides to implement any or all of these evidence-based trauma practices, such an implementation would best be accomplished within the framework of a monitoring and outcomes management environment.”

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2 Is the Program implemented and run with fidelity to the program design?</td>
<td>25</td>
<td>Partial</td>
<td>15</td>
</tr>
</tbody>
</table>

**Explanation:**

Most SPARCS groups are 16 weeks with one hour-long session per week. SPARCS therapy groups are closed. Upon entering a DJJ facility, youth must wait until there is a cohort of youth who can begin a new group together.

With the authors’ approval DJJ has been able to develop modified lesson plans depending on youth need. Youth at IYC-Chicago have at times utilized an eight-week curriculum due to shorter lengths of stay for youth at that facility. IYC-Chicago also runs a voluntary, ongoing “Mini-Mindfulness Group” that reviews mindfulness skills taught in SPARCS. Additionally, IYC-Chicago offers a SPARCS alumni group that runs eight weeks and is used to refresh the SPARCS skills for youth who have already completed the 16-week program.

Although altering the length of a program from its original design can impact program effectiveness, these changes were made in consultation with the curriculum authors and reflect a responsiveness to youth needs that is crucial to program success. There is a tension within juvenile justice best practices between the need for youth to complete programming in order to maximize benefits and the desire to release youth from detention into the community as quickly as possible, which has been shown to improve youth outcomes. Other DJJ programs such as substance use disorder treatment have also been shortened over time to accommodate shorter detention times for youth.

Staff training is another important element of program implementation. Mental health treatment is delivered by DJJ Mental Health Professionals (MHPs). Most MHPs are provided contractually by Wellpath, while others are state employees. MHPs are trained by certified SPARCS trainers approved by the curriculum authors. Trainers have been affiliated with the Adelphi University Institute for Adolescent Trauma Treatment & Training and with Mindshift Center in Quincy, Illinois. Because the SPARCS training is a six-month program, staff turnover sometimes results in SPARCS groups being run by MHPs that have been trained by other MHPs instead of a trainer approved by the curriculum authors. The author-approved training MHPs receive is not train-the-trainer oriented. Consequently, there is no mechanism to verify that MHPs have validly and effectively conveyed the principles learned at author-approved training to new MHPs, when they provide the training themselves.

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<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3 If the program achieved full credit in question 2.2, can we expect the Optimal Return on Investment (OROI) for this program to be equal to or greater than $1 for each $1 spent?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**

The expected optimal return on investment from this program is $53.97. Please see Section 2 - Benefit-Cost Results for additional information.
## Part 3: Performance Management/Measurement

**Total Points Available: 40**

**Total Points Awarded: 15**

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Does the program regularly collect timely and credible performance measures?</td>
<td>10</td>
<td>No</td>
<td>0</td>
</tr>
</tbody>
</table>

### Explanation:

DJJ does not currently collect performance measures for this program. The only measure collected is the average number of youth receiving treatment. DJJ is currently working to identify and implement appropriate pre- and post-test screeners to track youth trauma symptoms, DSM diagnoses and behavioral outcomes. DJJ also intends to begin tracking how many youth complete the SPARCS curriculum, and the recidivism rate of these youth.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.2 Do the performance measures focus on outcomes?</td>
<td>10</td>
<td>Partial</td>
<td>5</td>
</tr>
</tbody>
</table>

### Explanation:

As stated above, DJJ does not currently collect performance measures for this program. The primary outcome DJJ is seeking from its Mental Health program is the reduction of juvenile recidivism. Tracking youth who participate in and particularly who complete the SPARCS program will enable the department to track recidivism for program completers and compare it with the recidivism rate for all DJJ youth. Additionally, enhancements are being recommended to upgrade the youth data collection system, Y360, to allow better identification of program participants for correlations in data collection.

This in combination with the implementation of pre- and post-test screeners to track behavioral health outcomes will give the department valuable information on the achievement of program goals. Although the department has not yet begun collecting performance measures, the program achieves partial credit due to its concrete plans to implement measures that are specific and clearly focused on outcomes.
<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.3 Are independent and thorough evaluations of the program conducted on a regular basis or as needed to support program improvements and evaluate effectiveness?</td>
<td>10</td>
<td>No</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation:**

The John Howard Association (JHA), an independent monitoring organization, produces periodic reports on each DJJ facility. The most recent reports on each facility included descriptions and commentary on the mental health treatment available, including psychotropic treatment which is beyond the scope of this report.\(^\text{12}\)

JHA is dedicated to monitoring both adult and juvenile correctional facilities in Illinois. JHA does not specialize in mental health treatment, nor has it conducted comprehensive program evaluations of DJJ’s mental health program specifically. Therefore, a full independent evaluation of the mental health program by mental health treatment experts is recommended.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4 Does the Agency use performance information (including that collected from program partners) to adjust program priorities, allocate resources, or take other appropriate management actions?</td>
<td>10</td>
<td>Yes</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation:**

DJJ uses performance information to make management decisions, for example their pursuit of the 8-week version of SPARCS. This is driven by the number of youth who cannot complete the 16-week program due to having a sooner release date.

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Concluding Comments

The SPARCS program was adopted by DJJ in 2010 to provide mental health treatment for youth who experienced complex trauma. The SPARCS curriculum design was adapted from three successful evidence based practices. The implementation of SPARCS has varied based on resources available, staff training and youth need. DJJ has not yet begun collecting performance measures. It is vital that the program make efforts to implement a full outcome measurement regime, as such performance measures are necessary for a full assessment of this program. The agency has specific plans to implement program performance measures that focus on outcomes, and the program administrators are commended for their commitment to this important goal.

Final Program Score and Rating

<table>
<thead>
<tr>
<th>Final Score</th>
<th>Program Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>65</td>
<td>Moderately Effective</td>
</tr>
</tbody>
</table>

SPART Ratings

Programs that are PERFORMING have ratings of Effective, Moderately Effective, or Adequate.

- **Effective.** This is the highest rating a program can achieve. Programs rated Effective set ambitious goals, achieve results, are well-managed and improve efficiency. Score 75-100
- **Moderately Effective.** In general, a program rated Moderately Effective has set ambitious goals and is well-managed. Moderately Effective programs likely need to improve their efficiency or address other problems in the programs' design or management in order to achieve better results. Score 50-74
- **Marginal.** This rating describes a program that needs to set more ambitious goals, achieve better results, improve accountability or strengthen its management practices. Score 25-49

Programs categorized as NOT PERFORMING have ratings of Ineffective or Results Not Demonstrated.

- **Ineffective.** Programs receiving this rating are not using your tax dollars effectively. Ineffective programs have been unable to achieve results due to a lack of clarity regarding the program's purpose or goals, poor management, or some other significant weakness. Score 0-24
- **Results Not Demonstrated.** A rating of Results Not Demonstrated (RND) indicates that a program has not been able to develop acceptable performance goals or collect data to determine whether it is performing.

Glossary

**Best Practices:** Policies or activities that have been identified through evidence-based policymaking to be most effective in achieving positive outcomes.

**Evidence-Based:** Systematic use of multiple, rigorous studies and evaluations which demonstrate the efficacy of the program’s theory of change and theory of action.

**Illinois Performance Reporting System (IPRS):** The state’s web-based database for collecting program performance data. The IPRS database allows agencies to report programmatic level data to the Governor’s Office of Management and Budget on a regular basis.

**Optimal Return on Investment (OROI):** A dollar amount that expresses the present value of program benefits net of program costs that can be expected if a program is implemented with fidelity to core principles or best practices.

**Outcome Measures:** Outcomes describe the intended result of carrying out a program or activity. They define an event or condition that is external to the program or activity and that is of direct importance to the intended beneficiaries and/or the general public. For example, one outcome measure of a program aimed to prevent the acquisition and transmission of HIV infection is the number (reduction) of new HIV infections in the state.

**Output Measures:** Outputs describe the level of activity that will be provided over a period of time, including a description of the characteristics (e.g., timeliness) established as standards for the activity. Outputs refer to the internal activities of a program (i.e., the products and services delivered). For example, an output could be the percentage of warnings that occur more than 20 minutes before a tornado forms.

**Program Continuum Classification:** Programs are classified based on the type of service being provided: promotion, prevention, treatment or maintenance. This classification is based on a continuum of intervention developed by the Institute of Medicine (currently known as the Health and Medicine Division of the National Academies of Sciences, Engineering, and Medicine):

1. **Promotion** - Promotion interventions aim to enhance individuals’ ability to achieve developmentally appropriate tasks (competence) and a positive sense of self-esteem, mastery, well-being, social inclusion and strengthen their ability to cope with adversity.
2. **Prevention** - Interventions that occur prior to the onset of a disorder that are intended to prevent or reduce risk for the disorder.
3. **Treatment** - Interventions targeted to individuals who are identified as currently suffering from a diagnosable disorder that are intended to cure the disorder or reduce the symptoms or effects of the disorder, including the prevention of disability, relapse, and/or comorbidity.
4. **Maintenance** - The provision of after-care services to the patient, including rehabilitation to assist the patient’s compliance with long-term treatment to reduce relapse and recurrence.

**Results First Clearinghouse Database:** One-stop online resource providing policymakers with an easy way to find information on the effectiveness of various interventions as rated by eight nation research clearinghouses which conduct systematic research reviews to identify which policies and interventions work.

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**Target:** A quantifiable metric established by program managers or the funding entity established as a minimum threshold of performance (outcome or output) the program should attain within a specified timeframe. Program results are evaluated against the program target.

**Theory Informed:** A program where a lesser amount of evidence and/or rigor exists to validate the efficacy of the program’s theory of change and theory of action than an evidence-based program.

**Theory of Change:** The central processes or drives by which a change comes about for individuals, groups and communities

**Theory of Action:** How programs or other interventions are constructed to activate theories of change.
Citations


Works Referenced


Section 4

Supplemental Materials
<table>
<thead>
<tr>
<th>Treatment Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acronym (abbreviation) for intervention: SPARCS</td>
</tr>
<tr>
<td>Average length/number of sessions: 16 sessions, 1 hour in length</td>
</tr>
<tr>
<td>Aspects of culture or group experiences that are addressed (e.g., faith/spiritual component, transportation barriers): Meaning making, which is culturally driven, is a central component of SPARCS. Therapists routinely engage group members in discussions around the ways in which trauma has impacted their lives and what it means to them in the context of their culture. See “Culture-Specific Intervention” for further detail.</td>
</tr>
<tr>
<td>Trauma type (primary): Complex Trauma, chronic interpersonal traumas.</td>
</tr>
<tr>
<td>Trauma type (secondary): Chronic non-interpersonal traumas (e.g. medical illness).</td>
</tr>
<tr>
<td>Additional descriptors (not included above): SPARCS is a manually-guided and empirically-supported group treatment designed to improve the emotional, social, academic, and behavioral functioning of adolescents exposed to chronic interpersonal trauma (such as ongoing physical abuse) and/or separate types of trauma (e.g. community violence, sexual assault). The curriculum was designed to address the needs of adolescents who may still be living with ongoing stress and may be experiencing problems in several areas of functioning including difficulties with affect regulation and impulsivity, self-perception, relationships, somatization, dissociation, numbing and avoidance, and struggles with their own purpose and meaning in life as well as worldviews that make it difficult for them to see a future for themselves. The curriculum has been successfully implemented with at-risk youth in various service systems (e.g. schools, juvenile justice, child-welfare, residential) in over a dozen states.</td>
</tr>
<tr>
<td>• Goals of the Program: include helping teens cope more effectively in the moment, enhancing self-efficacy, connecting with others and establishing supportive relationships, cultivating awareness, &amp; creating meaning in their lives.</td>
</tr>
<tr>
<td>• Youth with Complex Presentations &amp; Histories. SPARCS is designed to address a range of traumatic experiences and is not based on any one trauma type. The intervention is appropriate for traumatized adolescents with or without current/lifetime PTSD. Since many children and adolescents exposed to violence do not meet full criteria for PTSD, SPARCS also addresses comorbidity and impairments in functioning that stem from trauma but are not captured by a diagnosis of PTSD alone (e.g. behavior problems, delinquency, substance use).</td>
</tr>
<tr>
<td>• Developmentally Sensitive. SPARCS is designed to address the needs of multiply traumatized adolescents in a manner that incorporates developmental considerations specific to this age group. The manual has been specifically developed for use with adolescents and includes experiential activities that emphasize adolescents’ increased capacity for abstract thought as well as areas of development that are particularly relevant for teenagers (e.g. issues related to autonomy and identity).</td>
</tr>
</tbody>
</table>
**Target Population**

- Present-Focused. SPARCS is a present-focused intervention, and is not an exposure based model. Although there is no direct exposure component or construction of a trauma narrative, traumas are discussed in the context of how they relate to adolescents’ current behavior and to their understanding of their problems and difficulties in the here and now.

- Adaptations. Adaptations are in various stages of development and have been piloted in a number of settings. Adaptations include: a 6-session Skills Training model (SPARCS-ST) for use in short-term facilities; two peer-led curricula (Taking Control for use with youth in foster care, and the RAP Club for use with adolescents with extensive exposure to community violence), SPARCS for use in individual therapy (SPARCS-I), and SPARCS Juniors (for use with children ages 9 to 11).

