Budgeting for Results
10th Annual Commission Report

November 1, 2020
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A Letter from the BFR Co-Chairs

November 1, 2020

To Governor Pritzker and Members of the General Assembly:

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

As the Commission looks back over a decade of work, we are extremely pleased with Illinois’ advancements made in performance management and measurement. The start of our work saw a state government without a process to adequately identify the outcomes Illinois taxpayers were funding. During the course of the past decade, BFR has worked hard to develop a comprehensive list of all the programs operated by state agencies, established a standard methodology to measure the performance of those programs, created a central database to collect that data, and make it accessible to decision makers and the public. Prior to BFR, this framework did not exist. Now, through the direction of the BFR Commission and the execution by the BFR Unit at the Governor’s Office of Management and Budget, these items have been implemented. We have a catalog of over 400 programs across 70 state agencies, universities, boards and commissions. To capture data generated from these programs, we developed the Illinois Performance Reporting System (IPRS). BFR uses a comprehensive program assessment process providing benefit-cost and performance reports to decision makers and the public. Finally, we have an interactive performance dashboard at our website, www.budget.illinois.gov providing Illinoisans with up-to-date performance information at the click of a button.

As proud as we are of our past accomplishments, we are even more excited about the future. We look forward to further development of our geospatial mapping capabilities to better enable executive and legislative stakeholders to discern where the greatest levels of need are in our state, and to compare that with where we currently deploy our resources. Geospatial analysis has the potential to help the state better align resources to need. This and continued work on our program assessment process opens the path to a future of resources used more wisely leading to improved outcomes for all Illinoisans.

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 the public to join us as we forge a path to another ten-years of improvement by joining 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

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Senior Researcher, University of Illinois at Chicago

**Co-Chair: Honorable Heather Steans**
State Senator

**Honorable Pamela Althoff**
Retired 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 BFR unit is working with the Results First technical team through the end of 2020 to transfer administration of the benefit-cost model to Illinois.
  - 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 that 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 2019, compiling a program inventory and completing program evaluation reports in the Substance Use Disorder policy domain. Full program assessment reports are available via the GOMB website at Budget.Illinois.gov.
- One program within the Illinois Department of Human Services – Division of Substance Use, Prevention and Recovery was selected for analysis utilizing the Results First benefit-cost model and SPART:
  - Licensed Recovery Homes
- Quantitative program analysis predicts that the optimal return on investment from the program will be greater than the program cost, if the program is implemented with fidelity to evidence-based best practices. The analysis also quantifies an anticipated reduction in future state costs correlated with the completion of each program, based on the program being implemented with fidelity to best practices.
- From a qualitative perspective, program analysis supports the determination that the Department of Human Services – Division of Substance Use, Prevention and Recovery program is rated as effective as implemented in the State of Illinois as compared to national best practices.
- BFR continues work on a third policy domain, Substance Use Disorder (SUD), organizing and building a framework for the multi-agency task of creating a SUD program inventory. Over the next year BFR will continue to compile a comprehensive SUD program inventory and complete additional 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 continues to promote the use of evidence-based program reports in the budget process.

• To date, the Commission has identified, and the General Assembly has passed, legislation to modify or repeal 257 statutory mandates. Due to the COVID-19 Emergency, the legislation that contained 23 mandates and 13 cleanup items for funds within the State Treasury identified for repeal or modification in 2019 did not advance through the General Assembly spring 2020 session. The BFR Commission has reauthorized the previously approved 2019 mandate and fund cleanup items for the 2020 Annual Report. A list of mandates and fund cleanup items is provided as Appendix C.

• This report also includes updates on three recommendations from the 2019 BFR Annual Report. In addition, four new recommendations have been identified by the BFR Commission to be addressed during calendar year 2021. The recommendations include customizing the current benefit-cost model to include programs outside of the existing policy domains, continued work on IDOT Capital programs, producing assessments of programs outside of the Human Services policy domain and producing a report on the utilization of BFR principles and products by state agencies and the General Assembly.
Introduction

This past year has been unique in the history of BFR on two fronts. The global COVID-19 Emergency posed unprecedented challenges. Second, the pace of utilization of technology to visualize BFR Data quickened and the State’s program assessment process was further refined. Much like every area of the public and private arenas, the COVID-19 Emergency has wrought significant changes in how the BFR Commission and BFR Unit Staff conduct business. The Commission, like all public bodies has shifted to conducting meetings and public hearings virtually, and the BFR Unit staff have had to shift to working remotely. Although the restrictions around COVID-19 have posed a challenge, they have not significantly impacted the Commission and BFR Unit’s ability to carry out its core missions. The Commission would like to thank the staff of the BFR Unit of the Governor’s Office of Management and Budget (GOMB) for their hard work facilitating the Commission’s adjustment to the “new normal” and continuing to do outstanding work under what can only be described as extremely unique circumstances. Another aspect of this year has been the rapid integration of technology to better visualize BFR performance and budget data and present it to the public. The improvement of the Interactive Budget Dashboard and the addition of an Interactive Performance Dashboard to the Governor’s Office of Management and Budget public website at www.Budget.Illinois.gov has revolutionized the way GOMB can provide budget and performance information to decision makers and the public. This report highlights 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” (15 ILCS 20/50-25). 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 ten years can be found in Appendix A of this report.
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>Economic Development</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>Public Safety</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>Human Services</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>Healthcare</td>
<td>Improve Overall Health of Illinoisans</td>
<td>Lower healthcare costs by improving the health of Illinoisians.</td>
</tr>
<tr>
<td>Environment and Culture</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>Government Services</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>
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.

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 an established benefit-cost model utilized by numerous states and jurisdictions. The benefit-cost model helps the BFR Unit 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.

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.
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. Data from IPRS is available to the public via an Interactive Performance Dashboard which is found under the BFR dropdown menu 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. Thus far, 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. Results First works with dozens of states and local governments to implement this innovative evidence-based assessment system 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 to eleven policy domains: adult crime, juvenile justice, child welfare, K-12 education, higher education, health, adult mental health, child mental health, substance use disorders, general prevention, and workforce development.

In August of 2020, Results First began to transition away from maintenance, updates and technical support for the benefit-cost model. The BFR unit is working with the Results First technical team to transfer administration of the benefit-cost model to Illinois. Results First built a local, non-cloud-based version of their model that allows the BFR unit to continue to calculate benefit-cost optimal return on investment. Transferring the benefit-cost model to Illinois will lead to increased

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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).
opportunities for state specific model customizations, but also adds new challenges and a larger workload to the BRF Unit.

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

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 sum to a numerical program score that can range from one to one hundred. 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. Maximum 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 summed, 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></th>
<th>Non Performing Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Effective</strong></td>
<td>75-100</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>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>
<tr>
<td>Ineffective</td>
<td>0-24</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>
<tr>
<td>Results Not Demonstrated</td>
<td>N/A</td>
<td></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.

2020 BFR Reports

BFR continued to build upon the work completed in 2019. 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 2019 Annual Report, BFR has completed one program assessment and continued to build up the Illinois Substance Use Disorder policy domain program inventory. The program completed in this domain is the Licensed Recovery Home program. This program is run by the Illinois Department of Human Services – Division of Substance Use, Prevention and Recovery (SUPR). For each program, a description of the program costs, services and assessment is available on the GOMB website.

Substance Use Disorder policy domain

The Licensed Recovery Home program is for the treatment and recovery of people addressing substance use disorders, many of whom increasingly have co-occurring issues such as homelessness and mental health needs. Recovery Homes licensed by IDHS/SUPR are alcohol and drug-free housing with support services. People who use Recovery Homes need a higher level of monitoring and assistance because they are recently out of treatment and early in their recovery. Licensed Recovery Homes have an operator and manager who ensure a sober environment, provide treatment options, and supply referrals. The manager and operator do not live on site, one operator may work with many homes, whereas each home has their own manager. Throughout September and October of 2020, 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 ranging from one to one hundred 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>Licensed Recovery Home</td>
<td>$20.95</td>
<td>83/100 - Effective</td>
</tr>
</tbody>
</table>

Mental Health policy domain

During the summer of 2020, BFR began working on the fourth policy domain, Mental Health. In July 2020, BFR met with the Illinois Department of Human Services - Division of Mental Health to begin organizing a framework to create a Mental Health program inventory. Representatives from the agency and relevant trade associations testified at the 2020 BFR public hearing to discuss progress and challenges regarding mental health within the State of Illinois and nationally. There are intersecting clients, programs and funding sources within the Illinois Mental Health policy domain. Over the next few years BFR will compile a comprehensive Mental Health program inventory and begin completing program assessment reports.

Mandatory Program Evaluations for Programs Receiving 49 or Less in SPART

In its 2018 Annual report, the Commission explored the feasibility of requiring programs with a SPART score of 49 or less (out of 100) to undergo a comprehensive program evaluation. Of the ten BFR program assessments completed since 2018, two received “marginal” (25-49) SPART scores. The Commission determined that if a program receives a score of 49 or less, then it is reasonable to conduct additional evaluation and the State Fiscal Year 2020 budget included an appropriation for this purpose. The BFR Unit entered into an Intergovernmental Agreement with the Illinois Criminal Justice Information Authority (ICJIA) to act as an external program evaluator to conduct an evaluation of Illinois’ electronic monitoring program, operated by the Department of Corrections in conjunction with the Prisoner Review Board. ICJIA conducted a thorough evaluation which confirmed many of the conclusions of the BFR Unit’s program assessment. The full report can be found in Appendix C of this report. The Commission would like to take this opportunity to thank ICJIA for their cooperation and the outstanding evaluation they produced.

⁴ Optimal Return on Investment (OROI) reflects program best practices. Net program costs are equal to the program cost minus comparison cost.
Grant Accountability and Transparency Act (GATA)

Illinois state government officials have a duty to ensure taxpayer dollars are spent wisely and with transparency. The Grant Accountability and Transparency Act (GATA; 30 ILCS 708) and Budgeting for Results (BFR) are intended to provide that accountability. Illinois relies extensively on grants to deliver services and operate programs throughout the state. State agencies receive federal, federal pass-through and state funds for internal operations and to outsource program and service delivery. Illinois receives approximately $26.5 billion of federal financial assistance annually and roughly $15.8 billion is distributed annually through grant agreements with state grant-making agencies. Illinois spends about 66% of its entire budget through grants.

In fiscal year 2021, there were 51 state agencies with grant-making appropriations. Eight agencies administer nearly 73% of all grant funds. The fiscal year 2021 enacted budget includes 776 grant lines ranging from $123,500 to $12.3 billion. Performance management is a federally required element of grant administration and GATA frameworks provide statewide rules, templates and systems for grant performance oversight.

Illinois’ budgeting process also emphasizes performance and results. Through BFR, an inventory of more than 400 state programs and over 1,200 program performance measures have been established. Outcome driven budgeting places program funding in areas where data shows it will most likely result in the desired outcome. BFR provides data on how funding for a particular program has succeeded in carrying out the mission of critical government services.

Illinois is the only state in the nation to enact into law the requirements of lifecycle grant management and a statewide budgeting methodology where each priority must be justified annually according to merit rather than the amount appropriated in the preceding year. GATA and BFR add foundational elements of public funds transparency. Both of these statewide initiatives drive performance and outcomes and seek to maximize the use of public funds. BFR and GATA enhance public funds transparency by communicating how funds are used and articulating the outcomes achieved through the expended public funds.

Stakeholder Engagement: Public Hearings

Due to the COVID-19 emergency, statutory requirements for a Chicago and a Springfield public hearing were combined into one virtual hearing. The public hearing was hosted on the WebEx platform Wednesday, July 29th, 2020. The hearing was attended by interested stakeholders statewide including private and not-for-profit representatives, state agency Chief Results Officers (CROs) and program personnel.

One purpose of the hearing was to gather information regarding the state’s evidence based mental health programming and how to measure outcomes in this domain space. The BFR Commission welcomed a panel representing leadership from the Department of Human Services,
Division of Mental Health and mental health providers from a variety of statewide environments. Representing DHS panelists, Brad Hughes, Deputy Director of Clinical Inpatient Services provided insight on mental health services and programs offered by the State of Illinois while providers discussed details of their evidence-based work and how they measure performance and outcomes in the programs they offer.

Upon completion of the presentations, the Commission engaged in a Q&A session with the panelists. The hearing concluded with conversation opened for public comment and questions.

A recording of the public hearing is available at: https://multimedia.illinois.gov/gomb/bfr-072920.html.
A transcript of the hearing is available at: https://www2.illinois.gov/sites/budget/Documents/Budgeting%20for%20Results/BFR_Public_Hearing_Transcript.rtf.

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 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 2022 gets underway, CROs will play an important role in conveying vital performance information to GOMB analysts.

5 Public hearing panelists: From the Department of Human Services - Division of Mental Health, David Albert, Director; Lee Reinhert, Deputy Director of Policy, Planning, and Innovation; Brock Dunlap, Deputy Director of Business Policy and Fiscal Operation. Mental Health providers Debbie Pavick, LCSW, Chief Clinical Officer, Thresholds and Expert on Assertive Community Treatment; Stacy L. Brown LCPC, LMHC, Vice President of Behavior Health Services at Bridgeway Inc., Expert on Coordinated Specialty Care (FIRST.II); Tammy Stewart, MSEd, LCPC, Associate Director, Adult Services for Sinnissippi Centers, Expert on Wellness Recovery Action Planning; Adrienne Brown, Program Director, Individual Placement and Support at Thresholds, Expert on Individual Placement and Support; Matt Buckman, Executive Director of the Stress & Trauma Treatment Center, Expert in Childhood Trauma.
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 [annual] 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. To date, the Commission has recommended and the General Assembly has passed legislation to modify or repeal a total of 257 statutory mandates.

Due to the continuing COVID-19 emergency, the BFR Unit did not solicit suggestions from state agencies for unduly burdensome statutory mandates as candidates for repeal or modification during the spring 2021 legislative session.

As a result of the COVID-19 emergency, only priority legislation was acted upon during the spring 2020 legislative session. The bills that the Commission introduced to incorporate the mandate reduction scenarios from the 2019 Annual Report were not voted upon. BFR will work with the legislative members of the Commission to attempt to advance these bills during November’s veto session. If progress is not made during this upcoming session, the bills will be reintroduced again in the spring 2021 session. In this scenario, the Commission will use the recommended mandates from the 2019 Annual report as 2021 spring legislation recommendations. To that end, the Mandates working group of this Commission reauthorized a list of 23 statutory mandates and 13 funds of the state treasury for repeal or modification. A full list of the approved mandates and fund modifications is included as Appendix C of this report.

Loan Program Working Group

The BFR staff received guidance from the Commission regarding how the SPART should apply to loan programs. The SPART qualitative assessment is oriented towards service-based programs. Some criteria of the assessment are not relevant to loan programs as administered by the State of Illinois. The working group continues to consider what outcomes should be measured for loan programs. Should BFR only consider a repayment rate, similar to the way a bank would evaluate a loan? Or should BFR take a more holistic approach and identify additional outcomes resulting from the activities that occur as a by-product of the state funded loan?