**Age range:** 12 to 21

**Gender:** ☐ Males ☐ Females ☑ Both

**Ethnic/Racial Group** (include acculturation level/immigration/refugee history—e.g., multinational sample of Latinos, recent immigrant Cambodians, multigeneration African Americans): SPARCS has been used with ethnically diverse groups, including African American, Latino, Native American adolescents and refugee/immigrant populations.

**Language(s):** Predominantly English. Groups have also been conducted in Spanish and have been adapted for use in other countries (see “Culture-Specific Information” fact sheet).

**Region** (e.g., rural, urban): Urban, suburban, rural

**Other characteristics** (not included above):

- Populations: SPARCS has also been implemented with LGBTQ youth, gang-involved youth, and with adolescents who are pregnant or parenting.

- Settings: Groups have been provided in a variety of settings including outpatient clinics, schools, group homes, boarding schools, residential treatment centers and facilities, substance abuse treatment facilities, and juvenile justice centers. SPARCS has also been implemented with adolescents in foster care and in shelters with runaway/homeless youth. It is recommended that SPARCS be implemented in settings where adolescents can remain in treatment long enough to complete the intervention. Sessions can be divided into two segments and conducted twice a week to accommodate class periods in a school setting. SPARCS has been piloted for use in settings with short lengths of stay (see “Adaptations” in “Treatment Descriptions” section above).

**Essential Components**

**Theoretical basis:** (DBT: Miller, Rathus, & Linehan, 2006), and Complex Trauma theory. The curriculum also incorporates elements from early versions of Trauma Adaptive Recovery Group Education and Therapy (TARGET: Ford & Russo, 2006), and Trauma and Grief Components Therapy (TGCT: Layne, Saltzman, Pynoos, et al., 2000).

**Key components:** Mindfulness, Problem-Solving, Meaning-Making, Relationship-building/Communication Skills, Distress Tolerance and psychoeducation regarding stress, trauma, and triggers.
### SPARCS: General Information

#### Clinical & Anecdotal Evidence

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Uncertain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you aware of any suggestion/evidence that this treatment may be harmful?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Extent to which cultural issues have been described in writings about this intervention (scale of 1-5 where 1=not at all to 5=all the time).</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>This intervention is being used on the basis of anecdotes and personal communications only (no writings) that suggest its value with this group.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there any anecdotes describing satisfaction with treatment, drop-out rates (e.g., quarterly/annual reports)?</td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

#### If YES, please include citation:

#### Has this intervention been presented at scientific meetings? | Yes | No |

#### If YES, please include citation(s) from last five presentations: ISTSS 2003-2011
- Habib, M. (2010, November). A complex trauma case analysis of “James” using SPARCS (Structured Psychotherapy for Adolescents Responding to Chronic Stress): In J. Spinazzola (Chair), *Clinical Nuance in Complex Trauma Treatment: Analysis of a Single Case from the Vantage Point of Four of the Network’s Leading Complex Trauma Intervention Models*. Pre-Meeting Institute conducted at the International Society for Traumatic Stress Studies, Montreal, Canada.
### Clinical & Anecdotal Evidence continued

<table>
<thead>
<tr>
<th>SPARCS: Structured Psychotherapy for Adolescents Responding to Chronic Stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Habib, M. (2011, November). An Experiential Introduction to Mindfulness and MAKE A LINK communication skills in Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS), a Group Treatment for Adolescents with Complex Trauma Workshop conducted at the Connecting for Children’s Justice Conference, Nashville, TN.</td>
</tr>
</tbody>
</table>

**Are there any general writings which describe the components of the intervention or how to administer it?**  
☑ Yes ☐ No

**If YES, please include citation:**


**Has the intervention been replicated anywhere?**  
☑ Yes ☐ No

SPARCS has been replicated with foster care youth as part of a project with the Department of Children and Family Services in Illinois.

**Other countries? (please list)** India, Sri Lanka, Israel, Australia, Canada, Liberia

**Other clinical and/or anecdotal evidence (not included above):**

Generalization of skills has been noted at multiple sites and settings. Group members frequently report use of the skills outside of group and parents and clinical staff have observed that group members use the language and concepts at home, at school, or in their residence. Both boys and girls in a residential substance abuse treatment facility have identified knitting hats and blankets and donating them as ways in which they use their “Distress Tolerance” skills to self-regulate, and ways to make meaning by making a contribution to others. At another site, several gang members voluntarily sought out their group leader for additional practice with the skills they were learning in order to apply them to their specific stressors. One adolescent gave his therapist the crack pipe given to him as a gift by his mother, stating that he no longer needed it because he had learned new ways to cope. Members have asked to bring friends and family to the group and also reported that they teach the skills to others (e.g. one adolescent interrupted a fight between her sister and the sister’s boyfriend and taught them to use the “Make A Link” communication skills). Group members across settings have applied affect regulation and communication skills to real-life situations and have initiated and contributed to discussions with staff and teachers about conflicts on their unit or in school.
### Clinical & Anecdotal Evidence continued

Adolescents often request additional group sessions and express dismay upon termination or when groups are cancelled. In one setting group members worked together to write a letter to administrative staff, asking to have additional sessions of group added to their program so that they did not have to terminate. In an alternative school in an urban setting where truancy is a significant problem, clinicians reported that group members who previously refused treatment, began coming to school for the sole purpose of attending group.

Administrators, parents, and key stakeholders have shared observations regarding progress as well. Administrators in one school noted a dramatic decrease in physical confrontations between students in the school and in another school a reduction in disciplinary referrals was observed following a shortened psychoeducational adaptation of the curriculum provided for over 200 youth. Upon observing improvement in an adolescent in the juvenile justice system, one judge remarked that he is going to begin referring traumatized youth to SPARCS as an alternative to anger management.

### Research Evidence

#### Sample Size (N) and Breakdown (by gender, ethnicity, other cultural factors)

<table>
<thead>
<tr>
<th>Published Case Studies</th>
<th>N=1</th>
<th>By gender: female</th>
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<tbody>
<tr>
<td>Pilot Trials/Feasibility Trials (w/o control groups)</td>
<td>N=24</td>
<td>By gender: mixed</td>
<td>By ethnicity: Latino, African-American, Caucasian, and other</td>
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<td>N=14</td>
<td>By gender: female</td>
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<td></td>
<td>N=44</td>
<td>By gender: mixed</td>
<td>By ethnicity: Caucasian, African-American, Latino</td>
</tr>
<tr>
<td></td>
<td>N=31</td>
<td>By gender: mixed</td>
<td>By ethnicity: African-American, Caucasian, Latino</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Citation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knoverek, A., Underwood, L., Habib, M., Briggs, E. (manuscript in preparation). <em>Feasibility and Effectiveness of an Adapted Group Treatment for Traumatized Youth</em>.</td>
</tr>
</tbody>
</table>
### General Information

#### Clinical Trials

<table>
<thead>
<tr>
<th>N=41</th>
<th>By gender: mixed</th>
<th>By ethnicity: African-American, Caucasian, Latino</th>
</tr>
</thead>
<tbody>
<tr>
<td>N=33</td>
<td>By gender: mixed</td>
<td>By ethnicity: African-American, Caucasian, Latino</td>
</tr>
<tr>
<td>N=42</td>
<td>By gender: mixed</td>
<td>By ethnicity: predominantly African-American</td>
</tr>
</tbody>
</table>


#### Studies Describing Modifications

See Knoverek and colleagues above.
See Tandon and colleagues above.

#### Other Research Evidence

| N=184 | Unpublished data. |

#### Outcomes

**What assessments or measures are used as part of the intervention or for research purposes, if any?**
The Trauma History Checklist, Youth Outcome Questionnaire – Self-Report (YOQ-SR 2.0), UCLA PTSD Reaction Index (RI), the Child & Adolescent Needs & Strengths (CANS). Additional assessments have included: the Ohio Scales, the Structured Interview for Disorders of Extreme Stress – Adolescent Version (SIDES-A), and assorted other instruments.

**If research studies have been conducted, what were the outcomes?**
Pilot data indicate significant improvement in overall functioning over the course of treatment (as measured by the Youth Outcome Questionnaire SR-2.0 and the UCLA PTSD Reaction Index). Specific findings include:

- Significant changes on subscales measuring conduct problems, inattention/hyperactivity, somatic complaints, high risk behaviors, and interpersonal relationships.
- Significant reduction in PTSD symptoms, with improvements noted in the overall severity of posttraumatic stress symptoms, as well as scores assessing symptoms related to re-experiencing, avoidance, and hyper-arousal (Criterion B, C, and D respectively).
### Outcomes continued

For African-American adolescents (the primary group in the EBPP described above), youth receiving SPARCS:

- were less likely to drop out of treatment
- improved significantly on the following CANS subscales: Traumatic Stress Symptom, Life Domain Functioning, and Risk Behaviors.

Additional pilot data summarized from a variety of sources (including analyses in unpublished reports), found:

- decreased alcohol and drug use with 75% of adolescents reporting a decrease in frequency following treatment
- significant reduction in attachment difficulties and in behavior problems at school, home, and in the community
- decrease in disciplinary referrals in an alternative school (analyses in progress)
- significant improvement in interpersonal coping and an increase in support seeking behavior
- significant decrease in depressive symptoms in youth exposed to community violence and increase in active coping strategies

### Implementation, Requirements & Readiness

**Space, materials or equipment requirements?**

- Manual for each group leader
- Color workbook with handouts specific to each session (1 workbook per client)
- Meeting room large enough to accommodate a group of 8-12 adolescents
- Ability to play videos
- Assorted supplies for group activities (e.g. flip chart, seltzer water, sandpaper, music). Session supply list available upon request.

**Supervision requirements (e.g., review of taped sessions)?**

Ability to attend 80% of consultation calls. For certification only: one video or audiotaped session in which one of the core skills was implemented. In cases where it is not possible to tape a group, it may be permissible (with advance notice) to provide a tape of a “mock session” where a core skill is taught with a group of colleagues (e.g. at a staff meeting).

**To ensure successful implementation, support should be obtained from:**
treatment developers or certified trainers. A list of certified trainers is available upon request.
List citations for manuals or protocol descriptions and/or where manuals or protocol descriptions can be obtained.


**How/where is training obtained?** Contact treatment developers for a list of certified trainers. Trainings can be conducted on-site for agencies who are interested in hosting their own Collaborative. Participants can also join an existing Collaborative that may be taking place in another part of the country. The number of trainers varies depending on the size of the training group. The trainer-participant ratio is generally small in order to allow for adequate interaction and in-vivo consultation during role-plays.

**What is the cost of training?**

- **Training Costs**: Cost varies depending upon a number of factors including the number of participants and location of training. Cost structure is consistent across all certified trainers and should include all elements described below in “other training materials &/or requirements”. One black and white copy of the manual and one color Youth Workbook are typically included in the cost for each training participant. Contact treatment developers for detailed training cost information.

- **Youth Workbooks Costs**: The color Workbooks that are used with each group member can be purchased for approximately $20 each. These are sold at cost. Pricing depends on the size of the order.

- **Manual Costs**: Manuals can be purchased for $75 – $100 each (depending on printing and shipping costs). Cost includes the SPARCS clinician manual, one color workbook, and shipping and handling within the U.S. Implementing the curriculum without formal training and consultation is not encouraged as there are many concepts taught at the training that are not included in the manual and certain skills that appear self-explanatory (e.g. the LET ‘M GO problem-solving steps) require in-depth practice and coaching.

*Manuals and workbooks contain copyrighted material and should be purchased from developers.*

**Are intervention materials (handouts) available in other languages?**

☑ Yes ☐ No

**If YES, what languages?** Many of the youth handouts are available in Spanish.

**Other training materials &/or requirements (not included above):** SPARCS trainings are conducted using a “Learning Collaborative/ Community” model as this approach has been found to support successful treatment adoption and future sustainability.
This model differs from many traditional workshops because it involves making a commitment to complete several phases of training and includes the establishment of a 6 – 12 month relationship between trainers and training participants. The training model consists of a planning phase prior to the training, minimally 4 days of training (conducted across two 2-day training sessions), consultation calls, and ongoing email/phone support and ancillary materials provided throughout the duration of the collaborative. Participation from clinical staff (2 group co-leaders), and typically a supervisor and/or administrator (both, if possible) is required for training. We find that this level of commitment is essential in creating systemic change and ensuring the sustainability and availability of this program to youth long after the training has ended.

The SPARCS training model enhances trainees’ ability to address the inevitable barriers that arise when implementing a new practice, and is designed to promote a partnership that supports sharing challenges, successes, and employing creative problem-solving strategies. “Stand-alone” trainings that take place during a single face-to-face training session typically do not include a built-in readiness phase with trainers prior to the training or a formal plan regarding consultation and support from trainers following the actual training session. The “Learning Collaborative/Community” model of training is extensive and enhances the likelihood that the intervention will fully “take off” in the agency following the training. Trainings are intended to enhance implementation efforts and promote the continuation of SPARCS groups within the agency well beyond the scope of the initial training relationship. Many of our partners have been successful in doing this, years after their collaborative has ended.

The SPARCS training package spans 6 – 12 months and includes:

**Planning Phase:** Consultation calls and organizational readiness work begins minimally a month prior to the first training session. During this phase SPARCS trainers partner with agencies to identify resources that are available to support a new practice, identify potential challenges and solutions, and prepare for the groups so that they are able to begin the first session almost immediately after the initial training session. Readiness work includes issues related to assessment, identifying youth for group, recruiting and orienting adolescents to the purpose of group, getting buy-in from teens, staff, administrators, parents, other caregivers, anticipating barriers to implementation and problem-solving in advance (e.g. how can the program be sustained in light of staff turnover?). During this phase, clinicians, supervisors, and administrators develop in-house SPARCS teams, complete the SPARCS Planning Worksheet as a team, and discuss their findings during conference calls with trainers.

**Training Session 1:** 2 full days of interactive training typically attended by clinicians, and a supervisor and/or administrator. Training sessions may include clinicians from multiple sites who will have the opportunity to learn from one another. Trainings include a balance of didactic presentations, demonstrations, role-plays, and mindfulness practice.
### Training Materials & Requirements continued

**Consultation calls:** Bi-weekly calls immediately after Learning Session 1. Over time, these taper down to monthly calls.

**Training Session 2:** Two full days of training to occur approximately 8 weeks after the first learning session. This includes some review of concepts first learned in Training Session 1, as well as new material. At this point, clinicians will have already started their groups so will have an opportunity to bring their experiences to the training. The spacing between learning sessions is such that by the second learning session trainees will be learning new concepts/skills just prior to reaching the corresponding session of the manual.

**Administrative/Clinical support:** Trainers are generally available via phone/email to problem-solve and talk about things that occur outside of the regularly scheduled calls and learning sessions. Trainers often field emails and calls ranging from small requests for materials (e.g., teen-friendly fliers for recruiting group members, fliers for community stakeholders, group supply list, recommendations for videos) to larger questions regarding implementation stumbling blocks. Each training relationship is different. Please check directly with your trainer about the scope of support to be provided.

**Summary of Training Requirements:**

- Learning Collaborative participants consist of teams of at least 2 (preferably 3 individuals): 1 administrator/supervisor and 2 clinicians. Each group is co-led.
- Attendance at both full days of two separate Training Sessions.
- Active participation in 80% of consultation calls.
- Audio or Video-tape of one session in which a core skill is implemented (requirement for certification only).
- Completion of two 16-session cycles of SPARCS groups under supervision of trainers (requirement for certification only).

*Please note:* Certification can only be offered to individuals who have participated in the full training model, including minimally 4 days of training provided by certified trainers.

### Pros & Cons/Qualitative Impressions

**What are the pros of this intervention over others for this specific group (e.g., addresses stigma re. treatment, addresses transportation barriers)?**

This treatment is appropriate for traumatized adolescents with or without current/lifetime PTSD, and can be implemented while adolescents are still living with unstable/stressful environments. This intervention is strength-based and present focused. Discussions and activities center on enhancing resilience and helping group members identify and build upon existing strengths as opposed to focusing on the elimination of “problem behaviors”. It is based on the assumption that the adolescents’ symptoms (behavioral, interpersonal, and affective) represent their best efforts at coping with extreme stress. Group members routinely discuss and process their personal experiences throughout the group. The 16-session curriculum has been specifically designed for use with adolescents, with special consideration to the developmental tasks associated with this age group.
### Pros & Cons / Qualitative Impressions continued

As adolescents increasingly strive toward independence and autonomy from adults and caretakers, the influence of their peer group grows, making the group format of this approach especially powerful for this age group. Clinicians report that members often express feelings of validation simply upon hearing the shared stories and histories of other members. In one setting two gang-involved adolescents who had previously been involved in an altercation (outside of group) that almost resulted in an assault, later became allies when one of them disclosed witnessing domestic violence in the home, resulting in a similar disclosure by the adolescent who had initiated the altercation. As group cohesion builds, members begin to support one another more actively, and will share observations and comments in a way that holds more meaning than when done by the adult co-leaders.

**What are the cons of this intervention over others for this specific group (e.g., length of treatment, difficult to get reimbursement)?**

Intensive clinician training and consultation is required. Some agencies report difficulty retaining a sizeable group of adolescents for the duration of the intervention.

**Other qualitative impressions:**

Please see the section on “Clinical & Anecdotal Evidence” for a description of clinical impressions observed.

### Contact Information

**Name:** Mandy Habib, Psy.D./ Victor Labruna, Ph.D.

**Address:** 400 Community Dr., Manhasset, NY 11030

**Phone number:** 516-562-3276 / 516-672-3859

**Email:** mhabib@sparcstraining.com/vlabruna@sparcstraining.com

**Website:** www.sparcstraining.com

### References


Lyons, et al. (in press). Evaluation of the implementation of three evidence-based practices to address trauma for children and youth who are wards of the State of Illinois.

Agency | Department Of Juvenile Justice
---|---
Program Name | Mental Health Treatment
Program Description | IDJJ is developing a more therapeutic model aimed at identifying a youth’s needs on the front-end and following a defined treatment model for each youth that is less reliant on confinement and more focused on reinforcing reentry back into the community. By providing the youth with the appropriate mental and emotional tools that they need to be successful post-release, IDJJ increases the likelihood that they will become productive members in society. It is the responsibility of IDJJ to treat, educate, and rehabilitate youth within its custody.
Target Population | Youth in need of services.
Activities | The following types of programming are provided to youth in the Department of Juvenile Justice: assessments, substance abuse treatment, mental health treatment, individual and group counseling, case management, health care, education, chaplaincy, volunteer services, and leisure time services.
Goals | The Illinois Department of Juvenile Justice places a high importance on evaluating the mental health needs of the youth committed to the Department. All youth are screened by a mental health professional upon admission to any of the facilities. The Department also implements evidence-based screening and assessment tools at the Reception and Classification sites. All facilities have mental health professionals available for emergency and on-going mental health services.
Outcome | Meet the Needs of the Most Vulnerable

### PROGRAM FUNDING

<table>
<thead>
<tr>
<th>Appropriations ($ thousands)</th>
<th>FY18 Actual</th>
<th>FY19 Enacted</th>
<th>FY20 Recommended</th>
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<tbody>
<tr>
<td></td>
<td>270</td>
<td>5,358</td>
<td>6,106.9</td>
</tr>
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</table>

### MEASURES

#### Number of youth enrolled in mental health treatment in youth centers

- **Reported**: Monthly
- **Key Indicator**: Yes
- **Desired Direction**: Maintain
- **Benchmark**: Providing individualized mental health services to youth
- **Source**: Monthly reports
- **Baseline**: 444
- **Baseline Date**: 7/1/2013

**Methodology**: Number of youth reported to receive individual mental health treatment in a given month. Numbers provided by mental health staff to Chief of Mental Health. A certain percentage of youth will be counted multiple times.

<table>
<thead>
<tr>
<th></th>
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<tr>
<td></td>
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<td>Aug</td>
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</tr>
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<td>281</td>
<td>256</td>
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</tr>
<tr>
<td>2019</td>
<td>264</td>
<td>266</td>
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</tr>
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</table>
I. AUTHORITY AND RESOURCES

730 ILCS 5/3-2.5-20
20 Ill. Adm. Code 2415
Administrative Directive 04.04.100 General Mental Health Provisions
DJJ 0284 Mental Health Treatment Plan
DJJ 0282 Mental Health Diagnostic and Treatment Note
Mental Health Protocol Manual Sections IN-003, SA-004, MH-007
Mental Health Needs Assessment

II. POLICY AND PROCEDURE

A. All youth shall be assigned a mental health level (MHL) within one week of arrival to a parent facility. The mental health levels range from zero through four. All mental health levels are indicative of individual mental health services. All MHL 0s and 1s will be reviewed as often as clinically indicated, and all MHL 2, 3, 3.5, & 4s will be reviewed at least monthly.

B. All individual mental health therapy sessions are expected to be at least 45 minutes in duration unless clinically contraindicated and documented in a Mental Health Treatment Plan (DJJ 0284) or on the Mental Health Diagnostic and Treatment Note (DJJ 0282).

C. All youth shall be seen by a mental health professional as often as clinically indicated, regardless of his or her MHL.

D. Mental Health Levels:

1. MHL 0-None-reflects a youth with no current noted signs or symptoms of a diagnosis from the DSM-5, excluding substance use disorders or Conduct Disorder. Youth classified as MHL 0 do not require regularly scheduled interactions with a MHP, but can be assigned to individual, group or family therapy. They typically require services as requested by either the youth or staff.

2. MHL 1-Minimal Need-reflects a youth who may or may not have a history of mental health treatment, but who is presenting with current mild signs or symptoms from the DSM-5, excluding substance use disorders or Conduct Disorder. These youth have been determined to need a minimum of 90 minutes of mental health services per month. The mental health services can include group and/or family therapy.

3. MHL 2-Moderate Need-reflects a youth who typically has a history of mental health treatment and who is currently presenting with moderate signs or symptoms from the DSM-5, excluding substance use disorders or Conduct Disorder. These youth have been determined to need weekly mental health services with a Mental Health Professional. Individual sessions need to be at least 45 minutes in length unless the reason for a shorter session is documented on DJJ 0282 MHDNT. The required weekly mental health services may include family therapy sessions.

4. MHL 3-Urgent Need-reflects a youth who typically has a significant history of mental health treatment and who currently presents with severe signs or symptoms from the DSM-5, excluding a substance use related or Conduct Disorder. All youth classified in severe need status shall be assigned to a mental health professional caseload within 48 hours of his or her arrival at the receiving youth center.
These youths will also participate in therapeutic treatment programs, including intensive groups and milieu activities. These youths have been determined to need mental health services that occur a minimum of 2 – 3 times per week. Treatment must include at least one 45 minute individual therapy session, and other supplemental services, such as group and/or family therapy.

5. **MHL 3.5-Critical Need**-reflects a youth who typically has a significant history of mental health treatment and who currently presents with severe signs or symptoms from the DSM-5, excluding substance use disorders or Conduct Disorder. The symptoms may be due to recent serious mental health issues and/or recent psychiatric hospitalization. All youth classified in severe need status shall be assigned to a Mental Health Professional caseload within 24 hours of his or her arrival at the receiving youth center. These youth will also participate in therapeutic treatment programs, including intensive groups and milieu activities. These youth have been determined to need mental health services a minimum of 4 - 6 times per week. Treatment must include at least one 45 minute individual therapy session, and other supplemental services, such as group and/or family therapy.

6. **MHL 4-Hospitalized**-reflects a youth transferred to the Department of Human Services or a mental health inpatient psychiatric hospital setting.

E. Upon transfer to general population status from a Reception and Classification Center, the Treatment Unit Administrator (TUA) shall document any necessary change to a youth's mental health level on the Mental Health Needs Assessment Form. The youth's treating Psychiatrist, primary Mental Health Professional, or the youth center's TUA may assign or change a youth's MHL as the youth's clinical presentation warrants. This MHL assignment or change shall be recorded in the youth data system of record and the clinical rationale for such an assignment or change shall be documented on a Juvenile Clinical Mental Health Evaluation (DJJ 0283) or a Mental Health Diagnostic and Treatment Note (DJJ 0282).

F. When mental health staff members are on vacation for one week or less, they can ask their assigned youth if they would like a substitute therapist for that week and assign a substitute therapist appropriately. If a staff member is gone for more than one week, he or she will need to assign a therapist to cover the assigned caseload. The TUA needs to be informed of therapists that are temporarily assigned and to which youth they are assigned.
Budgeting for Results
Illinois Department of Juvenile Justice
Substance Use Disorder Program
Program Assessment
Introduction

The statute that created Budgeting for Results (BFR) states that in Illinois, budgets submitted and appropriations made must adhere to a method of budgeting where priorities are justified each year according to merit (Public Act 96-958). The BFR Commission, established by the same statute, has worked since 2011 to create and implement a structure for data-driven program assessment useful to decision makers.

The BFR framework utilizes the Results First benefit-cost model\(^1\) and the State Program Assessment Rating Tool to produce comprehensive assessments of state funded programs.

The Pew-MacArthur Results First Initiative developed a benefit-cost analysis model based on methods from the Washington State Institute for Public Policy (WSIPP). The Results First benefit-cost model can conduct analysis on programs within multiple policy domains including; adult crime, juvenile justice, substance use disorders, K-12 education, general prevention, health, higher education, mental health, and workforce development.

The State Program Assessment Rating Tool (SPART) combines both quantitative (benefit-cost results) and qualitative components in a comprehensive report. It is based on the federal Program Assessment Rating Tool (PART)\(^2\) developed by the President’s Office of Management and Budget and has been modified for state use. The SPART provides a universal rating classification to allow policy makers and the public to more easily compare programs and their performance across results areas.

Methods

BFR begins each assessment by modeling an Illinois program’s design and assessing its implementation. Each program is then matched with an existing rigorously studied program or policy. BFR completes a comprehensive review of related program literature to inform the modeling and matching process.