The loan program working group recommended that BFR perform additional research to assess the loan program and the services provided. The BFR Unit will assess the loan program expenditures and identify how program outcomes correlated to the loans can be identified and measured.
Progress Update on 2019 Commission Recommendations

Continued Investment in BFR

The Governor’s Office of Management and Budget, through the work of Commission Members Representative Will Davis and Senator Heather Steans, obtained an appropriation for BFR for State Fiscal Year 2021 totaling $350,000. Fiscal Year 2020 was the first year for a dedicated appropriation to BFR in its 10-year existence. With two years of investment in BFR, GOMB was able to increase the BFR Unit from three to four staff members with an emphasis on an information technology skill set. The COVID-19 Emergency has impeded GOMB’s ability to recruit a fourth staff member but GOMB plans to aggressively recruit and onboard an additional member as soon as possible. In addition to staff, the BFR Unit has been able to invest in technology, to enhance geo-spatial and data analysis and visualization efforts.

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

The BFR staff has proven that the use of geo-spatial analysis of BFR data is feasible with existing technology, resources, and available knowledge. Additional use cases will continue to be explored.

Rebuild Illinois Capital Budget

The enacted Capital Budget of the State of Illinois totaled $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.

The Commission recommended that the GOMB BFR staff work with the Department of Transportation (IDOT) to document the current process utilized by IDOT to allocate capital dollars to horizontal capital projects. The Commission requested a report on best practices in other states for potential incorporation into future capital planning where appropriate.

The BFR Unit completed a horizontal capital report and engaged IDOT representatives who presented at the BFR Commission meeting on August 28, 2020. IDOT provided an update on their agency’s Multi-Year Program (MYP) development and equity considerations for expenditures on horizontal capital. The main focus of IDOT’s MYP is on the maintenance and longevity of existing roads and bridges. Other considerations for future projects include safety, resiliency, congestion, asset condition, economic development, project timing, the environment and local priorities.
The IDOT representatives related these considerations to the performance goals for the agency’s Long-Range Transportation Plan (LRTP), which include the economy, livability, mobility, resiliency and stewardship. Equity considerations were also discussed regarding how IDOT prioritizes new projects, including economic growth for disadvantaged communities and environmental justice.

IDOT stressed that they have just completed their Transportation Asset Management Plan (TAMP) and Multi-Year Program, and that performance and outcome based priorities are major factors going forward for the Rebuild Illinois capital plan.

The Budgeting for Results Illinois Horizontal Capital Report can be found in Appendix E of this report.

2020 Commission Recommendations

**Customize Benefit-Cost Model**

As Pew/Results First continues its transition out of providing support to states implementing its benefit-cost model, the BFR Unit should begin creating customized benefit-cost calculations using evaluation algorithms for programs operated in Illinois that were not covered by Pew/Results First product.

**Expand Evaluation Portfolio Beyond the Human Services Policy Domain**

The BFR Unit should develop Comprehensive Program Assessments (including benefit-cost and SPART assessments) for programming outside of the Human Services oriented policy domains upon completion of scheduled mental health SPARTs.

**Continued Work on the IDOT Capital Programs**

Building on this year’s inquiries, the BFR Unit should continue exploring ways to incorporate IDOT capital programs into the BFR library of evaluations conducted by state agencies and external evaluators.

**Create Report for BFR Products/Principles Utilization**

The BFR unit should deliver a report to the Commission identifying ways in which the Governor’s Office of Management and Budget, other state agencies, and the legislature utilize BFR products and principles. It is the Commission’s intent that the learnings from this report inform ways to better engage legislators and other stakeholders on performance-based budgeting.

**Conclusion**

The Commission is proud of Illinois’ progress in the development and production of comprehensive program assessments. The members look forward to engaging in dialog around
the results pursuant to program assessments in the area of Substance Use Disorder and the future assessments of programs outside of the Human Services Policy Domain.

The Commission also looks to legislative colleagues and the Governor to continue to support the work of BFR at current levels of funding so that these value-added deliverables may continue under this statewide initiative.

The Commission looks forward to working with legislators, state agencies, community-based organizations and stakeholders at large to advance 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: 2020 Commission Mandate Repeal or Modification Recommendations

Appendix D: Report on IDOC from ICJIA

Appendix E: Budgeting for Results Illinois Horizontal Capital Budget Report

Appendix F: 2020 Comprehensive Program Assessment Reports
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-January 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.

- **December 2019**
BFR completed and published the Illinois Performance Dashboard v1.0.

- **May 2020**
  BFR hired a Data Analyst.

- **August 2020**
  BFR completed its initial review of Illinois horizontal capital investments run by the Department of Transportation.

- **September - October 2020**
  BFR completed the three-stage assessment of the Licensed Recovery Home program run by the Department of Human Services – Division of Substance Use, Prevention and Recovery.
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).
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

2020 Commission Mandate Repeal or Modification Recommendations
The Illinois WIC program is 100% federally funded. WIC staff are required to report to USDA.

### Summary

**Mandate Background/History**

The mandate requires the Department of State Police provide forensic biology and DNA section activities together as “Biology” to provide a more accurate statistical accounting of the work being performed in the former Forensic Biology, DNA, and CODIS sections. Statistics from all other types of cases and in other laboratory categories, including the Biology section, as well as all other sections in the laboratories, are still being performed on the same evidence in cases, by the same forensic scientists. Statistics had been reported separately by ISP based on past practice and former computer system limitations that the practice posed significant management and reporting challenges, and frequently resulted in dual-counting some work. The current computer reflects the old approach and requires separate reporting. With the implementation of the new Laboratory Information Management System (LIMS) in December 2018, not only has ISP's internal tracking and management capabilities been improved to support the combining of forensic biology and DNA activities, but ISP is also better equipped to monitor all work performed on a case (i.e., "assignment") instead of just as cases in a section. An update of this mandate is needed for accurate statistical accounting of the work being performed in the Forensic Biology, DNA, and CODIS sections.

### Department of Commerce and Economic Opportunity

The Illinois WIC program is 100% federally funded. WIC staff is required to report to USDA.

### Illinois Office of Student Assistance

The Illinois Office of Student Assistance requires the Department to annually include in the existing Community Development Assistance set-aside program.

### Illinois State Police

The Illinois State Police was one of the sponsors. This mandate was enacted in 2015 as part of an omnibus police reform bill. Rep. Davis was one of the sponsors. ISP believes that it would be more accurate to update the mandate to combine the Biology section, as well as all other sections in the laboratories.

As of December 2018, ISP has the new Laboratory Information Management System (LIMS) that allows them to combine Forensic Biology and DNA activities done on the same case. ISP believes that they should be able to accurately update the mandate to combine the Forensic Biology and DNA activities done on the same case. ISP is also better equipped to monitor all work performed on a case (i.e., "assignment") instead of just as cases in a section. An update of this mandate is needed for accurate statistical accounting of the work being performed in the Forensic Biology, DNA, and CODIS sections, as well as other sections in the laboratories.

### Illinois Board of Higher Education (IBHE)

The mandate requires the Department to annually include in the existing Community Development Assistance set-aside program.

### Illinois Department of Administration

The St. Louis Board of Higher Education (BHE). Each college and university surveys is located in the annual report to BHE. WBEF samples and publish. The WBEF report is published to the BHE website along with being sent to the required members and the Governor.

The mandate was enacted in Public Act 101-084 of 2019.

### Illinois Department of Agriculture

The Illinois WIC program is 100% federally funded. WIC staff is required to report to USDA.

The mandate was enacted in Public Act 101-084 of 2019.
The provision became effective in August 2018. The Department recommends repeal because this program has been replaced by multiple jobs skills training, job placement and client management programs that currently exist. DCEO did not indicate any negative impact on the agency from having this still on the books.

The Commission has completed its work and no longer meets, so DCEO would like the Act repealed. Sen. Pamela Althoff was among the original sponsors. DCEO did not indicate any negative impact on the agency from having this still on the books.

The mandates in this section include requirements for the Illinois Building Commission to determine which State building requirements apply to any given project. The Department recommends repeal because this mandate is not consistent with the department’s mission. DCEO is not equipped to handle these responsibilities itself.

This program has been replaced by multiple jobs skills training, job placement and client management programs that currently exist.

This mandate is part of larger sections of statute starting with 20 ILCS 605/605-825 requiring DCEO to establish a Labor-Management-Community Cooperation Committee. DCEO did not indicate any negative impact on the agency from having this still on the books.

This mandate was repealed in 2011 (not 2018); some of the sponsors are still sitting. DCEO currently being provided.

This mandate originated in 1992 with the establishment of the Earnfare program. It was designed to provide job skills training and access to social services for Earnfare program participants, such as "feeding the fund". These funds originated from the federal Department of labor under WPA programs that no longer exist.

This mandate is part of a larger section of statute starting with 20 ILCS 605/605-850 requiring DCEO to establish a Labor-Management-Community Cooperation Committee with no default grants to local employer-labor coalitions and labor-management-employee community committees, and establish the Office of Black and Family Issues to administer the program. DCEO did not indicate any negative impact on the agency from having this still on the books.

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After reviewing the recommendations from the Illinois Building Commission and establishing a clearance of all State building requirements and responsibilities concerning the requirements, made the record available to the public, and assist the public in determining which building requirements apply to any given project.

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The mandate requires the Department to establish an Office of Black and Family Issues to administer grant programs and to provide labor-management-community cooperation and employment-related family issues.

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This mandate is outdated and should be repealed. Further, this mandate is no longer central to the Department’s mission or core mission and programs. DCEO does not currently have the funding, staff, or mission to provide this service. DCEO believes this mandate is outdated (it’s been on the books since early 70s) and that funding is made available. DCEO does not currently have the funding, staff, or mission to provide this service. DCEO would like the mandate repealed.

This mandate is not consistent with the mission of the Department—to promote economic and business development and economic opportunity throughout the State. This mandate is outdated and should be repealed. Further, this mandate is no longer central to the Department’s mission or core mission and programs. DCEO does not currently have the funding, staff, or mission to provide this service. DCEO believes this mandate is outdated (it’s been on the books since early 70s) and that funding is made available. DCEO does not currently have the funding, staff, or mission to provide this service.

This mandate probably dates back to the Blighted Areas Redevelopment Act of 1947. It is a legacy mandate that is not consistent with the mission of the Department. This mandate results in Audit Finding No. 2018-004 which will cause the Department to spend additional funds on an audit, resulting in the aggregate of Boards, Commission, Councils, Committees and Commissions not fully staffed. The Department did not appoint a representative to the Illinois Housing Authority. This mandate probably dates back to the Blighted Areas Redevelopment Act of 1947. It is a legacy mandate that is not consistent with the mission of the Department. This mandate results in Audit Finding No. 2018-004 which will cause the Department to spend additional funds on an audit, resulting in the aggregate of Boards, Commission, Councils, Committees and Commissions not fully staffed. The Department did not appoint a representative to the Illinois Housing Authority.

This mandate has no connection to the mission of the Department and is not central to the mission of the Department. Preparing annual and quarterly Audit Finding No. 2018-008. This mandate established the process by which moneys are provided to state agencies. This mandate resulted in Audit Finding No. 2018-005 which did not result in a full audit of the program. The mandate is unduly burdensome for the Department to serve on Boards, Commission, Councils, Committees and Commissions unrelated to it’s core mission and programs. This mandate results in Audit Finding No. 2018-004 which will cause the Department to spend additional funds on an audit, resulting in the aggregate of Boards, Commission, Councils, Committees and Commissions not fully staffed. The Department did not appoint a representative to the Illinois Housing Authority.

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This mandate is unduly burdensome in that it requires GOMB IT staff to code and place the Governor’s Office of Economic Opportunity (GOMB) to meet the timeline prescribed in statute. Changing the report due date from the first day after the end of the quarter to the 45th day after the end of the quarter makes the timeline more consistent with other reporting requirements. GOMB produces the report as required by statute, but does not meet the timeline. GOMB is unable to produce the report because it relies on data from agencies that have capital projects, it is impossible to produce the report with that data. 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 Accountability Law, enacted as a part of the 2009 Capital Program. The Law was enacted by Public Act 096-0034 (HB0255 of Sen. John J. Cullerton - Don Harmon). Senate Sponsors: Sen. Michael Noland - Hatcher - Rita Mayfield - Kay Hatcher - La Mano, Fred and Betty.

The statement was authored under SB 278 of Sen. John J. Cullerton - Don Harmon. Mr. Huberman, Ms. Brown.

The mandate requires GOMB to do an online survey to allow residents to prioritize proposed projects. The current deadline is the first day after the end of a quarter. Due to the need to collect data from agencies that have capital projects, it is impossible to produce the report with that data. The mandate creates a burden on the agency with regard to the current deadline in statute.

The department has received an audit finding that we did not fulfill the mandate that requires us to continue to do a quarterly report until all funds are repaid. Therefore, statute was passed that removed the requirement to repay these funds. The interfund borrowing was authorized under PA 98-682 in 2014. The mandate relief being sought is in reference to the Capital Spending Accountability Law, enacted as a part of the 2009 Capital Program. The Law was enacted by Public Act 096-0034 (HB0255 of Sen. John J. Cullerton - Don Harmon). Senate Sponsors: Sen. Michael Noland - Hatcher - Rita Mayfield - Kay Hatcher - La Mano, Fred and Betty.

The statement was authored under SB 278 of Sen. John J. Cullerton - Don Harmon. Mr. Huberman, Ms. Brown.

The mandate relief being sought is in reference to the Capital Spending Accountability Law, enacted as a part of the 2009 Capital Program. The Law was enacted by Public Act 096-0034 (HB0255 of Sen. John J. Cullerton - Don Harmon). Senate Sponsors: Sen. Michael Noland - Hatcher - Rita Mayfield - Kay Hatcher - La Mano, Fred and Betty.