Each rigorously studied program has an effect size determined from existing validated research that summarizes the extent to which a program impacts a desired outcome. The effect size is useful in understanding the impact of a program run with fidelity to best practices or core principles.

The Results First benefit-cost model uses the effect size combined with the state’s unique population and resource characteristics to project the optimal return on investment that can be realized by taxpayers, victims of crime, and others in society when program goals are achieved.

The SPART contains summary program information, historical and current budgetary information, the statutory authority for the program, performance goals and performance measures. The SPART tool consists of weighted questions, which tally to give a program a numerical score of 1-100. Numerical scores are converted into qualitative assessments of program performance: effective, moderately effective, marginal and not effective.


Section 1

Results First Benefit-Cost Report
Benefit-Cost Summary – DJJ Substance Use Disorder Program

This is the benefit-cost analysis in the Juvenile Crime domain of the Illinois Department of Juvenile Justice (DJJ) substance use disorder (SUD) program. SUD among adolescents is a significant public safety and health issue, and specifically a significant concern for youth within the criminal justice system. There are numerous benefits to youth and their communities in reducing SUD, including its role in perpetuating other destructive behavior. Adolescents are uniquely impacted by peer dynamics and pressures that can influence substance use, and are also more vulnerable to the physical, cognitive and emotional effects of substances due to their stage of development.

The SUD Program uses a holistic approach towards treating SUD among youth in DJJ custody based on the Interactive Journaling Forward Thinking curriculum. This program is linked to several outcomes, including decreased substance abuse and increased high school graduation, however this report is only analyzing the program’s impact on DJJ’s primary outcome, a reduction in recidivism.

The DJJ SUD program was chosen to be analyzed using the Results First benefit-cost model due to the role of increasingly updated evidence and the potential impact of the program on the State of Illinois and DJJ. This benefit-cost analysis completed by BFR calculated that for every one dollar spent on the SUD Program by DJJ, $1.06 of future benefits could be realized by Illinois taxpayers and crime victims.

The major takeaways from this analysis can be found in Table 1 below along with its comprehensive SPART score. The optimal benefits for programs run with fidelity to best practices or core principles are determined using a standard metric called an effect size. Benefits are projected over fifty years. The real costs of a program are the sum of its direct and indirect costs. The benefits and the costs are discounted to present value. The benefit/cost ratio is the optimal return on investment (OROI) Illinois can expect from implementing the program with fidelity.

Table 1:

<table>
<thead>
<tr>
<th>Benefit-Cost Results</th>
<th>DJJ Substance Use Disorder Program per Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Optimal Benefits</strong></td>
<td>$4,440</td>
</tr>
<tr>
<td><strong>Real Cost (Net)(^3)</strong></td>
<td>$4,184</td>
</tr>
<tr>
<td><strong>Benefits – Costs (Net Present Value)</strong></td>
<td>$256</td>
</tr>
<tr>
<td><strong>Benefits/Costs (OROI)</strong></td>
<td>$1.06</td>
</tr>
<tr>
<td><strong>Chance Benefits Will Exceed Costs</strong></td>
<td>50%</td>
</tr>
<tr>
<td><strong>SPART Score</strong></td>
<td>62, Moderately Effective</td>
</tr>
</tbody>
</table>

\(^3\) Cost information supplied by DJJ.
All program benefits are predictive and there is uncertainty when forecasting future outcomes. To help account for the uncertainty BFR runs each benefit-cost analysis 10,000 times with random variations in the costs and benefits. The histogram below shows the results of this risk analysis. The optimal program benefits exceeded the program costs in 50 percent of the simulations.

![Histogram showing the results of the risk analysis. The optimal program benefits exceeded the program costs in 50 percent of the simulations.](image)
Benefit-Cost Detail – DJJ Substance Use Disorder Program

Program Information

Using program information gathered with DJJ, BFR identified the DJJ SUD Program as part of the broadly defined category ‘Other substance use disorder treatment for juveniles’ in the Results First benefit-cost model. This category represents the small but increasing body of literature on SUD programs for incarcerated youth. The information for the DJJ SUD Program was provided by DJJ and is described in Table 2 below. More specific program information can be found in the SPART.

Table 2:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Description</th>
</tr>
</thead>
</table>
| Substance Use Disorder Program-IYC-Warrenville | - Youth in the program are assessed as needing a higher level of substance use disorder treatment.  
- The program integrates pro-social values and skills using a cognitive behavioral approach combined with specialized substance use disorder services including life skill development, trauma informed practices and family engagement.  
- Average Length of stay in FY17: 62 days for successful completions  
- Groups occur four days per week, one hour per day. Additional one hour individual sessions occur per month. |
BFR completed a literature review of programming for residential juvenile substance use disorder. The following excerpt from Chassin, et al. (2009) explains the challenges and promises in running this program:

A small but rapidly growing number of studies have shown that substance use treatment can produce statistically significant reductions in use among juvenile offenders (or in samples in which the majority but not all of the participants are juvenile offenders (e.g., Hser et al., 2001; Dennis et al., 2005; Randall & Cunningham, 2003). However, as noted by Morral, McCaffrey, and Ridgeway (2004), most studies of adolescent drug treatment examine ‘research’ therapies, which are theory-driven and delivered with high fidelity within tightly controlled research settings and designs. By contrast, Morral et al. (2004) note that the most common treatments that are actually received by adolescent offenders are not ‘research therapies,’ but rather ‘community therapies,’ which are delivered under non-standardized conditions by leaders who may not be highly trained (and perhaps themselves in recovery from drug Use Disorder). Moreover, these differences in treatment implementation are likely to affect outcomes. Studies have suggested that the treatment effects seen in tightly controlled efficacy trials are greatly reduced when treatment is implemented in real-world settings (Curtis et al., 2004).

Little is known about the effects of the variety of drug treatments that are typically delivered to juvenile offenders in the ‘real world’ rather than in the context of a treatment outcome research study. Morral et al. (2004) found that one such program was effective in reducing substance use among juvenile offenders, but was not successful in reducing their criminal offending. []

Moreover, within the adolescent drug treatment literature, different treatment approaches have shown some positive results (including cognitive behavior therapies, contingency management, multidimensional family therapy, multisystemic therapy, residential treatment and 12-step methods), but no one treatment modality has proved to be consistently superior (Dennis et al., 2005; Morral et al., 2006). Accordingly, rather than advocate for one particular treatment modality, several groups, including the National Institute on Drug Use Disorder (2006) and the American Academy of Child and Adolescent Psychiatry (Bukstein et al., 2005), have described a set of elements that are thought to define high quality treatment and thus constitute “best practices” or “quality elements” (Drug Strategies, 2005). For example, the NIDA (2006) principles of drug treatment for criminal justice populations note that treatment must last long enough to produce stable changes, and that those with severe drug problems or cooccurring disorders usually require treatment that lasts at least three months. Both the American Academy of Child and Adolescent Psychiatry standards and the Drug Strategies best practices note that substance use disorder treatment for adolescents requires family involvement.¹

Benefit-Cost Analysis- DJJ Substance Use Disorder Program

The standard in Illinois is to track youth cohorts released from DJJ in the same year and record their recidivism over the next three years. For participants in national studies on incarcerated juveniles in SUD programs, the benefit-cost analysis predicts a modest 1.5% decrease in the recidivism rate three years from release from DJJ custody, as shown in Figure 1. This recidivism rate represents the decrease that can be expected from participation in a generic SUD program for youth in detention. As previously stated, there are challenges in matching the DJJ SUD program to specific evaluations in available literature.

Figure 1:

DJJ tracks the recidivism rate for participants in its own program. The SUD program as it exists currently began in 2016 at IYC – Warrenville. DJJ has provided cohort recidivism information since the program began. The DJJ recidivism rate for program participants is 27% vs the most recent three-year general population rate of 52%, a decrease of 25%. The DJJ SUD program is so far showing better results than the generic SUD research predicts.

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2 Recidivism for juveniles is defined as conviction after release from custody.
The benefits from the SUD program to DJJ come from reducing recidivism. Other benefits or costs related to substance abuse are not included in this report. The benefits are determined by calculating DJJ’s avoided future costs, classified as either fixed, variable or step costs. Fixed costs do not change based on the DJJ population. Variable costs change as the population increases or decreases marginally. Step costs only change once a threshold level of DJJ population numbers are reached. The cost that could be avoided by reducing recidivism are determined by calculating the fixed, variable and step costs that would change with a change in population.

The cumulative annual costs and benefits for the DJJ SUD Program can be seen below in Figure 2. For this program all costs are incurred in the first year and benefits accrue over time. The red line across the graph depicts net program costs. The costs per person for the DJJ SUD program change based on the number of youth served each year. Over the 10,000 simulations BFR runs, a range of possible costs are used in order to achieve a more accurate analysis.

The green area shows how program benefits accumulate. As illustrated, the program benefits exceed the program costs beginning six years after the initial investment. The analysis indicates that over the next six years the program could recoup its investment per participant in benefits to the State and society.

The return on investment from the benefit-cost analysis only calculates the crime related outcomes. There are currently not enough studies to support a positive outcome in other result areas.

*Figure 2:*
The DJJ SUD program accumulates benefits over time to various groups. The benefits to Illinois are based on avoided criminal justice expenses and avoided private costs incurred as a result of fewer crime victims. The private victimization costs include lost property, medical bills, wage loss, and the pain and suffering experienced by crime victims.

Taxpayers avoid paying for additional criminal justice system costs of arrests and processing; prosecutions, defense, and trials; and incarceration and supervision. Lower incarceration rates lead to fewer prisoners that need to be paid for by the State.

Additional indirect benefits accrue to society as well, including better use of the tax dollars that are currently raised, and future taxes that won’t have to be raised to pay for avoidable costs due to recidivism. When tax revenue is spent on one program, it has an opportunity cost of revenue that cannot be spent on other beneficial programs and services like public safety or economic development. Money that is taxed is also not available for private consumption and investment. The indirect benefits of making effective, economically efficient investments to reduce criminal recidivism are quantified within the Results First model using the Deadweight Cost of Taxation.

*Figure 3* below illustrates how benefits accumulate. The majority of the benefits come from future avoided victimization costs. The remaining benefits come from taxpayer costs and other avoided indirect deadweight costs.

*Figure 3:*

![Graph of Total Benefits by Perspective (not discounted)](image)

This is analysis run by BFR using the Results First benefit-cost model. Please see Budget.Illinois.gov for additional benefit-cost reports and supporting information.
Section 2

State Program Assessment Rating Tool
This report was compiled by the Budgeting for Results Unit of the Governor’s Office of Management and Budget with the support of the Department of Juvenile Justice (DJJ). The SPART is an assessment of the performance of state agency programs. Points are awarded for each element of the program including: Program Design and Benefit-Cost and Performance Management/Measurement. This combined with benefit-cost analysis through Results First establishes an overall rating of the program’s effectiveness, which can be found on the final page of this report.

Section 1: General Information

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>$313,956</td>
<td>$322,157</td>
<td>$340,704</td>
</tr>
</tbody>
</table>

Is this program mandated by law? Yes__ No X_
Identify the Origin of the law. State___ Federal_____ Other____
Statutory Cite __________ n/a ___________
Program Continuum Classification __________ Treatment, Case Identification

Evaluability

Provide a brief narrative statement on factors that impact the evaluability of this program.

The holistic approach of DJJ programming makes isolating the effect of the SUD program difficult. There is also limited research nationally on SUD programs for juveniles in facilities, creating an obstacle to BFR when matching the effect of the DJJ SUD program to other SUD programs nationally.

Each juvenile in the custody of DJJ is given an assessment and linked to a menu of services. The dose and length of the services provided depend on the juvenile and the substance use disorder counselor. This program was designed to be flexible to meet the needs of the participant. This intentional flexibility makes determining program fidelity difficult.

Key Performance Measure | FY 2014 | FY 2015 | FY 2016 | Reported in IPRS Y/N |
--------------------------|---------|---------|---------|----------------------|
SUD Program recidivism rate | NA      | NA      | 27%     | N                    |
DJJ recidivism rate       | 57.8%   | 52.1%   | NA      | Y                    |
## Section 2: Program Design and Implementation

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Is the Program: Evidence Based 25 pts</td>
<td>25</td>
<td>Theory Informed</td>
<td>15</td>
</tr>
<tr>
<td>Theory Informed 15 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown Effect 0 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Negative Effect -5 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What are the program’s core principles?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Explanation:**

The substance use disorder (SUD) treatment program throughout DJJ facilities is based on the Forward Thinking curriculum from The Change Companies. The Forward Thinking curriculum is tailored to juveniles involved with the criminal justice system. The Change Companies specializes in a clinical tool called Interactive Journaling (IJ).

DJJ began using this curriculum in 2012. At the time, IJ was one of the only juvenile residential SUD programs listed in the National Registry of Evidence-based Programs and Practices (NREPP), a database run by the Substance Abuse and Mental Health Services Administration (SAMHSA). The program endorsement has been subsequently removed as it was determined additional evidence was needed to prove its outcomes. The curriculum used by DJJ before Forward Thinking was designed for adults and deemed inappropriate programming for youth.