The statement was authored under SB 278 of Sen. John J. Cullerton - Don Harmon. Mr. Huberman, Ms. Brown.
<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>Move Forward in BFR mandate process</th>
<th>Follow-up activities</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>None</td>
<td>Staff time to complete the mandate results in staff not being available to work on other critical projects.</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>Follow up with DHS can the USDA report be formatted in a helpful way and reported to the SDO instead of the current quarterly report?</td>
<td>Approved for DCEO bill</td>
</tr>
<tr>
<td>The statute is duplication.</td>
<td>None</td>
<td>See Word document</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>After conversation with Adam Aldridge and DHS, mandate SOP (SOP) is now complete and not needed for quarterly reporting, OK to move forward.</td>
<td>Approved for DCEO bill</td>
</tr>
<tr>
<td>The mandate only relates to 14-15.</td>
<td>None</td>
<td>Moved forward in BFR mandate process</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>Approved for DCEO bill</td>
<td>Approved for DCEO bill</td>
<td></td>
</tr>
<tr>
<td>Program is no longer active.</td>
<td>None</td>
<td>ISP has emailed statutory language.</td>
<td>approved for DCEO bill</td>
<td>Megan Buskirk</td>
<td>Megan <a href="mailto:Buskirk@illinois.gov">Buskirk@illinois.gov</a></td>
<td>217-785-6474</td>
<td>Move forward in BFR mandate process</td>
<td>Approved for DCEO bill</td>
<td></td>
</tr>
<tr>
<td>Generate non-duplication analysis</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Generate non-duplication analysis</td>
<td>None</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repeal</td>
<td>Old program that has been replaced</td>
<td>None Known</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>Approved for DCEO bill</td>
<td></td>
<td></td>
</tr>
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<td>------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repeal</td>
<td>Office never existed, and duplication functions with WIOA</td>
<td>None Known</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>Approved for DCEO bill</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repeal</td>
<td>Additional aspects of homelessness or workforce programs</td>
<td>None Known</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>Approved for DCEO bill</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Repeal</td>
<td>Responsibilities have been transferred</td>
<td>None Known</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>Approved for DCEO bill</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CDE decision: "We have a document which is Illinois Construction-Related Statutes and Rules on our website. [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) We also are required to keep a list of all reported code adoptions by municipalities and counties throughout the state. Key Boosinger is listed as a resource on our webpage as a help answer questions and direct people to the correct information regarding building construction. He covers what CDE has also been tasked to do (build award, say it's a duplication of services and they do not need to provide this service also.)"
<table>
<thead>
<tr>
<th>Repeal. No funding or staff. SEC or Civic Federation can provide assistance.</th>
<th>Megan Buskirk</th>
<th>External Accountability Manager</th>
<th><a href="mailto:Megan.Buskirk@illinois.gov">Megan.Buskirk@illinois.gov</a></th>
<th>217-785-6474</th>
<th>DCEO to run omnibus bill with help from BFR staff.</th>
<th>Approved for DCEO bill</th>
</tr>
</thead>
<tbody>
<tr>
<td>H</td>
<td>I</td>
<td>J</td>
<td>K</td>
<td>L</td>
<td>M</td>
<td>N</td>
</tr>
<tr>
<td>Repeal. DCEO duties implicitly subject to appropriation and there are no state funds available for such grants.</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>DCEO to run omnibus bill with help from BFR staff.</td>
<td>Approved for DCEO bill</td>
</tr>
<tr>
<td>DCEO requests mandate be repealed due to lack of funding and because mandate is out of date.</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>217-785-6475</td>
<td>DCEO to run omnibus bill with help from BFR staff.</td>
<td>Approved for DCEO bill</td>
</tr>
<tr>
<td>DCEO requests mandate be permissive to give the Department the flexibility to create the program in the future.</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>217-785-6476</td>
<td>Warrants further discussion due to recency of mandate</td>
<td>Approved for DCEO bill, CONDITIONAL on favorable conversation with Speaker Harris before legislation is drafted.</td>
</tr>
<tr>
<td>DCEO requests mandate be permissive to give the Department the flexibility to create the program in the future.</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>217-785-6477</td>
<td>Warrants further discussion due to recency of mandate</td>
<td>Approved for DCEO bill, CONDITIONAL on favorable conversation with Speaker Harris before legislation is drafted.</td>
</tr>
<tr>
<td>No.</td>
<td>Column A</td>
<td>Column B</td>
<td>Column C</td>
<td>Column D</td>
<td>Column E</td>
<td></td>
</tr>
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<td></td>
</tr>
<tr>
<td>1</td>
<td>None Known</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>217-785-6479</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>None Known</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>217-785-6494</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>None Known</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>217-785-6491</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>None</td>
<td>Curt Clemons-Mosby</td>
<td>Budgeting for Results</td>
<td><a href="mailto:curt.clemonsmosby@illinois.gov">curt.clemonsmosby@illinois.gov</a></td>
<td>217-782-0838</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>None</td>
<td>Curt Clemons-Mosby</td>
<td>Budgeting for Results</td>
<td><a href="mailto:curt.clemonsmosby@illinois.gov">curt.clemonsmosby@illinois.gov</a></td>
<td>217-782-0838</td>
<td></td>
</tr>
</tbody>
</table>

**DCEO requests mandate be repealed as Committee was replaced by the Workforce Innovation Board.**

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

**Repeal this section as this the survey utilizes time and resources, without public participation to warrant the expenditure.**

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

**Modify section language to 45 days after the end of the quarter.**
### Proposed Fund Cleanup/Amendatory Items for Spring 2020 BFR Legislation

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

<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 “Illinois” 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 “Checkoff”, which is inconsistent with the name listed in the State Finance Act, the Illinois Lottery Law, by IOC, and in annual appropriations. 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 “Purpose” 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.</td>
<td>P.A. 98-324</td>
<td>Raoul; Andersson</td>
<td>active fund</td>
<td>$6,777.4</td>
</tr>
<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 “Services”, 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.</td>
<td>P.A. 82-783</td>
<td>Catania; Andersson</td>
<td>active fund</td>
<td>$822.4</td>
</tr>
<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. 96-667</td>
<td>Mendoza; Steans</td>
<td>active fund</td>
<td>$857.5</td>
</tr>
</tbody>
</table>

### Funds That Have Run Their Course

| fca-6       | 20 ILCS 665/4b; 30 ILCS 105/8k rep.; 235 ILCS 5/1-3.37 rep. | 0530 | Grape and Wine Resources Fund | 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. | P.A. 90-77 | Luechtefeld | #/N/A |
| fca-7       | 20 ILCS 1305/10-6 rep.; 30 ILCS 105/5.748 rep.; 35 ILCS 5/507TT rep. | 0777 | Crisis Nursery Fund | The fund last received revenue in FY2011 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund. | P.A. 96-627 | Frerichs | $0.0 |
| fca-8       | 20 ILCS 2310/2310-358 rep.; 30 ILCS 105/5.599 rep.; 35 ILCS 5/507AA rep. | 0061 | Lou Gehrig's Disease (ALS) Research Fund | The fund last received revenue in FY2008 and has been closed out by IOC. These changes will repeal unused statutory authority for the fund. | P.A. 93-36 | Schoenberg | $0.0 |
### Proposed Fund Cleanup/Amendatory Items for Spring 2020 BFR Legislation

Items are numbered 'fca-xx' in sequence for reference.

<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-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>
<td></td>
</tr>
<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>
<td></td>
</tr>
<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>
AN EXPLORATORY STUDY OF THE DISCRETIONARY USE OF ELECTRONIC MONITORING FOR INDIVIDUALS UPON RELEASE TO MANDATORY SUPERVISED RELEASE (MSR) IN ILLINOIS

Lily Gleicher, Ph.D., Research Analyst
H. Douglas Otto, M.A., Research Analyst
Emilee Green, M.S., Research Analyst
William Watkins, Ph.D., Research Analyst

Center for Justice Research and Evaluation
Illinois Criminal Justice Information Authority

June 2020

The authors would like to recognize the contributions of Justin Escamilla, Cristin Evans, Ernst Melchoir, and Jessica Reichert from the Illinois Criminal Justice Information Authority; Nate Ingliss-Steinfeld, Mark Powers, Kathy Saltmarsh, John Specker at the Illinois Sentencing Policy Advisory Council; Eric Harris, Jason Garnett, Rob Jeffreys, and Sharon Shipinski of the Illinois Department of Corrections; Tracy Buckley-Jones and Jason Sweat of the Prisoner Review Board; and Patrice James of the Shriver Center on Poverty and Law.

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List of Abbreviations

CRA: Crime Reduction Act of 2009
EBP: Evidence-based program or practice
EM: Electronic Monitoring
ED: Electronic Detention
DFC: Direct from court
GPS: Global Positioning System device for monitoring
IDJJ: Illinois Department of Juvenile Justice
IDOC: Illinois Department of Corrections
MSR: Mandatory Supervised Release
PEI: Principles of Effective Correctional Intervention
PRB: Prisoner Review Board
PSM: Propensity Score Matching
RA: Risk assessment
RNA: Risk and needs assessment
RF: Radio frequency device for monitoring
SFY: State fiscal year
SUD: Substance Use Disorder
TCU Score: Texas Christian University score for drug use and treatment information
TV: Technical violation
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Glossary of Terms

This glossary provides definitions of technical terms used in this report.

**Electronic Monitoring**: Per 730 ILCS 5/5-8A-2 under the Electronic Monitoring and Home Detention Law, electronic monitoring is “the monitoring of an inmate, person, or offender with an electronic device both within and outside of their home under the terms and conditions established by the supervising authority.”

**Evidence-based (Best Practice, Effective, or “What Works”)**: Programs and practices that consist of multiple, strong, reliable, rigorous, replicable, and generalizable research providing indication of causal evidence that the program or practice achieves its goals. Evidence on efficacy of these programs and practices includes findings of both process and outcome evaluations, particularly those that incorporate experimental or strong quasi-experimental designs and reveal robust evidence of fidelity to program or practice components in which alternative explanations are eliminated for the causal relationship (crimesolutions.gov; Puddy & Wilkins, 2011; Ratcliffe, 2019).

**Evidence-informed (Promising Practice)**: Programs or practices that have some evidence that exists through reliable, somewhat rigorous, replicable, and somewhat generalizable research indicating the programs achieve their intended goals. Evidence to support the efficacy of these programs and practices includes both process and outcome evaluations and fidelity to program or practice components, though may use more quasi-experimental designs, some with rigor and others less so. These programs and practices require more rigorous evaluation to determine whether they are truly effective and that their efficacy is generalizable (crimesolutions.gov; Puddy & Wilkins, 2011; Ratcliffe, 2019).

**Home Detention**: Per 730 ILCS 5/5-8A-2 under the Electronic Monitoring and Home Detention Law, home detention is, “the confinement of a person convicted or charged with an offense to his or her place of residence under the terms and conditions established by the supervising authority.”

**Needs (Dynamic Risk Factors or Criminogenic Needs)**: Identify factors most highly associated with risk for recidivism (future law enforcement contact) to target for change. The seven dynamic risk factors most highly associated with reoffending behavior include antisocial personality pattern (i.e., impulsivity, poor problem solving, irritable), pro-criminal attitudes, pro-criminal associates/peers, substance use/misuse/disorder, family/marital concerns, low levels of or low satisfaction regarding education/vocation/employment, and lack of involvement in prosocial recreation or leisure activities. These factors are dynamic in that they are amenable to change through programming and services; therefore, programs and services should target these specific areas (some programs and services may target multiple at once). While legal history is a risk factor, it is static in nature and is not amenable to change (Bonta & Andrews, 2017).

**Responsivity**: There are two types—general and specific. Overall, responsivity means matching and delivering programs and services in the style and mode of justice-involved individuals’ learning (Bonta & Andrews, 2017).
**General Responsivity:** This refers to the types and modalities of programs and services that, generally, work best for most people, particularly as it relates to behavior change regarding criminogenic need areas. Per Bonta and Andrews (2017), “offenders are human beings, and the most powerful influence strategies available are cognitive-behavioral and cognitive social learning strategies” (p.182). These modalities of treatment are often more effective than other modes of treatment, which include the use of modeling, role-playing, reinforcement, effective use of disapproval, cognitive restructuring, recognizing risky situations and practicing alternative, lower risk behaviors for those situations (Bonta & Andrews, 2017).

**Specific Responsivity (Non-criminogenic needs):** There are several specific responsivity factors, or responsivity needs, to consider for system-involved individuals and their ability to succeed on supervision, within the programs and services provided, and in life. Matching the mode and style of learning, more specifically, to different individuals’ characteristics, such as, “interpersonal sensitivity, anxiety, verbal intelligence, and cognitive maturity speak to the different modes and styles of treatment service” (Bonta & Andrews, 2017, p. 182). Additional specific responsivity factors to consider when linking individuals to treatment and services include an individual’s motivation, mental health (stability), appropriate settings for treatment and services, language barriers, transportation issues, child care needs, trauma, physical health, self-esteem, culture, gender, and psychological (i.e., personality, emotions, cognitive ability) considerations (Bonta & Andrews, 2017).

**Risk:** Provides that potential for recidivism can be assessed and that this assessment of risk to recidivate informs levels and intensity of services and treatment needed by the individual. Predominately, the risk is the “who” – who is at higher potential to recidivate (future law enforcement contact) and who should be receiving more intensive services. The focus for community-based supervision is to target the highest risk individuals who will need more intensive and/or extensive services for recidivism reduction. In addition, lower-risk and higher-risk individuals should not interact with each other as this can increase risk for those at lower risk to recidivate (Bonta & Andrews, 2017).

**Risk Assessment:** These assessments have a heavy reliance on static or historical factors (not amenable to change) with information predominately extracted from casefiles (i.e., legal history/information). Risk assessments capture measures such as prior criminal history, age at first offense, current age, among others. These types of assessments may only identify risk for recidivism, or depending on the tool, failure to appear in court or risk for institutional misconduct in a correctional facility (Bonta & Andrews, 2017; Taxman & Dezember, 2018; Burrell, 2018; Harbinson, 2018).

**Actuarial Risk and Needs Assessment:** An actuarial assessment that provides a science-based approach to coordinate decision-making, minimize discretionary biases, and improve resource allocation based on an individual’s risk level and need areas (Taxman & Dezember, 2018). Actuarial assessments are tools empirically derived using statistical analyses that result in probabilities for risk, in this case, for recidivism (Burrell, 2018; Bonta & Andrews, 2017). At
each stage of the criminal or juvenile justice process (or decision-points), different assessments exist, either RAs or RNAs; one assessment will not cover all decision-points based on the purpose of that tool.
Executive Summary

Introduction

There is limited research on the efficacy of electronic monitoring (EM), with mixed results, specifically for individuals released from a correctional facility. Upon request from the Governor’s Office of Management and Budget (GOMB), we conducted a study to explore the discretionary use of EM for individuals released from a prison facility to mandatory supervised release (MSR) with the condition of EM that is not statutorily required upon release. Many previous studies conducted to date are poorly designed and lack methodological rigor. Moreover, few studies examined parole populations, making it difficult to compare outcomes with other community corrections populations, such as pretrial and probation.

The current study sought to fill the need for current and methodologically sound research on the use of EM and provide recommendations on the use of EM for individuals leaving Illinois Department of Corrections (IDOC) facilities to MSR. The Prisoner Review Board (PRB) imposes conditions of supervision for these individuals, and parole agents employed by the IDOC supervise them.¹

This study used a cohort of individuals who served a term of incarceration and released in FY16. The cohort does not include individuals who were released pursuant to a return for a technical violation or who were resentenced to IDOC after violating probation. Further, individuals included in this study were not statutorily mandated to an EM device pursuant to their admitting offense.²

This study used a mixed-methods approach to answer the following research questions regarding the discretionary use of EM upon release to MSR:

1. What policies do IDOC and PRB staff have in place regarding the use of EM?
2. What are the perspectives of IDOC staff and parole agents on conditions of MSR and EM?
3. What are the demographic characteristics of those ordered to EM versus those not ordered to EM, and what are the characteristics of EM?
4. To what extent are there differences in the programming and characteristics of prison sentences for people ordered to EM compared to those not ordered to EM?
5. To what extent are there differences in recidivism patterns among those ordered to EM versus those not ordered to EM?
6. Which entity is best situated to make decisions regarding EM?

To answer these questions, researchers examined PRB orders on individual conditions for release, EM hook-up data from IDOC, arrest data on individuals released from an IDOC facility

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¹ Staff do not typically distinguish between persons on parole and persons on MSR as the policies are not separate (S. Shipinski, personal communication, June 26, 2020).
² One individual in the study was statutorily mandated to a GPS device based on case law from 2009; however, EM did not recommend, nor PRB order, GPS or an RF device upon release to MSR.


in SFY2016, IDOC exit and admission files, PRB orders, and surveys of IDOC correctional counselors/field service representatives and parole agents.

Key Findings

Policies, Directives, and Statutes

We analyzed polices, directives, and state statutes related to EM for individuals on mandatory supervised release. The PRB is the overall authority regarding any placement or removal (including early removal) related to EM and decides conditions for any person released from IDOC to mandatory supervised release (MSR) 730 ILCS 5/3-3-1(a), see also 730 ILCS 5/5-8-1, 730 ILCS 5/3-1-2(l)). The board is composed of 15 persons appointed by the governor with backgrounds and experience relevant to the criminal justice system [730 ILCS 5/3-3-1(b)]. Illinois Department of Corrections correctional counselors and/or field service representatives provide recommendations to the PRB as to conditions of MSR for each individual set to be released. In addition, IDOC parole agents must maintain records as the PRB or IDOC require and the information entered into the master file for the individual releasee [730 ILCS 5/3-14-2(f)]. The PRB may only impose EM as a condition of MSR when statutorily required or explicitly ordered by the PRB (730 ILCS 3-3-7), and any approval for adding or removing EM for an individual on MSR must go through IDOC’s administrative channels, with the ultimate decision-making authority given to the PRB. For this report, the study sample included only individuals discretionarily placed on EM using radio frequency as a condition of MSR.

Surveys of IDOC Institutional and Parole Division Staff

Survey responses from 58 IDOC correctional counselors and field service representatives indicated that most view their duties in relation to providing recommendations to PRB as providing necessary information to the PRB, making recommendations where statutorily required. Many indicated they only recommend EM as a condition for MSR when statutorily required. Many indicated they only recommend EM as a condition for MSR when statutorily required.

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3 The PRB has been working to create an integrative system within O360 for PRB order information and EM compliance updates, IDOC’s database for individuals under their supervision in an IDOC facility and out in the community. This is also being worked on, on IDOC’s end as well. It would be of value for the PRB and IDOC to collaborate on these reporting measures, particularly for EM compliance reporting (per July 15, 2019 memo to IDOC Acting Director Rob Jeffreys and Chief of Parole Jason Garnett). The integration and access for both IDOC and PRB could reduce issues in accessing necessary information to make evidence-informed decisions regarding individuals being released to MSR.

4 Per IDOC, as of February 2020, forms related to condition recommendations were updated since this current release cohort, in addition to written instruction to IDOC correctional counselors and field service representatives regarding not recommending EM unless it is statutorily required. Written instruction included how to complete the form (S. Shipinski, personal communication, June 26, 2020).

5 PRB forms regarding conditions of release, which is currently going through a review process to clarify definitions and EM/movement language (T. Buckley-Jones and J. Sweat, personal communication, June 26, 2020 and June 29, 2020). Though there is a piloted risk tool, this is not yet validated on the IDOC population and therefore is not reliable identify risk. The piloted tool does not incorporate criminogenic needs to target nor is it an already reliable and validated tool more generally (standardization and validation to the Illinois population would still be necessary for any tool). However, the state is moving towards incorporating the Ohio Risk Assessment System (ORAS) throughout IDOC, as courts and probation have already implemented and begun rolling out the ORAS and the Ohio Youth Assessment System (OYAS) this way. Dynamic risk factors, also referred to as criminogenic needs, are those needs that have been empirically associated with the highest risk for future law enforcement contact (or recidivism).
required. Respondents indicated that factors related to an individuals’ current charge were most important when making condition recommendations to the PRB, as well as when specifically recommending EM as a condition. Additionally, respondents tended to view EM favorably, as a worthwhile correctional practice.

Most respondents indicated they do not use a risk and needs assessment (RNA) tool when making recommendations to PRB and in determining whether to recommend EM, specifically. While the Illinois statute does not require the (discretionary or statutory) use of an RNA for EM or GPS consideration, research indicates the importance of RNA use in determining appropriate populations for EM use, conditions of release, supervision, and appropriate triaging of caseloads for more intensive supervision and services based on level of risk and services to match criminogenic needs (Finn & Muirhead-Steves, 2002; Gies et al., 2013). Further, Gies and colleagues (2013) highly recommend incorporating, minimally, a risk assessment, particularly for identifying risk for violent reoffending when considering the use of EM as a condition of supervision. Currently, IDOC does not use a validated RNA to provide evidence-based decision-making and ability to identify appropriate supervision levels for those exiting IDOC, as indicated in the Crime Reduction Act (CRA) of 2009. This is further supported by Illinois statute 730 ILCS 5/3-3-7(a)(21), which indicates any individual released from IDOC is to “be evaluated by the Department of Corrections prior to release using a validated risk assessment and be subject to a corresponding level of supervision.”

Survey responses from 73 IDOC parole agents were related to the research questions of the study; however, some responses were useful for understanding parole agent descriptive information. Many respondents described their duties as providing supervision, ensuring compliance, and assisting individuals in their reintegration process back into society. Additionally, about half of the respondents viewed EM as a deterrent and “a tool to ensure compliance.”

**Criminal Justice History and Outcomes**

Of the full sample (N=1,065) of individuals released from IDOC to MSR in SFY16, 458 (43.0%) were placed on EM by the PRB. Regardless of whether an individual was placed on to EM, the majority had prior arrests for at least one felony (n = 1,029, 96.6%) and at least one misdemeanor offense (n = 850, 79.8%), and at least one prior felony conviction (n=973, 91.4%). The majority had no prior convictions for misdemeanor offenses (n=631, 59.2%) and no prior sentences to probation (n=559, 52.5%).

Over half of the full sample was rearrested after release from IDOC (n=691, 65.0%), a higher proportion of which were not placed on EM by PRB (n=395, 57.2%). Of those in the sample who had at least one rearrest, they were most frequently rearrested within 6 months of release to MSR and more than half of rearrests occurred within one year of release to MSR. Further, the PRB ordered a greater proportion of individuals of color to EM compared to individuals who self-identified as White.

We applied a quasi-experimental research design to create a treatment group of individuals placed on EM (discretionarily) and a comparison group of those not placed on EM (who had not
We used Propensity score matching (PSM) to approximate a random comparison group based on relevant potential confounding variables against which to compare outcomes for those ordered to EM. After matching, the sample included 280 individuals in the treatment group and 280 in the comparison group for a total of 560. Chi-square tests for differences between the two groups revealed significant differences in terms of new IDOC admissions for person offenses and technical violations after release to MSR depending on whether the release included the condition of EM. A higher proportion of those ordered to EM upon release to MSR by the PRB were admitted to IDOC for a person offense and for a technical violation; however, these associations were weak, at best. Further, it is unknown whether technical violations were related to violations of EM.

**Discussion and Recommendations**

The findings indicated, including our review of prior audits of IDOC and the PRB, a lack of clear EM policies, processes, and procedures by both IDOC and the PRB, hampering effective use of EM and the ability to evaluate its effectiveness. The shared responsibility for the technological tool without clear delineation of the respective duties of each also impeded this evaluation. The CRA requires the use of a validated risk assessment by IDOC and the consideration of those assessments by the PRB when setting conditions. To date, a validated, reliable RNA tool has not been fully implemented, limiting the ability of either organization to comply. The proper use of a validated, reliable RNA to provide evidence-based decision-making in addition to identifying appropriate supervision levels and needs for those exiting IDOC can improve individual outcomes; however, more detailed outcome evaluations will be necessary to make that determination, including an evaluation of MSR supervision practices, policies, processes, and services and treatment provided. Further, a lack of transparency in policies, processes, and procedures related to decision-making within the PRB hampered the evaluation and evaluators’ ability to understand, more in-depth, the ways in which the PRB makes decisions regarding EM specifically and conditions of supervision more generally. This is also the case for parole agents in their decision-making regarding when to request EM placement or removal for a client on their caseload.

The following recommendations are based on the study findings and additional communications and documentation provided by IDOC and the PRB.

**Recommendation #1:** Implement an actuarial RNA to support IDOC supervision recommendations, PRB condition decisions, and IDOC MSR case plans and services as indicated in the CRA. Further, reduce reliance on offense severity and offense type for condition decision-making and supervision levels in both IDOC recommendations and PRB conditions, as offense severity does not equate to level of risk for recidivism in the community (Bonta & Andrews, 2017; Andrews et al., 1990; Stahler et al., 2013).

Following this recommendation will put IDOC and the PRB into compliance with the CRA, providing for more evidence-based and research-informed decision-making, in addition to evidence-based supervision upon release into the community. This can ultimately lead to a greater reduction in recidivism and more efficient and effective allocation of limited resources. Further, it is vital that IDOC and the PRB share necessary data and information to make
evidence-informed decisions regarding an individual’s release, progress on supervision, and to keep track of necessary information regarding those released into the community.

Recommendation #2: Allow the PRB to place individuals onto EM based on statutory requirements, providing the IDOC Parole Division limited, discretionary use of EM to assist non-compliant releasees; limit PRB discretionary EM use to cases where substantive reasons justify its use, and that use is uniformly applied and documented. The IDOC Parole Division should also consider whether and how EM can be used to enhance rehabilitative goals, including whether EM may be impeding an individual’s compliance and ability to successfully complete conditions of supervision.

Currently, the PRB is the entity that is statutorily mandated to make decisions regarding EM for conditions of release, including requests from parole agents to put an individual on MSR on EM while in the community and requests by parole agents for early removal of an EM device. However, as indicated in Recommendation #1, these decisions are limited in their evidence-base, due, in part, to the lack of an RNA at the various decision points to identify appropriate supervision levels and linkages to services for highest criminogenic needs/dynamic risk factors. Further, discretionary PRB use of EM may hamper parole agents’ ability to use EM as a sanction for supervision non-compliance.7 Though, currently, EM has almost identical rules and expectations as electronic home detention which restricts movement to the interior of an individual’s home and property boundaries, and is used for individuals released prior to their MSR date (730 ILCS 5/5-8A-2).

Currently, the policy for EM allows 12-hours of allowable movement, limiting its use to merely a curfew tool, which is not generally the reason for which EM is recommended. Allowable movement refers to the period in which individuals on MSR can move about in their communities before they are to be at their home.

Recommendation #3: Develop more transparent policies and processes related to IDOC correctional counselor and field service representative recommendations, limiting recommendations to those that are supported by actuarial and clinical assessments. Similarly, develop more transparent policies and processes related to PRB condition setting, limiting conditions to those that are related to actuarial assessments or, minimally, professional structured judgment tools. At minimum, conditions should require a reason or purpose, preferably grounded in evidence/research, as indicated in the CRA.

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6 Though there is a piloted risk tool, this is not yet validated on the IDOC population and therefore is not reliable to identify risk. The piloted tool does not incorporate criminogenic needs to target nor is it an already reliable and validated tool more generally (standardization and validation to the Illinois population would still be necessary for any tool). However, the state is moving towards incorporating the Ohio Risk Assessment System (ORAS) throughout IDOC, as courts and probation have already implemented and begun rolling out the ORAS and the Ohio Youth Assessment System (OYAS) this way. Dynamic risk factors, also referred to as criminogenic needs, are those needs that have been empirically associated with the highest risk for future law enforcement contact (or recidivism).

7 Currently, the rules and expectations of electronic monitoring is almost identical to the rules and expectations of those on electronic home detention (those who are still considered inmates and are part of IDOC, but released prior to their MSR date), including confinement to the interior premises of their homes and property boundaries (730 ILCS 5/5-8A-2).8 The PRB has approved a new order form designed to offer more transparency regarding decision-making (T. Buckley-Jones and J. Sweat, personal communication, June 26, 2020 and June 29, 2020). See Appendix D.
There were a variety of differences in recommendations IDOC practitioners made to assist the PRB in its decision-making, few of which were clinical or evidence-based in nature. These differences were indicators of a process that lacks a validated, reliable RNA to help make recommendations and the limited clinical or actuarial assessment information provided by IDOC in those recommendations to the PRB – regardless of whether they are provided in the master file made available to the PRB. If IDOC recommendations, per the survey responses, are to help the PRB make informed decisions, then more information based on actuarial RNAs, evidence-based practices, and decision-making should be incorporated and decisionmakers should place less emphasis on criminal and/or juvenile history, the instant offense (offense the individual was incarcerated on), and offense severity. Further, the PRB could provide more transparent decision-making (e.g. how they make decisions on conditions of release), particularly in relation to conditions that restrict individuals in the community upon release and an attempt to reintegrate into the community without the additional restriction.\(^8\)

**Recommendation #4:** Create an electronic database for PRB orders to better understand PRB decision-making, processes, and orders to use data to better understand how PRB is making decisions and whether these are effective in reducing recidivism and restoring system-involved individuals back into their communities. This includes development of performance indicators to illustrate how EM—among other conditions—are being used, including supervision outcomes and potential unintended impacts on those outcomes and individuals. This further includes the incorporation of interviews and information from those directly impacted, negatively or positively, by the use of EM.

Currently, PRB orders are in PDF scanned forms. To better understand how EM, among other conditions, are used for those released from IDOC to MSR, the PRB must create an electronic database in which this information and data can be pulled for analysis or work with IDOC to incorporate this information into their current data system. Further, if it is a separate database, it is important that this database interfaces, or can be linked to, IDOC administrative data. This lends itself, then, to being able to identify and provide performance measures related to individuals’ reentry into the community. Per both IDOC and the PRB, work is being done to integrate this data piece, for both entities, including data necessary for statutory requirements of reporting. Collaboration and the ability to view necessary information should be made available to both entities to support evidence-informed decision-making regarding conditions of release. Further, continuous evaluation, or continuous quality improvement/quality assurance processes on how EM is ordered by the PRB is needed and future evaluations should include not just whether EM was ordered, but how parole agents use EM in the field. The application by parole agents is also largely of import to the efficacy and utility of EM.