In its format, IJ combines elements of bibliotherapy (therapeutic reading material) and therapeutic writing, both of which have been shown to have benefits for addressing a variety of mental health concerns. In its content, IJ draws on several established change theories and frameworks including Motivational Interviewing, cognitive behavioral therapy, and the Transtheoretical Model of Change. The Forward Thinking curriculum provides a set of facilitator guides with instructions for guiding youth through the journals. Suggestions for activities and additional assignments to tailor the program to the youths’ needs are also included.

There is still a need for more rigorous evidence on IJ, and in particular on the use of IJ for juvenile offenders within a SUD program. There has been one randomized controlled trial (RCT) of IJ on substance-dependent adults in a county jail, which showed significant effects in reducing recidivism (Proctor, Hoffman, and Allison, 2012). These results are especially promising given the short and unpredictable stays of the inmates and the fact that the journals were simply provided for the inmates to work through on their own, with no additional treatment or support. In two other RCTs, one of which was on adolescents, IJ performed as well as or better than a comparison treatment group, but the studies were not designed to isolate the effect of IJ specifically (Miller, 2014).
As far as the broader research on SUD programs for juvenile offenders (on which the Results First benefit-cost analysis for this program is based), no particular program or programs have emerged as more effective than others based on rigorous evidence. However, studies have indicated certain best practices that ought to be part of a successful program. In particular, longer-duration programs (90 days or more) and programs that involve participants’ families tend to be more successful. The SUD program at IYC-Warrenville lasts a minimum of 60 days, with an average completion time of 62 days. There does not appear to be any family involvement in the SUD program specifically.

**Best Practices:**

BFR worked with the Illinois Criminal Justice Information Authority and the Sentencing Policy Advisory Council to better understand the Best Practices for a Theory-informed incarceration-based juvenile SUD program. BFR’s initial assessment is that The Forward Thinking curriculum excels at some of these practices and needs to be supplemented in others. A complete program evaluation is beyond the scope of BFR, but is recommended for the DJJ SUD program.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2 Is the Program implemented and run with fidelity to the program design?</td>
<td>25</td>
<td>Partial</td>
<td>12</td>
</tr>
</tbody>
</table>

**Explanation:**

The Change Company notes that the IJ facilitator program guides are designed to give program facilitators “flexibility to present Journal material according to facilitators’ own schedules and capabilities”. Conversations with program staff have indicated that DJJ’s SUD Counselors implement the Forward Thinking curriculum with varying degrees of flexibility based on the Counselor and the juvenile, both in how they guide the youth through the journals and in which journals they use or emphasize. It is not totally clear to what extent this flexibility goes beyond the scope intended by the curriculum designers.

At most DJJ facilities, youth who are in the SUD program live together in their own cottage or wing. This is not possible at IYC-Warrenville because it is a co-ed facility, which houses all female detainees in the DJJ system as well as some minimum and medium security males. For this reason, IYC-Warrenville cannot operate a full Therapeutic Community, a core component of which is a communal living arrangement for participants. Therapeutic Communities is the model of SUD treatment in use at other DJJ facilities.
<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3 If the program achieved full credit in question 2.2, can we expect the Optimal Return on Investment (OROI) for this program to be equal to or greater than $1 for each $1 spent?</td>
<td>10</td>
<td>Partial</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation:**

All program benefits are predictive and there is uncertainty when forecasting future outcomes. To help account for the uncertainty BFR runs each benefit-cost analysis 10,000 times with random variations in the costs and benefits. According the results for the attached benefit-cost analysis, there is a 50% chance that the optimal benefits will exceed the costs. On average, the program is expected to return $1.06 in benefits from reducing recidivism for every dollar spent. Due to limitations of existing research, this OROI does not include any benefits that may come from other outcomes, including changes in substance use among program participants.
Section 3: Performance Management/Measurement

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Does the program regularly collect timely and credible performance measures?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**

DJJ collects quarterly metrics the SUD program-specific youth recidivism rate. This is defined as the percentage of youth who complete the SUD program at IYC-Warrenville who are paroled, vacated, or discharged, and then return to DJJ or as adults to the Illinois Department of Corrections (IDOC) within three years of their release. DJJ also collects data on what percentage of these youth return for drug-related issues or charges. Because the SUD program at IYC-Warrenville has existed in its current format only since 2016, there has not yet been a cohort of youth tracked for a full three years after completing the program. The BFR Unit recommends that DJJ report these SUD program recidivism figures in IPRS as they become available. DJJ currently reports the overall youth recidivism rate as a metric under its Aftercare program.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.2 Do the performance measures focus on outcomes?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**

The primary outcome DJJ is seeking from its SUD program is the reduction of juvenile recidivism. The department is directly tracking its desired outcome. As stated above, it is recommended that DJJ report the recidivism data in IPRS for this program in addition to reporting the number of youth enrolled in treatment as it currently does. It is also recommended that DJJ consider whether there are other outcomes of interest, such as substance use, that could be tracked.
### Question

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.3 Are independent and thorough evaluations of the program conducted on a regular basis or as needed to support program improvements and evaluate effectiveness?</td>
<td>10</td>
<td>No</td>
<td>0</td>
</tr>
</tbody>
</table>

**Explanation:**

There are no independent evaluations of DJJ’s SUD program. There exists an independent watchdog, the John Howard Association, which periodically produces monitoring reports on DJJ facilities generally. Recent reports do not comment on the SUD program at IYC-Warrenville in any meaningful way.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4 Does the Agency use performance information (including that collected from program partners) to adjust program priorities, allocate resources, or take other appropriate management actions?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**

Flexibility and adaptation to youth needs is a core component of the Interactive Journaling curriculum. DJJ uses information from the SUD program’s Quarterly Quality Improvement Meetings to adjust program priorities, and make other appropriate management decisions, which may include additional group topics/materials, curriculum changes, program schedule changes, staff trainings, etc.
Concluding Comments

Research on the effectiveness of SUD programs for youth in detention is limited. The broad variety of SUD programs and the need for more research on how these programs work for youth in detention present challenges for an assessment of DJJ’s SUD program. The most rigorous studies on SUD programs for youth in detention are inconclusive due to the difficulty in evaluating this type of program, as mentioned in the evaluability comments above. A full program evaluation of DJJ’s program is therefore recommended, in line with DJJ’s embrace of an agency-wide culture moving toward greater evidence-based practices.

DJJ’s SUD program curriculum, Interactive Journaling, was considered evidence-based at the time of selection, but current evidence has shown a need for greater research. DJJ has made an effort to customize the program based on updated research and observations of youths’ specific needs. DJJ has also begun collecting program-specific recidivism data. Although data for a full three-year cohort is not yet available for DJJ’s program, the preliminary results seem to indicate that the program may be achieving lower recidivism rates than the national research would predict. BFR encourages DJJ to continue collecting data and refining program measures.

Final Program Score and Rating

<table>
<thead>
<tr>
<th>Final Score</th>
<th>Program Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>62</td>
<td>Moderately Effective</td>
</tr>
</tbody>
</table>

SPART Ratings

Programs that are PERFORMING have ratings of Effective, Moderately Effective, or Adequate.

- **Effective.** This is the highest rating a program can achieve. Programs rated Effective set ambitious goals, achieve results, are well-managed and improve efficiency. Score 75-100
- **Moderately Effective.** In general, a program rated Moderately Effective has set ambitious goals and is well-managed. Moderately Effective programs likely need to improve their efficiency or address other problems in the programs’ design or management in order to achieve better results. Score 50-74
- **Marginal.** This rating describes a program that needs to set more ambitious goals, achieve better results, improve accountability or strengthen its management practices. Score 25-49

Programs categorized as NOT PERFORMING have ratings of Ineffective or Results Not Demonstrated.

- **Ineffective.** Programs receiving this rating are not using your tax dollars effectively. Ineffective programs have been unable to achieve results due to a lack of clarity regarding the program's purpose or goals, poor management, or some other significant weakness. Score 0-24
- **Results Not Demonstrated.** A rating of Results Not Demonstrated (RND) indicates that a program has not been able to develop acceptable performance goals or collect data to determine whether it is performing.
Glossary

**Best Practices**: Policies or activities that have been identified through evidence-based policymaking to be most effective in achieving positive outcomes.

**Evidence-Based**: Systematic use of multiple, rigorous studies and evaluations which demonstrate the efficacy of the program’s theory of change and theory of action.

**Illinois Performance Reporting System (IPRS)**: The state’s web-based database for collecting program performance data. The IPRS database allows agencies to report programmatic level data to the Governor’s Office of Management and Budget on a regular basis.

**Outcome Measures**: Outcomes describe the intended result of carrying out a program or activity. They define an event or condition that is external to the program or activity and that is of direct importance to the intended beneficiaries and/or the general public. For example, one outcome measure of a program aimed to prevent the acquisition and transmission of HIV infection is the number (reduction) of new HIV infections in the state.

**Output Measures**: Outputs describe the level of activity that will be provided over a period of time, including a description of the characteristics (e.g., timeliness) established as standards for the activity. Outputs refer to the internal activities of a program (i.e., the products and services delivered). For example, an output could be the percentage of warnings that occur more than 20 minutes before a tornado forms.

**Program**: An intervention designed to achieve an agency objective or statutory mandate.

**Results First Clearinghouse Database**: One-stop online resource providing policymakers with an easy way to find information on the effectiveness of various interventions as rated by eight nation research clearinghouses which conduct systematic research reviews to identify which policies and interventions work.

**Target**: A quantifiable metric established by program managers or the funding entity established as a minimum threshold of performance (outcome or output) the program should attain within a specified timeframe. Program results are evaluated against the program target.

**Theory Informed**: A program where a lesser amount of evidence and/or rigor exists to validate the efficacy of the program’s theory of change and theory of action than an evidence-based program.

**Theory of Change**: The central processes or drives by which a change comes about for individuals, groups and communities.

**Theory of Action**: How programs or other interventions are constructed to activate theories of change.
References


Complete Set of Facilitator Guides – Forward Thinking (description). Retrieved from [https://www.changecompanies.net/products/?id=FTGC](https://www.changecompanies.net/products/?id=FTGC)


Budgeting for Results
Department of Juvenile Justice
Therapeutic Communities for Substance Use Disorder
Program Assessment
Introduction

The statute that created Budgeting for Results (BFR) states that in Illinois, budgets submitted and appropriations made must adhere to a method of budgeting where priorities are justified each year according to merit (Public Act 96-958). The BFR Commission, established by the same statute, has worked since 2011 to create and implement a structure for data-driven program assessment useful to decision makers.

The BFR framework utilizes the Results First benefit-cost model\(^1\) and the State Program Assessment Rating Tool to produce comprehensive assessments of state funded programs.

The Pew-MacArthur Results First Initiative developed a benefit-cost analysis model based on methods from the Washington State Institute for Public Policy (WSIPP). The Results First model can analyze programs within multiple policy domains, including: adult crime, juvenile justice, substance use disorders, K-12 and higher education, general prevention, health and workforce development.

The State Program Assessment Rating Tool (SPART) combines both quantitative (benefit-cost results) and qualitative components in a comprehensive report. It is based on the federal Program Assessment Rating Tool (PART)\(^2\) developed by the President’s Office of Management and Budget and has been modified for Illinois use. The SPART provides a universal rating classification to allow policy makers and the public to more easily compare programs and their performance across results areas.

Methods

BFR begins each assessment by examining an Illinois program’s design and assessing its implementation. Each program is then matched with an existing rigorously studied program or policy. BFR completes a comprehensive review of related program literature to inform the modeling and matching process.

Each rigorously studied program has an effect size determined from existing validated national research that summarizes the extent to which a program impacts a desired outcome. The effect size is useful in understanding the impact of a program run with fidelity to best practices or core principles.

The Results First benefit-cost model uses the effect size combined with the state’s unique population and resource characteristics to project the optimal return on investment that can be realized by taxpayers, victims of crime, and others in society when program goals are achieved.

The SPART contains summary program information, historical and current budgetary information, the statutory authority for the program, and performance goals and measures. The SPART tool consists of weighted questions, which tally to give a program a numerical score of 1-100. Numerical scores are converted into qualitative assessments of program performance: effective, moderately effective, marginal and not effective.

\(^1\) [https://www.pewtrusts.org/en/projects/pew-macarthur-results-first-initiative]

\(^2\) [https://georgewbush-whitehouse.archives.gov/omb/performance/index.html]
Section 1

Results First Benefit-Cost Analysis
Benefit-Cost Summary – DJJ Therapeutic Communities Program

This is the benefit-cost analysis of the Illinois Department of Juvenile Justice (DJJ) Therapeutic Communities (TC) program. TCs are a form of residential treatment for substance use disorder (SUD) among adults or adolescents. DJJ uses TCs to treat SUD among youth in detention at four of its five facilities.3

SUD among adolescents is a significant public safety and health issue, and specifically a significant concern for youth within the criminal justice system. There are numerous benefits to youth and their communities in reducing SUD, including its role in perpetuating other destructive and criminal behavior. Adolescents are uniquely impacted by peer dynamics and pressures that can influence substance use, and are also more vulnerable to the physical, cognitive and emotional effects of substances due to their stage of development.