**Study Limitations**

Several limitations exist in relation to the current study. First, the generalizability of the findings is limited as only data on individuals who were sentenced to IDOC directly from court were used. Those admitted to IDOC for technical violations or recommitments were excluded. This

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\(^8\) The PRB has approved a new order form designed to offer more transparency regarding decision-making (T. Buckley-Jones and J. Sweat, personal communication, June 26, 2020 and June 29, 2020). See Appendix D.
resulted in a sample comprised almost solely of individuals who, largely, were admitted to IDOC for the first time (99.7%). In the absence of a PRB order database, we hand-entered and coded PRB orders into datasets from PDF files, which increased the potential for human error. In addition, the surveys had low response rates and substantial attrition, particularly as it relates to the research-relevant questions. Lastly, due to the PRB’s Chief Counsel legal concerns regarding the scope of inquiry that can be uncovered related to the cognitive or mental processes related to condition and release decisions (Morales v. Findley, 2017), we were unable to anonymously survey PRB members. Per the PRB Chief Counsel, and the Board Chair’s motion for protective order, PRB members “may not be compelled to testify regarding ‘the mental processes’ related to their decisions” (p. 1). Like judges, PRB members have absolute immunity regarding their decisions related to individuals’ PRB proceedings. Based on the PRB’s interpretation of the Morales v. Findley case, anonymous surveying and interviewing of PRB members on their decision-making was not possible. This limited the study to publicly available documents, PRB orders, the PRB website, and Illinois statutes related to EM, MSR, and PRB responsibilities.

Conclusion

While the PRB has full decision-making authority on discretionary application of EM, little is known about how and why their decisions are made. There is also limited information regarding the parole agent requests for placement and/or removal of EM for clients on their caseloads, which was outside the scope of the current study but should be considered for future research. Findings for the current study indicate a higher proportion of individuals placed on EM were recommitted to IDOC compared to those who were not placed on EM; there were no differences between these two groups on rearrests based on the PSM analyses. Further, based on the population of IDOC releasees, a higher proportion of individuals of color were placed on EM upon release to MSR compared to their White counterparts. Electronic monitoring continues to be used by the PRB in a discretionary manner, with recommendations coming from IDOC correctional counselors and field service representatives.

9 Morales v. Findley (2017) resulted in a settlement agreement in which the defendants (PRB Chairman Findley and former IDOC director Baldwin) did not admit to the allegations against them nor admit liability for any purposes. However, the settlement resulted in policies and practices put into place regarding how PRB hearings, in particular, revocation hearings, can be conducted and what information the individual on parole or MSR (in addition the ability to have representation) must receive from the PRB as evidence of a violation of their parole or MSR. The settlement agreement can be found here.

10 IDOC indicates, per written instruction during training (though this training information is was not provided), that EM is not to be recommended to the PRB if it is not statutorily required as of February 2020 (S. Shipinski, personal communication, June 26, 2020, and June 29, 2020). The extent to which the recommendation is still made is unknown.
Section 1: Introduction

Parole is generally defined as a term of post-supervision in the community after leaving a correctional institution, though parole administration, authority, and supervision differs from state to state (Abadinsky, 2018). Parole was originally created as a method to control the prison population and that origin has generally remained its focus (Abadinsky, 2018). The origin, purpose, and role of parole stemmed from the idea of a graduated release system in Australia’s Norfolk Island and the Irish system in the mid- to late-1800s, based on an incarcerated individual’s behavior, in addition to changes stemming from rehabilitation (Klingele, 2013). Initially, the parole system was constructed for indeterminate sentences that would not exceed a set maximum term, with the release date set by correctional managers who formed a board to determine “reformation” or “rehabilitation” of that individual for release into the community (Abadinsky, 2018).

When Illinois switched from an indeterminant to determinate sentencing scheme in 1978, parole as a release decision was eliminated and replaced with MSR, a period of community supervision following incarceration. The Illinois sentencing structure requires a person to be sentenced to a specified term of years in IDOC followed by an MSR term that based on the holding offense. Individuals may be released from IDOC early through the award of sentence credits for good behavior, completing rehabilitative programming, or by qualifying for credit awarded at the discretion of the director (730 ILCS 5/3-6-3). For systems that use determinate sentencing, the release function for early release such as “good time” or other special release provisions could be used to reduce overcrowding in prisons (Abadinsky, 2018).

Individuals on MSR are supervised by parole agents from the IDOC Parole Division (730 ILCS 5/3-3-2). Illinois is comprised of five parole districts the cover the entire state. Ultimately, parole—though seen as a rehabilitative or reformative practice—has not been used as such in the United States. Most frequently, parole is more aligned with a “risk management” and deterrence mentality and is most often used as such, despite the rehabilitation and reformation rhetoric (Abadinsky, 2018). As the focus of criminal legal system reforms shift to rehabilitation and an emphasis on community supervision, there is renewed interest in using post-release supervision to support returning citizens, rather than punish them for non-compliance.

In Illinois, individuals on MSR can be placed on electronic monitoring (EM), which is sometimes mandated by law and sometimes discretionary in nature. The current study focuses only on individuals released to MSR that are discretionarily placed on an EM device with radio frequency, not a global positioning device. Currently, EM is used for individuals for curfew monitoring and restriction in the community, with the purpose of surveillance, control, and deterrence of the individual under supervision from engaging in pro-criminal behaviors (Kilgore, 2013); the focus is less upon on how and whether EM can be a supplement to enhancing positive behavior change among individuals in the community (Pattavina et al., 2010). Little is known about the use and efficacy of EM for individuals released to MSR in Illinois.

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11 Illinois’s system change from indeterminate to determinate sentencing took effect on February 1, 1978. There are very few “C” numbers, or those who are serving under indeterminate sentencing, still left in the Illinois Department of Corrections.
12 Illinois’s system change from indeterminate to determinate sentencing took effect on February 1, 1978. There are very few “C” numbers, or those who are serving under indeterminate sentencing, still left in the Illinois Department of Corrections.
13 Electronic monitoring is described in Section 2 of this report. As noted previously, there are still some individuals incarcerated at the Illinois Department of Corrections that were sentenced under indeterminate sentencing. The Illinois PRB does make release decisions for these individuals.
The current study seeks to explore how EM is used for individuals released to MSR from an Illinois state correctional facility. Therefore, this study sought to answer questions about Illinois’ discretionary use of EM and provide recommendations on EM usage for individuals leaving IDOC to MSR. The PRB is the entity that determines conditions for individuals released from IDOC to MSR as Illinois currently operates on a determinate sentencing scheme; therefore, the PRB makes few release decisions, predominately making condition-related decisions for those released to MSR. Goals of the current study were:

1. To gain understanding how, why, and the extent to which EM is used for offenders upon discharge to mandatory supervised release (MSR) or parole.
2. To better understand the impact of EM on the Illinois parole/MSR population on recidivism (rearrest, revocation, and reincarceration).
3. To gain insight into the process of IDOC and PRB roles related to offender discharge and decisions regarding EM and EM amendment orders.
4. To provide data-driven information and recommendations on how EM could be best used, and which entity may be best situated to provide that oversight.

The present exploratory and descriptive study used a mixed-methods approach to analyze the discretionary use of EM and the process of how conditions of supervision are created and provided to individuals being released from an IDOC facility to MSR. Research questions for the present study include:

1. What policies do IDOC (institutional side and parole side) and the PRB have in place regarding the application and use of EM for individuals placed on MSR?
2. What are the perspectives of IDOC institutional line staff who provide recommendations to the PRB (i.e., correctional counselors and field service representatives) as well as IDOC parole agents regarding conditions of MSR and EM?
3. What are the demographic characteristics of individuals ordered to EM upon discharge from IDOC and those not ordered to EM upon discharge from IDOC? What are the general characteristics of EM (e.g. length of EM, number of EM orders/amendments, etc.)?
4. To what extent are there differences between individuals ordered to EM upon discharge from IDOC compared to those who do not receive EM upon discharge regarding individual programming, characteristics of prison stay—write-ups, services completed/not completed, length of stay, offense type, facility?
5. To what extent are there differences in recidivism (MSR revocation, rearrest, and reincarceration) between individuals placed on EM upon discharge from IDOC compared to those who are not?
6. Which entity is best situated to make decisions regarding EM?

14 As noted previously, there are still some individuals incarcerated at the Illinois Department of Corrections that were sentenced under indeterminate sentencing. The Illinois PRB does make release decisions for these individuals.
Section 2: Literature Review

Electronic Monitoring

Initially developed to serve rehabilitative goals through supportive messages and warnings for what would be considered higher areas of crime ("hot spots"), it has more historically been used as a method of surveillance intended to deter individuals from certain behaviors (Corbett & Pattavina, 2015). Electronic monitoring is defined as, “the use of surveillance technology, usually by means of a wrist or ankle bracelet to monitor” the movements of an individual under supervision, around the clock, to ensure that they are within individually specified locations at specified times, per their conditions of supervision (Abadinsky, 2018, p. 385).

Some EM devices are considered global positioning system (GPS) devices which track individuals’ movements via satellite, providing more specific information on an individual’s location (Abadinsky, 2018). In addition, GPS monitoring devices can be active or passive; the monitoring occurs in live time or the data on location is stored for downloading at later time (Electronic Frontier Foundation, n.d.). Other EM devices use radio frequency (RF), which can detect if an individual is within a certain range of a set location (usually their home/living arrangement, place of employment/education, or other approved locations) to ensure the individual is where they are supposed to be. The supervising officer and the individual under supervision can create a schedule and alerts are sent to the supervising officer if the individual veers off schedule, or allowable movements. Generally, RF device information is sent back to a central monitoring center (Electronic Frontier Foundation, n.d.). Both GPS and RF devices are used in Illinois; however, for the purposes of the current study, we only analyzed EM via RF devices, as GPS devices are predominately used for those statutorily required to be placed on EM upon release to MSR. Both types of EM devices can be used pre-trial, after conviction for individuals serving a community supervision sentence, and after conviction and/or release from a jail or prison facility (Electronic Frontier Foundation, n.d.). Electronic monitoring device costs vary by technology providers and contracts.

Research on EM

Overall, findings are mixed as to the effectiveness of EM. Many studies conducted to date are poorly designed and lack methodological rigor. Moreover, many of the studies included a wide array of correctional populations, including pre-trial, probation, and parole, making it difficult to determine whether the outcomes achieved can be generalized. Some studies indicate positive outcomes for some system-involved individuals placed on EM. Other studies found no effects or negative consequences from the use of EM. Negative consequences include an increase in technical violations resulting in more commitments to secure detention or correctional facilities, as well as difficulty meeting conditions of supervision due to the limitations of individuals’ movement.

Research finding positive outcomes. Research found reduction in recidivism and increased compliance with conditions of supervision for certain system-involved sub-populations (e.g., high-risk individuals who were convicted of sex offenses, individuals identified as high-risk for recidivism—based on validated risk and/or risk/needs assessments). A study conducted by Gies et al. (2012) found that individuals on parole who were previously convicted for sex offenses and determined to be at high-risk for recidivating were 12% less likely to be rearrested when assigned to a GPS device for monitoring compared to similarly situated individuals on traditional parole supervision without a GPS device. Gies et al. (2013) found similarly positive findings related to the use of GPS monitoring of individuals on parole identified as high-risk gang members; those monitored were 26% less likely to be rearrested overall and
32% less likely to be rearrested for a violent offense compared to similar individuals on parole not assigned to GPS monitoring.

These positive findings are not limited to just individuals assigned to GPS monitoring, although there is some evidence that GPS monitoring may produce better outcomes than EM via RF, reducing supervision failure rates (e.g., non-compliance with conditions, completing supervision, recidivism) by about 6% (Bales et al., 2010). A Florida study found that individuals assessed as moderate to high-risk under community supervision\(^{15}\) on EM had a risk for supervision failure that was 31% lower than similar populations that were not on EM. The authors used propensity score matching between the two populations and failure was defined as revocation (violation of their supervision) for any reason. Slight differences in revocations were noted by the type of system-involved population, but all had significant reductions (Bales et al., 2010). Some studies that found positive outcomes as it relates to recidivism also found higher rates of technical violations\(^{16}\) among those on EM versus non-monitored groups (e.g., see Gies, 2013). This indicates additional scrutiny as the result of EM could increase use of incarceration for non-offending behaviors.

One study found different effects of EM depending on type of system-involved individuals and offenses (Finn & Muirhead-Steves, 2002). While individuals with substance misuse or substance use disorders on EM were more likely to return to prison, individuals convicted of a sex offense placed on EM had a decreased likelihood of recommitment to prison and longer periods until recommitment. It is possible that EM in conjunction with intensive treatment interventions may enhance compliance for individuals convicted of a sex offense, though the study was unable to gather data on treatment compliance (Bonta, et al., 2000a; Finn & Muirhead-Steves, 2002).

In terms of recidivism, Padgett et al. (2006) found EM was more effective in reducing the likelihood of failure for technical violations, revocations for a new offense, and absconding for those on home confinement (i.e., escaping community supervision) when compared to those placed on home confinement without EM. More recently, a 2017 study of federal pretrial defendants found reduced likelihood of new arrest but no difference in failure to appear compared to defendants with similar risk characteristics (Wolff et al., 2017).

**Research finding no, or negative, effects.** A study of the efficacy of EM for monitoring violent males on parole in Georgia by Finn and Muirhead-Steves (2002) compared 128 individuals on parole mandated to EM compared to a random sample of 158 not mandated to EM. The authors found that EM had no direct effect on an individual’s likelihood for prison recommitment or time to failure in the community within four years post-release from a correctional institution. This finding held true while controlling for certain demographic and criminal history variables relevant to recidivism, including a parole success guidelines score (Finn & Muirhead-Steves, 2002). The parole success guidelines score simulated a risk assessment.\(^{17}\)

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\(^{15}\) The population in this study included many forms of community supervision, including community control/house arrest, felony probation, drug offender probation, sex offender probation, addiction recovery, and three types of post-prison supervision, including parole, conditional release, and provisional release.

\(^{16}\) Technical violations are considered violations of an individual’s set conditions of their supervision.