This report examines the effect of the DJJ TC program on reducing youth recidivism. It does not include potential effects of the TC program on other outcomes of interest, such as youth substance use. The benefit-cost analysis completed by BFR calculated that for every one dollar spent on the TC program by DJJ, $2.52 of future benefits from reduced crime could be realized by Illinois taxpayers and crime victims.

The major takeaways from this analysis can be found in Table 1 below along with the program’s comprehensive SPART score. The optimal benefits are the benefits the program can expect to achieve if run with fidelity to best practices or core principles. Benefits per participant are projected over fifty years after program participation. The real costs of a program are the sum of its direct and indirect costs, net of the cost of treatment as usual. The benefits and the costs are discounted to present value. The benefit/cost ratio is the optimal return on investment (OROI) Illinois can expect from implementing the program with fidelity.

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3 DJJ does not run a TC at IYC-Warrenville because IYC-Warrenville is a co-ed facility. Living together is a core component of a TC and a co-ed facility separates males and females. Therefore, the SUD program at IYC-Warrenville is assessed in a separate report.
Table 1:

<table>
<thead>
<tr>
<th>Benefit-Cost Results</th>
<th>DJJ Therapeutic Communities Program per Participant</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Optimal Benefits</strong></td>
<td>$9,945</td>
</tr>
<tr>
<td><strong>Real Cost (Net)</strong></td>
<td>$3,941</td>
</tr>
<tr>
<td><strong>Benefits – Costs (Net Present Value)</strong></td>
<td>$6,004</td>
</tr>
<tr>
<td><strong>Benefits/Costs (OROI)</strong></td>
<td>$2.52</td>
</tr>
<tr>
<td><strong>Chance Benefits Will Exceed Costs</strong></td>
<td>75%</td>
</tr>
<tr>
<td><strong>SPART Score</strong></td>
<td>75 – Effective</td>
</tr>
</tbody>
</table>

All program benefits are predictive, and there is uncertainty when forecasting future outcomes. To help account for the uncertainty, BFR runs each benefit-cost analysis 10,000 times with random variations in the costs and benefits. The histogram below shows the results of this risk analysis. The optimal program benefits exceeded the program costs in 75 percent of the simulations.
Benefit-Cost Detail – DJJ Therapeutic Communities Program

Program Information

Using program information gathered with DJJ, BFR matched the DJJ Therapeutic Communities (TC) program with the program profile ‘Therapeutic communities for chemically dependent juvenile offenders’ in the Results First benefit-cost model. This profile is based on the small but increasing body of literature on TC programs specifically for youth involved with juvenile justice. The information for the DJJ TC program was provided by DJJ and is described in Table 2 below. More specific program information can be found in the SPART.

Table 2:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Description</th>
</tr>
</thead>
</table>
| Therapeutic Communities | - Youth entering DJJ facilities are assessed for substance use behavior. Youth who are assessed as Level 1 or Level 2 for SUD treatment need are placed in the TC at their facility.  
- Youth with a Level 1 need receive a minimum of 6 hours of SUD treatment per week. Youth with a Level 2 need receive a minimum of 9 hours per week.  
- The SUD treatment group sessions are centered around the Forward Thinking Interactive Journaling curriculum, and integrates pro-social values and skills using a cognitive behavioral approach combined with specialized substance use disorder services  
- Average length of stay in FY17 ranges from 104-137 days for successful completers, depending on the facility, with a minimum of 90 days                                                                 |

BFR completed a literature review of programming for residential juvenile substance use disorder. The review found that juvenile justice systems across the country have been moving in recent years toward a more effective and age-appropriate model for addressing juvenile delinquency. This approach aims to minimize the time that youth spend in confinement and provide them services in the community. However, there remains a need for a population of youth to receive services while in detention. The TC model for juvenile offenders in detention is a highly structured, comprehensive intervention that contains programming on substance use, mental health, life skills and academic instruction. There has been relatively little study on detention-based TC programs for youth. The TC model has been shown by several rigorous studies to be effective as a SUD treatment program among incarcerated adults and among youth in community-based settings. For further information, see the SPART.
Benefit-Cost Analysis - DJJ Therapeutic Communities Program

The standard in Illinois is to track youth cohorts released from DJJ in the same year and record their recidivism over the next three years. Based on national studies on incarcerated juveniles in TC programs, the benefit-cost analysis predicts the three-year recidivism rate\(^4\) for participants in the TC program to be under 62%, compared to just under 68% for the general juvenile population – a decrease of six percentage points, as shown in *Figure 1*.

*Figure 1:*

![Graph](image)

DJJ also tracks the actual recidivism rate for participants in its own program. The most recent three-year recidivism rate for DJJ overall was 52.1%. From July 2015-September 2018, DJJ’s four TC programs had recidivism rates ranging from 30.8-38.5% for youth who completed the program – a difference of anywhere from 13 to over 21 percentage points. This data is a promising indication that DJJ’s TC program is effective even in comparison to TC programs nationally.

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\(^4\) Recidivism for juveniles is defined as an adjudication after release from custody.
The cumulative annual costs and benefits for the DJJ TC Program can be seen below in Figure 2. For this program all costs are incurred in the first year, and benefits accrue over time. The red line across the graph depicts net program costs. The costs per person for the DJJ TC program change based on the number of youth served each year. Over the 10,000 simulations BFR runs, a range of possible costs are used in order to achieve a more accurate analysis.

The green area shows how program benefits accumulate. As illustrated, the program benefits exceed the program costs beginning four years after the initial investment. After ten years, the program benefits approach $10,000, nearly $6,000 more than the program cost. Although not depicted in Figure 2, BFR projected the program benefits out 50 years and found that total expected program benefits are $9,945 when discounted to present value.

When tax revenue is spent on one program, it has an opportunity cost of revenue that cannot be spent on other beneficial programs and services like public safety or economic development. Money that is taxed is also not available for private consumption and investment. The indirect benefits of making effective, economically efficient investments to reduce criminal recidivism are quantified within the Results First model using the Deadweight Cost of Taxation. This inefficiency creates both a benefit and a cost in this model – the initial spending on the program generates a cost, shown in Year 1 below. Later savings for Illinois due to reduced recidivism decrease the deadweight cost of inefficient government taxation and spending.

The return on investment from the benefit-cost analysis only calculates the benefits from reducing recidivism. Other benefits or costs related to substance use disorder are not included in this report. Based on additional data that will be obtained from future studies, this program will be reevaluated to determine outcomes in other result areas.

Figure 2:
The DJJ TC program accumulates benefits over time to various groups. The benefits to Illinois are based on avoided criminal justice expenses and avoided private costs incurred as a result of fewer crime victims. The private victimization costs include lost property, medical bills, wage loss, and the pain and suffering experienced by crime victims.

Taxpayers avoid paying for additional criminal justice system costs of arrests and processing; prosecutions, defense, and trials; and incarceration and supervision. Lower incarceration rates lead to fewer prisoners that need to be paid for by the State. The benefits to DJJ are determined by calculating DJJ’s avoided future costs, classified as either fixed, variable or step costs. Fixed costs do not change based on the DJJ population. Variable costs change as the population increases or decreases marginally. Step costs only change once a threshold level of DJJ population numbers are reached. The costs that could be avoided by reducing recidivism are determined by calculating the fixed, variable and step costs that would change with a change in the DJJ population.

Additional indirect benefits accrue to society as well, including better use of current tax dollars and a reduced need for future tax revenue due to a lower recidivism rate. There are also indirect deadweight costs caused by spending tax dollars on the program. These are counted against the indirect benefits, so indirect benefits are negative for the first year of the program.

*Figure 3* below illustrates how benefits accumulate to different Illinois stakeholders. The majority of the benefits come from future avoided victimization costs. The remaining benefits come from taxpayer costs and other avoided indirect deadweight costs.

*Figure 3:*

![Diagram](image-url)
Section 2

State Program Assessment Rating Tool
This report was compiled by the Budgeting for Results Unit of the Governor’s Office of Management and Budget with the support of the Department of Juvenile Justice. The SPART is an assessment of the performance of state agency programs. Points are awarded for each element of the program including: Program Design and Benefit-Cost and Performance Management/Measurement. This combined with benefit-cost analysis through Results First establishes an overall rating of the program’s effectiveness, which can be found on the final page of this report.

**Section 1: General Information**

Prior Year (PY), Current Year (CY), Fiscal Year (FY) Budget (in thousands) Appropriated___ Expended X

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriated</td>
<td>$1,978</td>
<td>$359</td>
<td>$1,743</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
</tr>
</tbody>
</table>

Is this program mandated by law?   Yes__  No_ _X__

Identify the Origin of the law.  State__  Federal_ ___ Other____

Statutory Cite__________________N/A__________________

Program Continuum Classification  ___________Treatment, Case Identification____________

**Evaluability**

*Provide a brief narrative statement on factors that impact the evaluability of this program.*

There are four DJJ facilities that run TC programs. Each facility has its own challenges based on the physical structure of the facility, logistics and the resources available. All the DJJ TCs are running the same curriculum, however due to the mentioned constraints there is inconsistency in the implementation among the four DJJ TC programs.

Additionally, there is currently limited rigorous evidence on the effectiveness of TC programs for youth in a detention setting. Most studies on TC programs for youth offenders focus on youth on parole or probation in community settings.

**Key Performance Measure**

<table>
<thead>
<tr>
<th>Key Performance Measure</th>
<th>FY 2013</th>
<th>FY 2014</th>
<th>FY 2015</th>
<th>Reported in IPRS Y/N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapeutic Communities recidivism rate(^5)</td>
<td>N/A</td>
<td>N/A</td>
<td>34%(^6)</td>
<td>N</td>
</tr>
<tr>
<td>Overall DJJ recidivism rate</td>
<td>58.7%</td>
<td>57.8%</td>
<td>52.1%</td>
<td>Y</td>
</tr>
</tbody>
</table>

---

\(^5\) DJJ collects standard recidivism rates in annually discharged cohorts tracked for three years.

\(^6\) Weighted average of recidivism rates for each facility running a TC program.
**Section 2: Program Design and Benefit-Cost**

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Evidence Level</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 What is the program evidence level?</td>
<td>25</td>
<td>Theory Informed</td>
<td>15</td>
</tr>
<tr>
<td>- Evidence Based 25pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Theory Informed 15 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Unknown Effect 0 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Negative Effect -5 pts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Provide core principles in narrative section)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Explanation:** DJJ runs therapeutic communities (TCs) at 4 of their 5 facilities. TCs are a form of intensive, residential substance use disorder (SUD) treatment. TCs are highly structured interventions where participants spend large portions of their waking hours in structured programming and activities. This routine contains programming on substance use, mental health, life skills training and academic instruction. The organizational structure of the community is hierarchical, with participants taking on different jobs and roles and gaining responsibility as they advance through the program. TCs emphasize peer relationships and both personal and group accountability for substance use behaviors.

Among SUD treatment programs for incarcerated individuals, TCs show the “most consistent evidence of treatment effectiveness” (Mitchell, 2012). However, most research on TCs has focused on programs for adults. The evidence on TCs’ effectiveness for juveniles is mixed. Additionally, while TC programs typically are at least 6 months in duration, research indicates that juveniles have better outcomes overall when their time in detention is minimized.

Evidence indicates that a TC may be an effective program when compared to other ways of treating youth in detention. However, evidence also indicates that youth may be better served by being released more quickly and referred to treatment in the community. DJJ understands these challenges and is working to innovate and develop solutions.
<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2 Is the Program implemented and run with fidelity to the program</td>
<td>25</td>
<td>Partial</td>
<td>15</td>
</tr>
<tr>
<td>design?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Explanation:** DJJ’s therapeutic communities program is implemented at four of their five facilities: IYC-Chicago, IYC-Harrisburg, IYC-Pere Marquette, and IYC-St. Charles. All youth at IYC-Pere Marquette participate in SUD programming, so the facility as a whole can be labeled a therapeutic community. At IYC-Chicago, IYC-Harrisburg and IYC-St. Charles, youth participating in SUD programming are housed together in a dedicated unit which can be considered the therapeutic community. The fifth facility, IYC-Warrenville, also offers SUD programming, but because the SUD program participants at Warrenville are not in a dedicated housing unit, DJJ does not consider the Warrenville program a TC. The SUD program at IYC-Warrenville is discussed in a separate BFR report available at www.Budget.Illinois.gov.

The implementation of the TC program varies somewhat among DJJ facilities. All facilities use a variation of the Forward Thinking Interactive Journaling curriculum, from the Change Companies, as part of the SUD programming. The curriculum is designed to be modular and to be used flexibly according to youths’ needs. Consistent with standard TC program philosophy, the Forward Thinking curriculum takes a holistic cognitive-behavioral approach to addressing youths’ thought patterns and coping skills, in addition to addressing substance-using behavior directly.

DJJ’s TC program is designed to last 90 days, with actual average length of stay ranging from 104-137 days per youth depending on the facility. DJJ’s TC utilizes a short program duration compared to most TCs. As discussed above, this duration is supported by evidence that shorter detention stays overall have been shown to have better outcomes for youth offenders. Additionally, DJJ has a statutory mandate to place youth in the least restrictive environment possible (705 ILCS 405/5-750)\(^7\).