\(^{17}\) Parole success guideline score factors included the following: age at first commitment; prior juvenile and adult convictions; prior incarcerations since age 17; probation or parole failure; heroin or opiate use; commitment offense involved burglary or forgery; fully employed during six months prior to current offense; score of 8 or higher on the Wide Range Achievement Test. For more on the scoring, see Finn & Muirhead-Steves (2002).
The findings from the Finn and Muirhead-Steves (2002) study resemble those of Bonta and colleagues’ (2000a) quasi-experimental study of three provinces that used EM to reduce prison overcrowding by diverting individuals assessed as moderate-risk for recidivism to the community via probation, in conjunction with intensive treatment programming. The intensive treatment programming incorporated best practices in community correctional treatment, including anger management, programs that target antisocial or pro-criminal thinking, individual counseling, and programming for substance misuse/use disorders conducted via a highly structured approach based on the cognitive-behavioral model (Bonta et al., 2000a). Eligibility for EM was open to those convicted for a non-violent and non-sexual offense, were assessed as moderate risk on a validated Level of Service Inventory-Revised (LSI-R) and were serving less than a six-month sentence (Bonta et al., 2000a). In their comparison of EM with intensive rehabilitation supervision, non-EM probationers who would meet eligibility for IRS were compared to a non-treated group of incarcerated individuals. Findings indicated no difference in recidivism between treated individuals on probation and non-treated incarcerated individuals (32.4% and 31.0%, respectively), and EM had negligible impact on recidivism of those in intensive rehabilitation supervision. However, when the LSI-R was used to identify risk level, findings showed individuals assessed as low-risk for recidivism who received intensive rehabilitation supervision had higher rates of recidivism. Recidivism decreased for individuals identified as high-risk who were treated (Bonta et al., 2000a).

Bonta et al. (2000b) found non-significant recidivism differences between individuals on intensive probation with EM compared to individuals on intensive probation without EM after controlling for an individual’s assessed recidivism risk. The findings indicated the addition of EM created a “net-widening” effect leading to additional costs and sanctions that could have been avoided. However, another study examining over 75,000 individuals on home confinement in Florida did not find support for a net-widening effect of EM (Padgett et al. 2006).

**Collateral consequences.** Qualitative studies highlight the collateral consequences of EM practices. In Payne and Gainey (1998), information gathered from individuals on EM through open-ended survey questions indicated the negative consequences of EM may go beyond those of incarceration (e.g., loss of autonomy, loss of rights). For example, individuals on EM noted the increased cost of being on EM compared to being in jail, as these individuals often had to pay fees to participate (Payne & Gainey, 1998). Some reported EM was just as disruptive as incarceration to their family members due to the monitoring process of frequent phone-calls and check-ins. For some, the EM bracelet itself harbored stigma for individuals (Payne & Gainey, 1998). At least one study found collateral consequences varied by demographic characteristics (e.g., females reported more feelings of public shaming) (Gainey & Payne, 2000). Individuals who have been on EM have also noted that the bracelet displays criminal status to other community members and serves as a consistent reminder of their crimes (Bales et al., 2010).

From the perspective of those most likely to be subject to EM, EM practices were viewed as less punitive than incarceration and more punitive than regular supervision. Importantly, these perceptions differed by race and age of system-involved individuals, with Black and older individuals seeing it as generally more punitive than White and younger persons (Payne et al., 2014). Some of these differences likely reflect how EM is used, as individuals of color are subject to EM at higher rates. As such, researchers warn that expanding EM as a surveillance tool alone will only further enhance the controlling power of correctional institutions with limited research on how that affects those disproportionately subjected to EM, so there must be consideration for the privacy and rights of these individuals (Jones, 2014; Kilgore, 2012). Further, while some tout EM as rehabilitative tool or curfew monitor, EM is predominately implemented, at present, within the punishment paradigm of the criminal legal system (Kilgore, 2012; 2014). In addition, Corbett & Pattavina (2015) suggested that for individuals under community supervision who are
living in poverty and attending to immediate survival needs and necessities, an increased level of focus through EM can make it difficult for them to meet the conditions of their community supervision.

**Summary of EM research.** With limited generalizable research to consider, the efficacy of EM is still unknown, particularly for those on parole. Currently, the strongest evidence for EM usage is limited to individuals assessed as higher-risk for recidivism, in which risk is identified via a validated, reliable RNA that provides information on the likelihood of future law enforcement contact. Additional information provides some limited efficacy for individuals convicted of a sex offense and individuals identified as members of a gang. Regardless, EM should be part of a larger conversation about the needs of individuals being supervised in community settings, the efficacy regarding how EM is used, and if and how EM can support other correctional practices. Consideration must be given to the collateral consequences of EM, including the potential for re-incarceration due to non-offending behaviors (e.g., technical violations) and the implications of its disproportionate use with people of color. Research around effective community correctional practices strongly suggests EM should be used with input from community corrections experts who could help design, implement, and evaluate EM; correctional staff who must implement agency policies and procedures around EM; and those most impacted by its use.
Section 3: Methodology

Data Sources

The study used multiple data sources including a review of PRB and IDOC policies and procedures, surveys of IDOC institutional staff and parole agents, and analysis of data from many administrative data sets. The study methods are described by data source with detail on materials, procedures including recruitment and data collection, as well as study participants and sample sizes.

PRB and IDOC Policies, Procedures, and Statutes

We conducted a review of IDOC and PRB directives, policies, procedures, and statutes. We reviewed sections related to IDOC and PRB in the Illinois Compiled Statutes, particularly Chapter 730 which contains the Unified Code of Corrections and the Illinois Crime Reduction Act of 2009. We also reviewed the 2018 Illinois Auditor General Report, a report by the Illinois Inspector General that identifies compliance with financial reporting and operational and statutory compliance.

Survey of IDOC Institutional and Parole Division Staff

We distributed surveys via Qualtrics to IDOC correctional counselors, field service representatives, and parole agents. The surveys included questions regarding the policies, procedures, and their responsibilities regarding EM—as individuals who provide recommendations to the PRB and as the staff who supervise individuals in the community who may be placed on EM, respectively. Surveys questions were based on previous studies of parole and revocation decision-making from The Robina Institute (E. Harbinson, personal communication, May 7, 2019; Harbinson et al., 2018; Laskrounsky et al., 2018). In addition, informal discussions with individuals working in the institutional and parole divisions of IDOC and advocates for EM reform informed survey questions so that they were specific to Illinois’ system, language, and other concerns.

Surveys were distributed through a point of contact for IDOC correctional counselors, field representatives, parole agents. We provided e-mail scripts for the initial distribution and three follow-up reminders about the survey (spaced approximately 7 to 10 days apart). Documents including recruitment scripts, consent forms, and the surveys are provided in Appendices A and B. The surveys requested demographic information, individuals’ role within their agency role and relation to conditions of supervision and EM, and factors related to EM recommendation or use. Lastly, due to the PRB’s legal concerns regarding the scope of inquiry that can be uncovered on the cognitive or mental processes related to condition and release decisions (Morales v. Findley, 2017), we were unable to anonymously survey or interview PRB members. Per the PRB Chief Counsel, and the Board Chair’s motion for protective order, PRB members “may not be compelled to testify regarding ‘the mental processes’ related to their decisions” (p. 1). Per PRB’s Chief Counsel and interpretations of case law, like judges, PRB members have absolute immunity regarding their decisions related to individuals’ PRB proceedings.18

For the parole agent survey, of the 89 total respondents, 85 parole agents indicated they had supervised an individual on EM while on MSR. Of those individuals, 73 identified as parole agents or senior parole agents (hereafter collectively referred to as parole agents). Therefore, the total sample for the survey’s

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18 In addition, several PRB members, at that time, may not have conducted an MSR hearing due to the recent change in Governor and filling in positions for the PRB. The PRB website has information on its members and when they joined.
descriptive information was 73 parole agents who had supervised or were supervising an individual on EM. There were 58 respondents for the IDOC correctional counselor and field service representative survey. 19

**Administrative Data**

A random sample of 1,192 individuals, approximately 10% of those released from an IDOC facility on a direct from court admission in SFY16, was used to identify the characteristics of individuals released to MSR, characteristics of those placed on EM compared to those who were not discretionarily placed on EM upon release to MSR, and justice-related outcomes. Below are descriptions of data used.

**Arrest data.** Illinois State Police (ISP) Criminal History Record Information (CHRI) was collected from the Illinois Criminal Justice Information Authority (ICJIA) for prior arrests and rearrests of individuals admitted to IDOC direct from court and released to MSR between July 1, 2015, and June 30, 2016 (SFY16). The Illinois Criminal Justice Information Authority (ICJIA) has access to the CHRI system for research purposes through a cooperative agreement with ISP. The CHRI database includes data on individuals’ arrests, arrest charges, convictions, and sentences, commonly referred to as a “rap sheet.” Information was analyzed on individuals’ arrests prior to their IDOC commitment date (prior arrests) and on or after the date they were released to MSR (rearrests). Individuals with an IDOC admission data were linked to CHRI data by bridging state identification numbers (SIDs) (a consistent, unique number created for an arrested individual based on their fingerprints) and IDOC numbers (the consistent, unique number given to an individual upon entry into an Illinois prison). Six individuals could not be identified in CHRI; researchers theorized their arresting offenses may have occurred prior to 1991, when the CHRI system was improved to offer more reliable arrest and criminal history information, and these individuals were also not matched to any post-release arrests.

**State corrections data.** We extracted a random sample of Illinois Department of Corrections exits of individuals admitted to IDOC direct from court and released to MSR in SFY16 (n=9,065). For the study sample, we took a random sample of approximately 10% of the total number of individuals admitted to IDOC direct from court who exited in SFY16, resulting in a full random sample of 1,192 individuals who exited IDOC direct from court in SFY16. Individuals admitted on a sex offense (n=72) were excluded from the study because of the differing requirements related to GPS monitoring. Further, individuals placed on GPS monitoring by the PRB (n=8) or for whom a sex offender statute was indicated on the PRB order were excluded from the study (n=22), as were individuals who were not released to MSR (n=25) per the PRB. This resulted in a total random sample of 1,065. Electronic monitoring technical hook-up data housed and provided by the EM company to IDOC, provided us with this information for the current study. This third-party data provides the dates on which individuals were set up with EM devices. The information used from this data source was the date at which an individual in our sample was connected to their EM device. Further, IDOC admission files on prior IDOC commitments and any recommitments to IDOC post-release from their initial MSR date in SFY16 were used in the study.

**PRB orders.** We analyzed PRB orders for the random sample of individuals admitted to IDOC direct from court and released to MSR in SFY16, including IDOC correctional counselor/field service representative recommendations and PRB conditions. This administrative data was collected through a PRB document request on the random sample of initial 1,192 individuals included in the study. The PRB

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19 Much of the demographic information was left blank, with only 17 of 58 respondents answering the questions. Therefore, this information was excluded from the study.
orders are not digitized or in an electronic format; therefore, data were hand-entered from approximately 1,192 scanned forms into an Excel spreadsheet.

An individual’s first exit from IDOC to MSR was used as the starting point in analysis.\(^{20}\) In addition, we examined released individuals’ CHRI and IDOC history, provided by IDOC for research purposes.

**Data Analysis**

We used SPSS software to conduct descriptive and bivariate statistical analyses regarding survey data and administrative data. Propensity score matching (PSM) was conducted using R software to create a matched-comparison group for analysis.

**Propensity Score Matching**

We used quasi-experimental design, creating a treatment group (individuals ordered to EM by the PRB) and matched comparison group (those not ordered to EM by the PRB). We applied PSM, a statistical matching technique, to reduce bias among those in the treatment and control groups to create two similarly situated groups to draw comparisons.

Because randomization of individuals to the condition of EM could not be accomplished, we used one-to-one, nearest neighbor PSM. This provided us the ability to estimate effects of individuals who are ordered to EM by the PRB upon release to MSR (treatment group) relative to those individuals who were not ordered to EM by the PRB upon release to MSR (comparison group), ensuring that the two groups are statistically equivalent on relevant factors related to the outcome variable of interest (recidivism) (Apel & Sweeten, 2010). This helped address any confounding variables that may be present for analysis between the two groups, ensuring the two groups as close to equal as possible (Kopak, 2020; Apel & Sweeten, 2010). Further, this limited bias in analyses related to other variables that may influence the dependent variable (recidivism) (Apel & Sweeten, 2010; Nagin, Cullen, & Jonson, 2009). The “nearest neighbor” match without replacement provides for the closest exact match; however, a limitation of this method, due to the small sample size in which to match participants for this study, may result in a drop in the sample size for those that cannot be matched based on the matching criteria. Overall, though, PSM provides the ability to negate pre-group differences and PSM still provides accurate estimates of treatment effects if the relevant variables are used for matching (Pirracchio et al., 2012). We used a p-value of < .05 to identify statistical significance.

For this study, individuals released to MSR in SFY16 were matched on key variables to estimate recidivism between those placed on to EM upon release and those not placed on to EM upon release to MSR. We used “nearest neighbor” matching with a one-to-one match for the treatment group (those who received EM upon release to MSR) and the comparison group (those who did not receive EM upon release to MSR).\(^{21}\)

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\(^{20}\) The initial sample of SFY16 DFC IDOC exits was 1,192. Individuals who did not exit to MSR (n=25), who were identified to have committed a sex offense as their admitting offense (n=72), and those whose PRB orders that indicated required GPS or EM per statute or given GPS were excluded from the study (n=26).

\(^{21}\) The match consisted of a .25 caliper, indicating a propensity score within .25 to the matching unit. The research indicates no unanimous or uniform decision on what an acceptable caliper is – or maximum distance – between scores (Austin, 2011). All variables had a standard mean difference under .10, except for PRB condition of substance use disorder counseling, which had a standard mean difference of .16. The standard mean difference helps identify the balance of characteristics between the two groups (Zhang et al., 2019), though again, there is no universally agreed upon threshold, generally .10 has been used to identify a negligible difference (Austin, 2011; Normand et al., 2001).
The variables used to match the sample included:

- Any prior felony arrests.
- Any prior misdemeanor arrests.
- Age at IDOC admission.
- Race/ethnicity.
- Offense type (person, property, drug, other).
- Any prior felony convictions.
- Any prior misdemeanor convictions.
- Gender identification (male or female).
- Condition of substance use disorder counseling by PRB.
- Condition of mental health counseling by PRB.
- Condition of anger management counseling by PRB.

Striking a balance between the nearest match and keeping as much of the sample in the final sample for the study resulted in a total of 280 individuals in the treatment group and 280 individuals in the comparison group, for a total matched sample of 560.\textsuperscript{22} Overall, the sample was a generally balanced group between the treatment and comparison groups.

\textsuperscript{22}Any prior IDOC commitment was not used as a matching variable because 99.7\% had no prior IDOC admits due to the nature of the admission from which they were pulled – direct from court.
Section 4: Study Findings

In this report, findings are presented in three subsections. Section 4.1 offers a review of IDOC and PRB policies, directives, and statutes. Section 4.2 presents findings from surveys of IDOC correctional counselors/field service representatives and parole agents. Section 4.3 offers data on a random sample of individuals committed to IDOC direct from court and released in SFY16, as well as arrest history and the use of propensity score matching to analyze justice-related outcomes.

Section 4.1: Policies, Directives, and Statutes of the Prison Review Board and the Illinois Department of Corrections

This section offers an overview of the general practices of the PRB, IDOC institutional staff, and parole agents. The overview is based on administrative directives, the Unified Code of Corrections, and Illinois statutes. Information related to responsibilities regarding release conditions and EM are discussed.

Prisoner Review Board Statutes

Illinois statute establishes the PRB in 730 ILCS 5/3-3-1. The PRB is a “quasi-judicial authority with a primary focus on public safety” (PRB Mission Statement, 2020). Up until 1978, the PRB was purely a paroling authority as Illinois used indeterminate sentencing. However, the state moved to determinate sentencing in 1978 and the PRB became the authority that sets a person’s conditions of supervision upon MSR into the community. Further, the PRB also makes determinations of whether good conduct credits should be restored, revoked, suspended, or reduced, as well as recommendations for clemency to the Governor (730 ILCS 5/3-3-1). The PRB is also responsible for release decisions for youth held in the Illinois Department of Juvenile Justice (IDJJ).

The PRB is made up of 15 persons who must have at least five years of actual work experience in the following fields [730 ILCS 5/3-3-1(b)]:

- Penology
- Corrections work
- Law enforcement
- Sociology
- Law
- Education
- Social work
- Medicine
- Psychology
- Other behavioral sciences
- A combination of the above

Of those members, at least six must have at least three years of experience in the realm of juvenile justice and no more than eight board members may be part of the same political party [730 ILCS 5/3-3-1(b)]. The PRB members are appointed by the Governor with advice and consent of the Senate, including one member who is identified as the Chairwoman/man that serves, “at the pleasure of the governor” [730 ILCS 5/3-3-1(b)].
It is the PRB's duty to set the conditions for parole/MSR; determine whether violations of those conditions warrant a revocation of parole or MSR;\(^{23}\) set hearings for individuals sentenced under indeterminate sentences for release; conditions of release, revocations, and recommittments to IDOC for violations of conditions of supervision; and set hearings for IDJJ. Hearings for indeterminate sentences and determinate sentences are all heard, “by at least one member and through a panel of at least 3 members” \([730\text{ ILCS 5/3-3-2(a)(2 – 6.5)}]\) (Prisoner Review Board Overview, 2020, \([730\text{ ILCS 5/3-3-2}])\). The exception to this is for individuals up for release who are under 21 years old at the time of offense (except for first degree murder or aggravated criminal sexual assault), in which a quorum is needed and the decision is based on a majority of that quorum \([730\text{ ILCS 5/3-3-2(a)(6.6)}]\). Ultimately, the PRB is the deciding entity and authority for any individuals’ placement on EM upon release and/or during the duration of the MSR period (\([730\text{ ILCS 5/3-3-2}])\). This also includes decisions made stemming from parole agent requests for adding EM or removing an EM device early for a client on their caseload.

**Illinois Department of Corrections**

**IDOC correctional counselors and field service representatives.** The PRB receives “clinical recommendations” on the incarcerated individuals’ and their files, and these suggested conditions recommendations made by IDOC correctional counselors and/or field service representatives are provided to the PRB. Illinois statute 730\text{ ILCS 5/3/-14-2(b)} states that IDOC, “shall assign personnel to assist persons eligible for parole in preparing a parole plan. Such [IDOC] personnel shall make a report of their efforts and findings to the [PRB] prior to its consideration of the case of such eligible person.”

As such, IDOC institutional staff provide recommendations for conditions of MSR and parole for eligible persons to PRB and may recommend EM as a condition, though the recommendation is not statutorily required or suggested. If EM is statutorily required as a condition of MSR, the PRB will order EM as a condition regardless of whether it was included as a recommendation; however, the IDOC correctional counselors/field service representations and PRB make discretionary decisions related to recommending and conditioning individuals to EM, respectively.\(^{24}\) Per Illinois statute 730\text{ ILCS 5/3-3-7(a)(21)}, any individual released from IDOC is to “be evaluated by the Department of Corrections prior to release using a validated risk assessment and be subject to a corresponding level of supervision.”

The duties and responsibilities of IDOC parole agents are outlined in the Illinois Compiled Statutes. Per, 730\text{ ILCS 5/3/-14-2(a)}, IDOC retains custody of those on parole under the conditions set by the PRB. The parole agent or supervising officer regularly checks in with their client to provide consultation regarding community re-entry. Once the PRB decides the conditions of MSR or parole, the individual being released to supervision signs a copy of the conditions and the conditions are provided to the supervising officer, who then reports on the progress of their client to the PRB.

\(^{23}\) On the PRB forms, there are specific conditions that PRB members can choose from, including: substance use evaluation or counseling; outpatient mental health counseling; anger management counseling; sex offender counseling; close supervision, with a specified frequency by the PRB; domestic violence counseling; no victim contact orders, identified and specified by the PRB in addition to identified orders of protection; EM and the number of days; GPS; no computer or internet access; and “other” which provides for the PRB to identify any other conditions or requirements they deem fit. \(^{24}\) As of February 2020, IDOC correctional counselors and field service representatives were provided written instruction to not recommend EM on PRB recommendations unless it is statutorily required (S. Shipinski, personal communication, June 26, 2020).
Electronic Monitoring

Illinois statute allows use of EM devices with GPS tracking capability and RF monitoring (730 ILCS 5/5-8A-1). The statute provides guidelines on when EM may be implemented as a condition of community supervision, whether statutorily required or used discretionarily (e.g., parole, MSR, probation, aftercare, etc.) and when it is required. Per 730 ILCS 3-3-7, electronic monitoring may only be imposed as a condition of community supervision when statutorily required or explicitly ordered by PRB. In addition, some offenses have exceptions and other restrictions or stipulations related to the use of EM, according to 730 ILCS 5/5-8A-3.

Based on 730 ILCS 5/3-3-7 and 730 ILCS 5/5-8A-6, EM via the use of a GPS is statutorily required for those convicted of certain sex offenses that would identify them as “sexual predators” per the Sex Offender Registration Act, or violations of orders of protection per 730 ILCS 5/5-8A-7. Furthermore, people convicted of sex offenses must be electronically monitored for at least two years after being released from IDOC (730 ILCS 5/5-8A-3). Persons convicted of Class X or Class 1 felonies may be ordered to EM for a period no longer than the last 90 days of incarceration. Persons convicted of Class 2, 3, or 4 felonies are not subject to this restriction. If a person convicted of a felony knowingly violates a condition of their electronic monitoring program, they are considered guilty of a Class 3 felony. For those convicted of misdemeanors, they are considered guilty of a Class B misdemeanor. Additionally, a person who violates the conditions of their electronic monitoring program while armed with a dangerous weapon are considered guilty of a Class 1 felony (730 ILCS 5/5-8A-4.1).

Illinois statute 730 ILCS 5/3-3-7 also ensures that electronic monitoring may only be enforced as a condition of parole or MSR if approved or ordered by the PRB for those offenses in which it is not statutorily required. Further, in addition to subsections A and B, indicates that individuals must “be evaluated by the Department of Corrections prior to release using a validated risk assessment and be subject to a corresponding level of supervision” [730 ILCS 5/3-3-7(a)(21)]. Further, as indicated in the statute, in accordance with the results from a validated risk assessment:

All subjects found to be at a moderate or high risk to recidivate, or on a parole or mandatory supervised release for first degree murder, a forcible felony as defined in Section 2-8 of the Criminal code of 2012, any felony that requires registration as a sex offender und the Sex Offender Registration Act, or Class X felony or Class 1 felony that is not a violation of the Cannabis Control Act, the Illinois Controlled Substances Act, or the Methamphetamine Control and Community Protection Act, shall be subject to high level supervision. The Department shall define high level supervision based on evidence-based and research-based practices. Notwithstanding this placement on high level supervision, placement of the subject on electronic monitoring or detention shall not occur unless it is required by law or expressly ordered or approved by the Prisoner Review Board [emphasis added]. [730 ILCS 5/3-3-7(a)(20)(A)]

Section B of this statute also indicates that subjects identified as low risk to recidivate, based on the use of a validated risk assessment by IDOC:

shall be subject to low-level supervision, except for those subjects on parole or mandatory supervised release supervised for first degree murder, a forcible felony as defined in Section 2-8 of the Criminal Code of 2012, any felony that requires registration as a sex offender under the Sex Offender Registration Act, or a Class X felony or Class 1 felony that is not a violation of the Cannabis Control Act, the Illinois Controlled Substances Act, or the Methamphetamine Control and Community Protection Act. Low level supervision shall require the subject to check in with
the supervising officer via phone or other electronic means. Notwithstanding this placement on high level supervision, placement of the subject on electronic monitoring or detention shall not occur unless it is required by law or expressly ordered or approved by the Prisoner Review Board [emphasis added]. [730 ILCS 5/3-3-7(a)(20)(B)]

Per the CRA of 2009, the IDOC and the PRB are mandated to:

adopt policies, rules, and regulations that, within the first year of the adoption, validation, and utilization of the statewide standardized risk assessment tool described in the Act, result in at least 25% supervised individuals being supervised in accordance with evidence-based practices [emphasis added]. (Crime Reduction Act of 2009)

This goes on to indicate that at three years, 50% must be supervised in accordance with evidence-based practices using a standardized, statewide risk assessment tool, and after five years, 75% must be supervised in accordance with evidence-based practices using a standardized, statewide risk assessment tool (Crime Reduction Act, 2009; Illinois Auditor General Report, 2018). The 2018 Illinois Auditor General’s Report indicated the tool was still not in place and that neither entity was in compliance with the Crime Reduction Act of 2009. The auditors indicated that “an evidence-based programming system can result in a significant reduction in recidivism and the successful local reintegration of offenders” (Illinois Auditor General Report, 2018, p. 74, Finding Code No. 2018-014, 2016-014).

Per the literature review section of this report, it is imperative that discretionary decisions regarding EM placement are most effectively based on the use of a validated RNA. Further, the lack of an RNA limits the ability of the IDOC Parole Division to supervise individuals according to their assessed needs (and statutory requirements), linking them to appropriate services to support their reintegration back into their communities. Further, it limits the PRB’s ability to make evidence-based and research-informed decisions regarding conditions of supervision, including the discretionary use of EM.

**Section 4.2: Surveys from IDOC Institutional and Parole Division Staff**

This section offers descriptive information of the samples for two surveys conducted as part of this study. The first survey describes the responses from IDOC correctional counselors and field service representatives—the individuals generally responsible for providing re-entry planning and recommendations to the PRB. The second survey describes responses, though more limited, from senior parole agents and parole agents in the five parole districts.

**IDOC Correctional Counselors and Field Service Representatives Survey**

Of the 58 respondents who reported providing recommendations to the PRB, 33 (56.9%) indicated that they have been employed by IDOC for over 17 years. The second most frequent answer was between 4 and 7 years (n=8; 13.8%). Of the 58 respondents, 21 (36.2%) respondents indicated they were field service representatives, 32 (55.2%) respondents indicated they were correctional counselors, and 5 respondents indicated they were supervisors or managers (8.6%). Of 52 individuals who responded, 28 (53.8%) indicated receiving their bachelor’s degree, followed by a master’s degree (n=15, 28.8%). Of the 50 respondents, 62.0% (n=31) indicated their highest degree earned was in criminal justice or a related field (i.e. social work, sociology, human services, law enforcement, etc.). Most frequently, of the 52 respondents, individuals did not have work experience prior to accepting their current position (n=12, 23.1%).
The correctional counselor and field service representative respondents were asked what they believe their role to be as IDOC employee in relation to making condition recommendations for individuals being released to MSR. Many respondents indicated that they provide the necessary information required for PRB members to make condition decisions and to make recommendations based on codified statutes. For EM specifically, many said their role is to recommend EM only when it is statutorily required as a condition of MSR. Other responses indicated that they recommend EM based on several other factors, suggesting that some counselors and field service representatives have more discretion when making recommendations to PRB than others (see analysis of PRB orders for more information; see also Illinois Sentencing Policy Advisory Council Research Brief, 2019).

Though fewer individuals answered the following survey questions, there was some information gleaned. Thirty respondents indicated the factors they used to decide recommendations to the PRB, in addition to ranking the priority of that factor in making MSR recommendations, from 1 (most important) to 10 (least important) (Table 1). The factor of current offense type was most commonly selected (n=29) and had the second highest average ranking by 23 respondents in terms of importance when making condition recommendations to the PRB. In fact, the most frequently selected rankings were related to the current charge for each individual (e.g., current offense type, current offense seriousness, current offense class). Factors such as whether the individual had stable housing upon release, job acquisition, or support within the community (i.e., family, friends, prosocial peers) tended to be ranked the lowest.

Table 1
Factors and Attending Average Rankings of IDOC Correctional Counselors and Field Service Representatives for Use to Make MSR Condition Recommendations (N=30)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Respondents Identified as Factor n</th>
<th>Respondents who Ranked Factor n</th>
<th>Average Rank (SD)</th>
<th>Median Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current offense type</td>
<td>29</td>
<td>23</td>
<td>3.87 (3.3)</td>
<td>2.0</td>
</tr>
<tr>
<td>Current offense seriousness</td>
<td>26</td>
<td>20</td>
<td>5.35 (3.7)</td>
<td>4.5</td>
</tr>
<tr>
<td>Individual's disciplinary record while incarcerated</td>
<td>25</td>
<td>19</td>
<td>6.63 (3.2)</td>
<td>8.0</td>
</tr>
<tr>
<td>Substance use history/Substance Use Disorder/TCU scores</td>
<td>24</td>
<td>19</td>
<td>5.79 (2.6)</td>
<td>6.0</td>
</tr>
<tr>
<td>Completion of IDOC programs and/or services</td>
<td>23</td>
<td>18</td>
<td>6.61 (2.3)</td>
<td>6.0</td>
</tr>
<tr>
<td>Mental health history</td>
<td>22</td>
<td>16</td>
<td>5.79 (2.6)</td>
<td>6.0</td>
</tr>
<tr>
<td>Prior IDOC commitments</td>
<td>19</td>
<td>14</td>
<td>7.57 (2.7)</td>
<td>8.0</td>
</tr>
<tr>
<td>Arrest history</td>
<td>18</td>
<td>14</td>
<td>4.86 (3.7)</td>
<td>3.0</td>
</tr>
<tr>
<td>Prior MSR violation(s)</td>
<td>16</td>
<td>13</td>
<td>6.00 (3.0)</td>
<td>6.0</td>
</tr>
<tr>
<td>Current offense class</td>
<td>15</td>
<td>11</td>
<td>3.73 (2.5)</td>
<td>3.0</td>
</tr>
<tr>
<td>Any participation in IDOC programs and/or services</td>
<td>15</td>
<td>12</td>
<td>5.00 (2.6)</td>
<td>4.5</td>
</tr>
</tbody>
</table>