In addition to communal housing and SUD programming, another central component of a TC is a highly structured daily routine including education, other programming, and social and recreational activities. The amount of time DJJ youth spend in education, other programming and activities varies widely between DJJ facilities. BFR was able to conduct a site visit to IYC-Pere Marquette, which is a small, minimum-security step-down facility where all youth participate in the TC program. IYC-Pere Marquette offers a wide variety of programming and educational opportunities for the youth, including off-site trips. Youth reported spending only about an hour of waking time in their cells per day. In contrast, other DJJ facilities utilize varying amounts of out-of-confinement time as confirmed by independent monitoring reports\(^8\). IYC-Chicago and IYC-St. Charles attribute youth confinement schedules to low staffing levels and youth behavioral problems.

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\(^8\) Available through the John Howard Association at: [https://www.thejha.org/youthfacilities](https://www.thejha.org/youthfacilities)
<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3 If the program achieved full credit in question 2.2, can we expect the Optimal Return on Investment (OROI) for this program to be equal to or greater than $1 for each $1 spent?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**  
The DJJ TC program is using available evidence to implement best practices and follow state law. The expected optimal return on investment from this program is $2.52. Please see the attached benefit-cost report for additional information.
Section 3: Performance Management/Measurement

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Does the program regularly collect timely and credible performance measures?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:** DJJ collects quarterly metrics on the youth recidivism rate for each of its facilities, as well as the recidivism rate for youth in the Therapeutic Communities program specifically. This is defined as the percentage of youth who complete the Therapeutic Communities program and are paroled, vacated, or discharged, and then return to DJJ or as adults to the Illinois Department of Corrections (IDOC) within three years of their release. DJJ also collects data on what percentage of these youth return for drug-related issues or charges.

The BFR Unit recommends that DJJ report these Therapeutic Communities program recidivism figures in IPRS. DJJ currently reports the overall youth recidivism rate as a metric under its Aftercare program, but does not report the Therapeutic Communities program-specific rate.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.2 Do the performance measures focus on outcomes?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:** The primary outcome DJJ is seeking from its Therapeutic Communities program is the reduction of juvenile recidivism. The department is directly tracking its desired outcome.

As stated above, it is recommended that DJJ report the recidivism data in IPRS for this program in addition to reporting the number of youth enrolled in Substance Use Disorder treatment (both Therapeutic Communities and other) as it currently does. It is also recommended that DJJ consider whether there are other outcomes of interest, such as substance use, that could be tracked.

---

9 See the most recent DJJ IPRS report at: [https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile_Justice.pdf](https://www2.illinois.gov/sites/budget/IPRS%20Reports/425-Juvenile_Justice.pdf)
<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.3 Are independent and thorough evaluations of the program conducted on a regular basis or as needed to support program improvements and evaluate effectiveness?</td>
<td>10</td>
<td>Partial</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation:**

The John Howard Association (JHA), an independent monitoring organization, produces periodic reports on each DJJ facility. JHA notes from site visits to two facilities in the spring of 2018, that each had a substantial waitlist for the TC program. DJJ reported to JHA in October 2018 that both facilities no longer have a waitlist.

Youth sentenced to DJJ custody do not have a set release date, however a target release date is given. Release is ultimately dependent on being deemed rehabilitated. JHA expressed concern that some youth are being kept in detention beyond their original target release date in order to complete the TC program. JHA recommended that the DJJ TC program be condensed and that youth be triaged more effectively to refer more youth to treatment in the community after their release, rather than in detention (John Howard Association, 2018).

This is a main issue for the evaluation of DJJ’s TC program. While TC programs are generally designed for longer durations than the DJJ program length of 90 days, and while TC is considered an effective program when compared to other programs for SUD treatment in incarceration, evidence validates that, in general, youth have better outcomes when residing in their communities rather than in detention.

JHA is dedicated to monitoring both adult and juvenile correctional facilities in Illinois. JHA does not specialize in SUD treatment, nor has it conducted comprehensive program evaluations of DJJ’s TC program specifically. Therefore, a full independent evaluation of the TC program by SUD treatment experts is recommended.

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4 Does the Agency use performance information (including that collected from program partners) to adjust program priorities, allocate resources, or take other appropriate management actions?</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:**

DJJ uses information from the TC program’s Quarterly Quality Improvement Meetings to adjust program priorities, and make other appropriate management decisions, which may include additional group topics/materials, curriculum changes, program schedule changes, staff trainings, etc.
Concluding Comments

DJJ began transitioning its facilities to a Therapeutic Communities (TC) model in 2015. The design of this program is impacted by a tension within the existing evidence. TC programs are considered an effective program when compared to other programs for SUD treatment in incarceration. However, studies of TC programs involve longer durations than the average DJJ program length. DJJ has shortened the program because, in general, youth have better outcomes when housed in their communities rather than in detention. DJJ also has a statutory mandate to place youth in the least restrictive environment possible.

Final Program Score and Rating

<table>
<thead>
<tr>
<th>Final Score</th>
<th>Program Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>75</td>
<td>Effective</td>
</tr>
</tbody>
</table>

SPART Ratings

Programs that are PERFORMING have ratings of Effective, Moderately Effective, or Adequate.

- **Effective.** This is the highest rating a program can achieve. Programs rated Effective set ambitious goals, achieve results, are well-managed and improve efficiency. Score 75-100
- **Moderately Effective.** In general, a program rated Moderately Effective has set ambitious goals and is well-managed. Moderately Effective programs likely need to improve their efficiency or address other problems in the programs' design or management in order to achieve better results. Score 50-74
- **Marginal.** This rating describes a program that needs to set more ambitious goals, achieve better results, improve accountability or strengthen its management practices. Score 25-49

Programs categorized as NOT PERFORMING have ratings of Ineffective or Results Not Demonstrated.

- **Ineffective.** Programs receiving this rating are not using your tax dollars effectively. Ineffective programs have been unable to achieve results due to a lack of clarity regarding the program's purpose or goals, poor management, or some other significant weakness. Score 0-24
- **Results Not Demonstrated.** A rating of Results Not Demonstrated (RND) indicates that a program has not been able to develop acceptable performance goals or collect data to determine whether it is performing.

Glossary

**Best Practices**: Policies or activities that have been identified through evidence-based policymaking to be most effective in achieving positive outcomes.

**Evidence-Based**: Systematic use of multiple, rigorous studies and evaluations which demonstrate the efficacy of the program’s theory of change and theory of action.

**Illinois Performance Reporting System (IPRS)**: The state’s web-based database for collecting program performance data. The IPRS database allows agencies to report programmatic level data to the Governor’s Office of Management and Budget on a regular basis.

**Optimal Return on Investment (OROI)**: A dollar amount that expresses the present value of program benefits net of program costs that can be expected if a program is implemented with fidelity to core principles or best practices.

**Outcome Measures**: Outcomes describe the intended result of carrying out a program or activity. They define an event or condition that is external to the program or activity and that is of direct importance to the intended beneficiaries and/or the general public. For example, one outcome measure of a program aimed to prevent the acquisition and transmission of HIV infection is the number (reduction) of new HIV infections in the state.

**Output Measures**: Outputs describe the level of activity that will be provided over a period of time, including a description of the characteristics (e.g., timeliness) established as standards for the activity. Outputs refer to the internal activities of a program (i.e., the products and services delivered). For example, an output could be the percentage of warnings that occur more than 20 minutes before a tornado forms.

**Results First Clearinghouse Database**: One-stop online resource providing policymakers with an easy way to find information on the effectiveness of various interventions as rated by eight nation research clearinghouses which conduct systematic research reviews to identify which policies and interventions work.

**Target**: A quantifiable metric established by program managers or the funding entity established as a minimum threshold of performance (outcome or output) the program should attain within a specified timeframe. Program results are evaluated against the program target.

**Theory Informed**: A program where a lesser amount of evidence and/or rigor exists to validate the efficacy of the program’s theory of change and theory of action than an evidence-based program.

**Theory of Change**: The central processes or drives by which a change comes about for individuals, groups and communities

**Theory of Action**: How programs or other interventions are constructed to activate theories of change.
Citations


Works Referenced


Appendix E

Adult and Juvenile Justice Results First Technical Appendix
Budgeting for Results
Technical Appendix
Adult Crime and Juvenile Justice Policy Domains

August 2019
Introduction

This is a technical overview of the Budgeting for Results (BFR) benefit-cost analysis (BCA) within the adult crime and juvenile justice policy domains. In 2011, BFR created the Illinois Performance Reporting System (IPRS) for collecting program performance data. In 2017, BFR began using the Pew MacArthur Results First benefit-cost model to determine the return on investment for state programs. The Results First model is based on the benefit-cost model developed by the Washington State Institute of Public Policy (WSIPP), which was designed to produce benefit-cost analyses on programs for Washington State. The Results First model is generalized to allow BFR to adapt WSIPP program analyses to Illinois by customizing the benefit-cost model with Illinois-specific information on state demographics, government spending and other inputs.

BFR divides Illinois-funded programs by policy domain and desired outcome. The Results First model includes several policy domains. The BFR pilot analysis was on programs in the Adult Crime domain with the desired outcome of reducing recidivism, and subsequent analyses were done in the Juvenile Justice domain. Using the existing IPRS database and information gathered from the Illinois Department of Corrections (DOC) and Department of Juvenile Justice (DJJ), BFR created inventories of such programs. For each program selected for analysis, BFR conducted a literature review of current research on the program in order to match the Illinois program with a program profile in the Results First model. Each profile is based on a meta-analysis of national research on program best practices conducted by WSIPP.

BFR worked with relevant agencies to gather all state costs related to running each program and to determine the marginal program costs per participant. The program costs and effect size, along with monetizable benefits to Illinois, are used to calculate the optimal return on investment (OROI), which is the return on investment that is anticipated when the program is run with fidelity to design and best practices.

Meta-Analysis and Effect Size

For each program identified in a policy domain, BFR collects information on the program and conducts research on similar programs that exist nationally, to determine if the Illinois program can be matched with an existing program profile in the Results First model. A program must have a matching program profile in order to produce a BCA. The program profiles are the result of comprehensive literature reviews performed by WSIPP. WSIPP performs a meta-analysis of studies that have evaluated a program’s effect on one or more outcomes. This meta-analysis results in an effect size for each program outcome. The effect size is a single number that quantifies the expected impact of a program on a particular outcome for program participants, as compared to a control group. For example, a program in the adult crime or juvenile justice domains might have an effect size that represents the change in recidivism rate that can be expected for participants in the program as compared to the baseline Illinois recidivism rate.

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1 The Pew-MacArthur Results First Initiative works with states to implement evidence-based approaches to policy. For more information, visit https://www.pewtrusts.org/en/projects/pew-macarthur-results-first-initiative

**Outcomes of Interest**

Each program has one or more goals or outcomes, which may or may not be currently monetizable in Illinois’ Results First model. Analyses in the Adult Crime and Juvenile Justice policy domains all include the outcome of reducing crime, the administering agency’s stated goal for their programming. Currently, this is the only monetized outcome in Illinois program assessments in these domains.

The Results First model has the capacity to assess additional outcomes such as illicit drug use disorder or adult literacy that are secondary outcomes in the Adult Crime and Juvenile Justice policy domains. However, BFR has not yet populated the model with the Illinois-specific data necessary to conduct analysis on these additional outcomes. As BFR work progresses into new policy domains, BFR will populate more areas of the Results First model with Illinois-specific data and be able to update existing program assessments with new outcomes.

Future development of the Results First model will also allow for the expansion of program assessments to consider additional outcomes. For example, in the near future it may be possible to evaluate the effect of crime reduction programs on future labor market earnings for program participants.

**Linked Outcomes**

In addition to outcomes that are directly impacted by the program, some programs have linked outcomes which are influenced by the program’s primary outcomes. In the case of reducing recidivism, national research has linked reduced juvenile crime to increased rates of high school graduation. Program profiles that show a positive impact on juvenile crime include an effect size that describes the expected improvement on the high school graduation rate for program participants as compared to the baseline Illinois high school graduation rate.

**Monetizing Program Benefits**

In order to perform the BCA, it’s necessary to monetize the desired outcome or outcomes of a policy domain. The benefits from running a program can then be directly compared to the program’s cost. In the Adult Crime and Juvenile Justice policy domains, the monetizable benefits come from reducing recidivism.

The benefits of a government program can be apportioned to the stakeholders who benefit. In BFR reports, program benefits are divided into four categories: direct benefits to program participants, direct benefits to taxpayers through reduced government spending, direct benefits to other members of society and indirect benefits to society through the reduced deadweight cost of taxation. Benefits to
taxpayers are of particular interest to state policymakers who must make difficult decisions about how to allocate government resources.

The Benefits of Reducing Crime

Benefits to Taxpayers

As discussed above, the primary outcome of interest for the Adult Crime and Juvenile Justice policy domains is reducing recidivism. The benefits to taxpayers from reducing recidivism come in the form of reduced use of state, county and local criminal justice resources.