IDOC indicates that as of February 2020, written communication has been provided during training and to correctional counselors and field service representatives that it is not policy to recommend EM if it is not statutorily required (S. Shipinski, personal communication, June 26, 2020 and June 29, 2020). IDOC indicates that this is contrary to IDOC written instructions as of February 2020 (S. Shipinski, personal communication, June 26, 2020), in that, correctional counselors and field service representatives are told not to recommend EM unless statutorily required.
Respondents also evaluated the same factors in terms of specific recommendations of EM as a condition of MSR (Table 2). Of the 18 respondents, every respondent indicated the current offense type and current offense seriousness were factors used when recommending EM, though these factors were ranked lower in importance when considering EM as a recommendation. Unlike general recommendations to the PRB, the factors of “number of previous arrests” or “previous or current firearm” were the two highest ranked by respondents as factors considered for EM recommendations.26

Table 2
Factors and Average Rankings of IDOC Correctional Counselors and Field Service Representatives for Use to Make Recommend EM as a Condition of MSR (N=18)

<table>
<thead>
<tr>
<th>Factor</th>
<th>Respondents Identified as Factor</th>
<th>Respondents who Ranked Factor</th>
<th>Average Rank n (SD)</th>
<th>Median Rank n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current offense type</td>
<td>18</td>
<td>17</td>
<td>4.18 (3.8)</td>
<td>2.0</td>
</tr>
<tr>
<td>Current offense seriousness</td>
<td>18</td>
<td>17</td>
<td>4.65 (3.1)</td>
<td>3.0</td>
</tr>
<tr>
<td>Current offense class</td>
<td>14</td>
<td>14</td>
<td>5.00 (2.9)</td>
<td>5.0</td>
</tr>
<tr>
<td>Arrest history</td>
<td>14</td>
<td>12</td>
<td>5.92 (2.8)</td>
<td>5.0</td>
</tr>
<tr>
<td>Prior EM violation(s)</td>
<td>13</td>
<td>12</td>
<td>6.17 (2.7)</td>
<td>6.5</td>
</tr>
<tr>
<td>Previous or current firearm offense(s)</td>
<td>12</td>
<td>12</td>
<td>4.92 (2.1)</td>
<td>5.0</td>
</tr>
<tr>
<td>Prior IDOC commitments</td>
<td>11</td>
<td>11</td>
<td>5.27 (2.1)</td>
<td>5.0</td>
</tr>
<tr>
<td>Prior MSR violation(s)</td>
<td>12</td>
<td>12</td>
<td>6.08 (3.1)</td>
<td>5.5</td>
</tr>
<tr>
<td>Individual's disciplinary record while incarcerated</td>
<td>10</td>
<td>9</td>
<td>5.56 (2.7)</td>
<td>6.0</td>
</tr>
<tr>
<td>Mental health history</td>
<td>11</td>
<td>8</td>
<td>5.75 (2.4)</td>
<td>6.0</td>
</tr>
</tbody>
</table>

26 IDOC indicates that this is contrary to IDOC written instructions as of February 2020 (S. Shipinski, personal communication, June 26, 2020), in that, correctional counselors and field service representatives are told not to recommend EM unless statutorily required.
<table>
<thead>
<tr>
<th>Substance use history/Substance Use Disorder/TCU scores</th>
<th>9</th>
<th>9</th>
<th>6.89 (2.3)</th>
<th>7.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior EM placement(s)</td>
<td>6</td>
<td>7</td>
<td>4.86 (2.6)</td>
<td>6.0</td>
</tr>
<tr>
<td>Mental health stability</td>
<td>7</td>
<td>8</td>
<td>5.38 (3.3)</td>
<td>4.5</td>
</tr>
<tr>
<td>Victim input (if applicable)</td>
<td>4</td>
<td>4</td>
<td>4.25 (2.9)</td>
<td>4.0</td>
</tr>
<tr>
<td>Completion of IDOC programs and/or services</td>
<td>5</td>
<td>4</td>
<td>5.75 (3.4)</td>
<td>6.5</td>
</tr>
<tr>
<td>Prior MSR revocation(s)</td>
<td>4</td>
<td>4</td>
<td>6.75 (4.0)</td>
<td>8.0</td>
</tr>
<tr>
<td>Risk or risk/needs assessment scores</td>
<td>4</td>
<td>4</td>
<td>7.50 (2.4)</td>
<td>8.5</td>
</tr>
<tr>
<td>Stable housing upon release</td>
<td>4</td>
<td>3</td>
<td>8.33 (3.5)</td>
<td>8.0</td>
</tr>
<tr>
<td>Any participation in IDOC programs and/or services</td>
<td>4</td>
<td>4</td>
<td>7.00 (2.9)</td>
<td>7.5</td>
</tr>
<tr>
<td>Individual’s support in the community</td>
<td>0</td>
<td>0</td>
<td>N/A</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC correctional counselor and field representative survey data.

Note: One respondent selected more than 10 factors to rank and others ranked factors they did not select. The number of respondents who ranked factors does not necessarily equate to how respondents ranked the factors’ priority in using it to make MSR condition recommendations.

Nineteen respondents answered the question regarding whether correctional counselors and/or field service representatives use a risk assessment, RNA, or a structured clinical/professional judgement tool to measure an individual's risk to recidivate upon release into the community. Of them, 16 (84.2%) indicated they do not. One respondent stated they use an RNA, and two other respondents stated that social workers and assessment specialists perform risk assessments. Similarly, of 18 respondents, 15 (83.3%) indicated they do not use these tools to help make recommendations for MSR conditions to the PRB, while 2 respondents indicated they do use them. These answers were also consistent regarding using these assessment tools when determining to recommend EM specifically as a condition of MSR. Of 18 respondents, 16 (88.9%) indicated they do not use any such tool, while just one respondent indicated they use an RNA for this purpose. Additionally, only one respondent indicated that they sometimes use risk and/or RNA scores to identify risk for recidivism, while 17 (94.4%) respondents indicated they either do not, or do not have an RNA.

The respondents were asked to rank statements based on the strength of priority when making a recommendation to place an individual on EM upon release to MSR (on a scale of 1 to 10, 1 being the highest). Sixteen of the 18 respondents rated "Provide public safety and protection" the highest priority for recommending EM, with an average rating of 2.8 out of 10. The lowest-rated statement, on average, was "Ensure punishment for violations to deter future behavior" with a rating of 6.1 out of 10. While half of the 18 respondents indicated that they agreed or strongly agreed with the statement, "EM is effective at reducing recidivism for specific types of offenders," most indicated they disagreed with or had a neutral opinion of the statement, "EM is effective at reducing recidivism for most offenders." Additionally, half of the 18 respondents also indicated they agreed with the statement, "EM is a cost-effective strategy for offenders released to MSR." The statement with the largest amount of disagreement was "Offenders have very few strengths to build upon as they are released to the community," with nine respondents disagreeing (Figure 1).
Responses to EM-Related Questions from IDOC Correctional Counselors and Field Service Representatives (N=18)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDOC correctional counselors and/or field service representatives stay current with research on offender reentry.</td>
<td>16.7%</td>
<td>5.6%</td>
<td>38.9%</td>
<td>22.2%</td>
<td>16.7%</td>
</tr>
<tr>
<td>EM is a cost-effective strategy for offenders released to MSR. (n=17)</td>
<td>11.8%</td>
<td>17.6%</td>
<td>17.6%</td>
<td>52.9%</td>
<td></td>
</tr>
<tr>
<td>IDOC correctional counselors and/or field service representatives stay current with new research on EM.</td>
<td>11.1%</td>
<td>11.1%</td>
<td>55.6%</td>
<td>11.1%</td>
<td>11.1%</td>
</tr>
<tr>
<td>EM is effective at reducing recidivism for most offenders.</td>
<td>11.1%</td>
<td>33.3%</td>
<td>22.2%</td>
<td>22.2%</td>
<td>11.1%</td>
</tr>
<tr>
<td>Offenders have very few strengths to build upon as they are released to the community.</td>
<td>5.6%</td>
<td>44.4%</td>
<td>33.3%</td>
<td>16.7%</td>
<td></td>
</tr>
<tr>
<td>My experience and instincts are more accurate at determining risk to recidivate in the community than an actuarial assessment.</td>
<td>5.6%</td>
<td>33.3%</td>
<td>27.8%</td>
<td>33.3%</td>
<td></td>
</tr>
<tr>
<td>EM is effective at reducing recidivism for specific types of offenders.</td>
<td>5.6%</td>
<td>22.2%</td>
<td>22.2%</td>
<td>38.9%</td>
<td>11.1%</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC correctional counselor and field representative survey data.

Respondents were also asked their opinions on things they would change about the current process of making recommendations for conditions of MSR to the PRB via open-ended questions. Of the 13 respondents, the most common issue raised by respondents was that of a lack of consistency, both within the general process and within the conditions ordered by the PRB. One respondent stated it was difficult explaining the discrepancies in conditions to incarcerated individuals scheduled for release to MSR. Some respondents also stated that training needs to be improved for new counselors and that recommendations for conditions and the actual conditions placed are made somewhat arbitrarily. In terms of their opinions on the use of EM for individuals on MSR in general, several respondents said it should be limited and used in only certain cases (e.g., for individuals incarcerated for violent offenses, when the individual poses a safety threat to the community, when the individual on MSR is non-compliant). One respondent stated EM should be used in all cases to enhance structure and accountability for individuals on MSR to effectuate compliance with the conditions of MSR.

While few survey participants responded to questions on several questions (n=17), some information could be gleaned regarding who is responsible for EM and the processes involved with EM. Most respondents (n=15; 88.2%) indicated PRB members are responsible for determining which individuals should be placed on EM, beyond those who are statutorily required. Only 1 respondent indicated that IDOC correctional counselors or field service representatives determine if an individual should be placed on EM. In addition, over half (n=9; 52.9%) indicated they were either somewhat dissatisfied or extremely
dissatisfied with the current PRB process of identifying which incarcerated individuals will be placed on EM upon release to MSR. Contrastingly, 4 respondents (23.5%) indicated they were at least somewhat satisfied or extremely satisfied with the current process, and another 4 (23.5%) responded that they were neither satisfied nor dissatisfied. The responses regarding the IDOC process of making recommendations as to which individuals should be placed on EM were similar, with a plurality of respondents expressing some level of dissatisfaction (n=7; 41.2%), though 5 respondents (29.4%) indicated they were at least slightly satisfied, and another 5 indicated they were neither satisfied nor dissatisfied (29.4%).

Parole Agent Survey

Eighty-five of 89 total respondents reported having ever supervised an individual on EM while on MSR. Of the 85 respondents, 73 respondents identified as parole agents or senior parole agents; however, only 13 survey respondents provided enough information to help answer EM-related research questions. Therefore, these survey results were used in a limited capacity for this report. Due to small sample size, the data is not representative of parole agents or practices in Illinois and is limited to the individuals who responded to the survey. It is possible that responses, particularly of the open-ended questions, may be a product of selection bias—those individuals were also more likely to answer the survey more completely were also more likely to provide responses to the open-ended questions.

Most parole agents identified being employed with the Illinois Department of Corrections for 17 years or longer (n=62, 84.9%) and of 67 respondents, 23 (34.3%) worked as a parole agent for 17 years or longer; 30.1% (n=22) identified as being employed as parole agent for 1 to 3 years. Respondents represented all 5 parole districts in Illinois.

Of 66 respondents, 47 (71.2%) indicated they earned a bachelor’s degree and of 61 respondents, 43 (70.5%) indicated their degrees were in criminal justice or related field (i.e. social work, law enforcement, human services, etc.). Of 63 respondents, 33 (52.4%) indicated they had at least some prior work experience related to criminal or juvenile justice prior to their employment as a parole agent. The survey did not garner enough responses to provide for respondent demographics such as race/ethnicity, age, and gender variables.27

Thirty-eight parole agents (52.1%) responded to the two open-ended questions regarding their role(s) as a parole agent and what the parole agents believe are the goal(s) of EM for individuals on MSR. Frequently, parole agents identified their role as providing supervision and ensuring compliance, connecting individuals on their caseload to appropriate programs and services, and assisting with the individuals’ reintegration back into society. One parole agent summarized this, stating, “My mission is to promote public safety through offender supervision utilizing re-entry resources, community partnerships, and graduated sanctions.” This phrase was repeated by several parole agents, and researchers later identified that it was the mission statement for Illinois parole on its website. It is likely that this information was more of a reiteration of parole’s mission than how parole agents individually perceived their role in supervising individuals on MSR.

Most frequently, parole agents identified EM as, “a deterrent or a way to help individuals that need it stay out of areas that could be a bad influence on their reentry to society.” Further, parole agents commonly identified EM as “a tool to ensure compliance” and a way to “restrict movement,” “provide structure and discipline in time management,” and “provide gradual reintegration.” However, several

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27 Ten out of 73 initial respondents answered these questions; 10 to 11 individuals responded to any of the research-relevant questions.
parole agents indicated the PRB’s ability to use EM as a condition of release hampers the agents’ ability to use it as a sanction, 28 indicating more indirectly (and directly) that EM should only be used, “as a sanction for non-compliance.” Further, several parole agents pointed out that mandated 12-hour allowable movement for individuals placed on EM upon release into the community is merely a curfew tool when they “already have a curfew sanction available.” In addition, with the 12-hour allowable movement, agents said they were “unsure of the main goals” of EM and that EM should be used as “a last resort, and carefully considered by the PO as not to over utilize[sic], or simply use as a threatening control tactic.” One officer said mandated 12-hour allowable movement resulted from “too many POs [who] failed to respond to Offenders [sic] movement requests and the Commanders never [addressing] individual POs for failing to do their jobs.” Further, another parole agent indicated that conditioning an individual being released to MSR, “is usually just delaying them for 60 or 90 days of having 24-hours of movement anyways,” and that other board orders “appear to have no reasoning behind them.

Per personal communication with IDOC, in response to allegations of parole agent noncompliance with requests for movement for individuals on MSR, 29 they indicated that they enhanced its messaging program between the individuals on MSR and parole agents in August 2019. The system update enabled the Parole Division to capture and track requests for movement, how many days parole agents were given before that movement was expected, whether parole personnel were able to respond to that movement request within the time-period established by policy, and what the outcome was for that request. In its own examination of the first 114 days of the new tracking system, an IDOC representative identified 39,517 movement requests by approximately 1,100-1,400 individuals on MSR. About 80% of all requests for movement from parole agents were resolved in a timely manner, meaning, the individual on MSR was given an answer as to whether movement was approved (80%), denied (7.5%), or expired without response (11%) in relation to the client’s movement request (S. Shipinksi, personal communication, June 26, 2020).

Based on its own analysis of movement requests, IDOC looked at data on expired movement requests and found monthly improvement for response times once the tracking system was launched and monitored by the commanders (S. Shipinski, personal communication, June 26, 2020). 30 They reported expired movement requests decreased from 12.5% in the first month of the system update to 5.4% in the last month analyzed. 31 The month with the lowest non-compliance rate of movement requests was 3.4% post-implementation of the automated system. The system currently escalates calls for movement up the chain of command from the immediate or coverage commander, to the deputy chief over the area, and to the Chief of Parole. These changes were made in the Automated