In estimating the benefits of reducing adult recidivism, BFR has been aided by work done by the Illinois Sentencing Policy Advisory Council (SPAC). Detailed information on this work can be found in the report “Illinois Results First: The High Cost of Recidivism 2018 Report”, and in its accompanying technical supplement, both of which are available at http://www.icjia.state.il.us/spac/index.cfm?metasection=publications.

To estimate the decreased use of criminal justice resources that result from a reduction in recidivism, SPAC first analyzed how different types of crime contribute to Illinois’ total recidivism rate. Different types of crime have different impacts on victims and on state resources. Table 1 below depicts the types of crimes committed by adults who were released from prison or sentenced to probation in 2007, and were convicted of another crime within nine years (55.9% of adults recidivate within nine years). Table 1 similarly depicts the types of crimes committed by juveniles who were released from DJJ custody or sentenced to community supervision in 2009 and adjudicated for another offense within nine years (80.6% of juveniles recidivate within nine years):

<table>
<thead>
<tr>
<th>Type of Crime</th>
<th>Murder</th>
<th>Felony Sex Crimes</th>
<th>Robbery</th>
<th>Aggravated Assault or Battery</th>
<th>Felony Property</th>
<th>Felony Drug and Other</th>
<th>Misdemeanors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult Crime</td>
<td>0.3%</td>
<td>0.4%</td>
<td>1.8%</td>
<td>5.4%</td>
<td>20.8%</td>
<td>32.5%</td>
<td>38.9%</td>
</tr>
<tr>
<td>Juvenile Offense</td>
<td>0.4%</td>
<td>0.7%</td>
<td>6.2%</td>
<td>6.9%</td>
<td>18%</td>
<td>29.2%</td>
<td>38.6%</td>
</tr>
</tbody>
</table>


The SPAC model also accounts for recidivism events (one readmission to the criminal justice system) resulting in multiple convictions for different crime types.

Tables 2 and 3 depict estimated criminal justice system marginal operating costs per recidivism event for the adult and juvenile justice systems. Costs were provided by SPAC in conjunction with the Illinois Criminal Justice Information Authority (ICJIA). Police, court and prosecutor costs are primarily derived from marginal cost estimates done by WSIPP, with adjustments for salary and budget differences between Washington State and Illinois. Most costs are similar across types of crime, and the overall average marginal cost is used. In the case of courts and legal costs, separate marginal cost estimates are provided for the different types of violent felony cases.
SPAC uses a dynamic marginal cost model to address the challenge that criminal justice spending does not always change in direct proportion to the number of prisoners or people on probation. Some costs such as food may be truly marginal, while others such as staff or facilities may change only with large changes in the population served. For more information, see the SPAC document “Dynamic Marginal Costs in Fiscal Impact Analyses” at http://www.icjia.state.il.us/spac/pdf/Dynamic_Marginal_Costs.pdf. The costs displayed in Tables 2 and 3 are the average dynamic marginal costs for incarceration changes of up to 10,000 people.

When benefits to taxpayers are calculated for a particular program, the dynamic marginal costs of changes in system use are calculated based on the expected annual program participation and the associated change in recidivism. For per-year costs such as prison, the benefit-cost model takes into account that different types of crime are associated with a longer duration of resource usage on average. For example, average prison terms range from 1.2 years for felony drug convictions to 36.5 years for murder.

All cost information is adjusted to current dollars using the Implicit Price Deflator for Personal Consumption Expenditures, calculated by the Bureau of Economic Analysis. When the Adult Crime and Juvenile Justice policy domains were populated, 2017 was the latest year available for this price index.

Table 2: Adult criminal justice system marginal operating costs (2017 dollars)

<table>
<thead>
<tr>
<th></th>
<th>Murder</th>
<th>Felony Sex Crimes</th>
<th>Robbery</th>
<th>Agg. Assault or Battery</th>
<th>Felony Property</th>
<th>Felony Drug and Other</th>
<th>Misdemeanors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police Costs per Arrest</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$1005</td>
</tr>
<tr>
<td>Courts and Legal Costs per Arrest</td>
<td>$202,562</td>
<td>$24,952</td>
<td>$13,114</td>
<td>$6,484</td>
<td></td>
<td>$267</td>
<td></td>
</tr>
<tr>
<td>Adult Jail per Person per Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$15,523</td>
</tr>
<tr>
<td>Adult Probation per Person per Year</td>
<td>n/a²</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$1,861</td>
</tr>
<tr>
<td>Adult Prison per Person per Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>n/a²</td>
</tr>
<tr>
<td>Adult Post-Prison Supervision per Person per Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>n/a²</td>
</tr>
</tbody>
</table>

Source: Illinois Sentencing Policy Advisory Council (Steinfeld, Powers, and Saltmarsh 2018), Table 4.a.1, with figures adjusted to 2017 dollars using the BEA’s implicit price deflator for personal consumption expenditures.

2 Probation sentences for murder are very rare. Misdemeanors cannot result in prison sentences, although they can result in sentences to county jail of up to one year.
Table 3: Juvenile justice system marginal operating costs (2017 dollars)

<table>
<thead>
<tr>
<th>Resource Type</th>
<th>Cost per Person per Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Detention</td>
<td>$24,246</td>
</tr>
<tr>
<td>Local Supervision</td>
<td>$4,000</td>
</tr>
<tr>
<td>State Institution</td>
<td>$44,398</td>
</tr>
<tr>
<td>Post-Release Supervision</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

Source: GOMB/SPAC internal analysis.

Benefits to Society

In addition to returning benefits to the taxpayer, government programs usually also aim to create some benefit for society at large. In the case of programs that aim to reduce recidivism, these benefits come in the form of reduced harm to victims of crime.

An important element of monetizing crime victimization is accounting for unreported crime. Crime that is not reported to law enforcement does not impose costs on the criminal justice system, but it can still have victimization costs. The SPAC cost of crime model uses the National Crime Victimization Survey to estimate the number of actual victimizations per reported crime. This accounts for crimes that are not reported and for crimes that can have multiple victims.

Victimization costs by type of crime are estimated based on national economic research. They are divided into tangible and intangible costs. Tangible victimization costs include the value of stolen or damaged property, medical expenses and lost earnings due to injury or other consequences. Intangible costs are the pain, suffering or death resulting from being a crime victim. Intangible cost estimates are not meant to place a literal dollar value on the cost of a specific life or of individual suffering, but are statistical values based on actual jury awards and settlements in wrongful death suits.

Not all crimes have identifiable victims. The model does not include victimization costs for misdemeanors (a very broad category of crimes) or for “crimes against society” such as drug crimes. Table 4 below displays tangible and intangible victimization cost estimates by type of crime.

Table 4: Victimization Costs (2017 dollars)

<table>
<thead>
<tr>
<th></th>
<th>Murder</th>
<th>Felony Sex Crimes</th>
<th>Robbery</th>
<th>Agg. Assault or Battery</th>
<th>Felony Property</th>
<th>Felony Drug and Other</th>
<th>Misdemeanors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tangible</td>
<td>$639,090</td>
<td>$5,342</td>
<td>$6,699</td>
<td>$13,536</td>
<td>$2,282</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Intangible</td>
<td>$7,315,354</td>
<td>$190,604</td>
<td>$1,010</td>
<td>$20,904</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Total</td>
<td>$7,954,444</td>
<td>$195,946</td>
<td>$7,709</td>
<td>$34,440</td>
<td>$2,282</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

Source: (Illinois Sentencing Policy Advisory Council 2018), Table C, with figures adjusted to 2017 dollars using the BEA’s implicit price deflator for personal consumption expenditures.
The Benefits of Increased High School Graduation

As previously stated, the benefit-cost model links a reduction in juvenile crime among program participants to a higher high school graduation rate for participants, as compared to the baseline high school graduation rate in Illinois. These benefits accrue to program participants, taxpayers, and society at large.

Benefits to Program Participants

Increased educational attainment affects program participants in several ways. First, youth who graduate from high school are expected to have higher earnings over the course of their adult lives. Second, high school graduates have different healthcare costs and different distributions of who is paying for their healthcare compared to non-graduates. High school graduates tend to be healthier overall, while relying less on taxpayer-funded healthcare resources. High school graduates are also more likely to have insurance or pay out of pocket for medical expenses. For this reason, an increase in the probability of high school graduation for program participants results in a cost to participants from increased healthcare spending, which is subtracted from the benefits participants gain from higher earnings.

Benefits to Taxpayers

The increased earnings for program participants due to increased high school graduation also results in a benefit to taxpayers, through taxation of those earnings. Taxpayers also benefit from participants’ decreased reliance on public healthcare systems.

Benefits to Society

Increased high school graduation for program participants results in benefits to society in two ways. First, there is a general economic benefit from having a more educated workforce with higher labor productivity. Second, there are societal benefits through the employer-paid health insurance market due to better health outcomes for high school graduates.

Indirect Benefits – Deadweight Cost of Taxation

When the government imposes taxes to pay for programs, those dollars are removed from the private sector economy. This can create inefficiencies, such that government spending “costs” more than the total dollars spent. This concept is known as the deadweight cost of taxation. There is a high level of debate around the appropriate value of deadweight cost. To account for this and other types of variability, BFR uses a Monte Carlo simulation to vary the value of deadweight cost and other inputs in calculating expected benefits and costs (see below). In the case of deadweight cost, the simulation samples a deadweight cost value from a triangular probability density distribution, using low, modal and high values of 0%, 50% and 100%, respectively. On average, if one taxpayer dollar is spent, there will be an additional deadweight cost of $0.50.
The deadweight cost of taxation is applied both to the program costs and to the benefits of reduced government spending as a result of the program. The deadweight cost of running the program is subtracted from the avoided deadweight cost produced by the program benefits, and the net amount is added to the total program benefits. Deadweight cost is not calculated for increased tax dollars obtained through increased earnings outcomes.

**Net Present Value**

When comparing the benefits and costs of a program, it is important to consider that the program costs usually occur immediately or over a few years, while the program benefits can extend many years into the future. The BCA model calculates program benefits up to 50 years after program participation. Because society generally values a dollar today more than a dollar in the future, the BCA model includes a discount rate that is applied to costs and benefits that occur in future years. The modal discount rate used is 3.5%. In the Monte Carlo simulation, discount rates are drawn from a triangular distribution between 2%, 3.5%, and 5%. The social discount rate can vary in different circumstances, and there is some debate about the correct rate. This range of values is consistent with rates used by federal government agencies and scholarly experts.

**Optimal Return on Investment**

The benefit-cost analyses compare program benefits to program costs in order to calculate what BFR has coined the program’s Optimal Return on Investment (OROI). This is the ratio of program benefits to program costs, and represents the dollar value of benefits that can be expected for each dollar spent on the program. An OROI of greater than $1.00 indicates that the program’s expected benefits exceed its costs. The inclusion of the word “optimal” in the OROI is meant to emphasize that while the BCA incorporates Illinois-specific data as much as possible, the program’s effect size is based on national research and implementation with fidelity. Therefore, the OROI represents the return on investment Illinois can expect if the program is implemented according to best practices as established by the research. BFR conducts a qualitative program assessment, the SPART, to accompany each program’s BCA. The SPART is intended to provide insight into how a program has been designed and implemented in Illinois, and to make recommendations for further evaluation and improvement.

**Risk Assessment – Monte Carlo Simulation**

As stated above, the BCA model has many inputs which are estimated with varying degrees of uncertainty. To quantify the uncertainty of the BCA inputs and program effect size used in calculating the OROI, BFR runs a Monte Carlo simulation for each program. The BCA is run 10,000 times with inputs randomly sampled from probability distributions around their expected value. Table 5 below describes which inputs BFR varies in the Monte Carlo simulation, and the distributions from which they are sampled.
Table 5: Input variation in Monte Carlo

<table>
<thead>
<tr>
<th>Model Input</th>
<th>Sampling Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program effect size</td>
<td>Normal; based on random-effects standard error produced by meta-analysis</td>
</tr>
<tr>
<td>Program costs</td>
<td>Triangular; variance is determined at the program level based on BFR and agency assessment of the degree of uncertainty of program marginal cost estimate</td>
</tr>
<tr>
<td>Crime victimization costs</td>
<td>Triangular; variance +/- 0.1</td>
</tr>
<tr>
<td>Criminal justice system costs</td>
<td>Triangular; variance +/- 0.1</td>
</tr>
<tr>
<td>Criminal victimizations per conviction</td>
<td>Triangular; variance +/- 0.2</td>
</tr>
<tr>
<td>Deadweight cost of taxation</td>
<td>Triangular; low = 0%, modal = 50%, high = 100%</td>
</tr>
<tr>
<td>Discount rate</td>
<td>Triangular; low = 2%, modal = 3.5%, high = 5%</td>
</tr>
</tbody>
</table>


In addition to expected program costs, benefits and OROI, BFR also reports the percent likelihood that program benefits will exceed costs based on the Monte Carlo simulation.

This technical appendix was produced by BFR for assessments in the Adult Crime and Juvenile Justice policy domains. Additional technical documents will be released along with the corresponding policy domain assessments. For further information, visit www.budget.illinois.gov.

References

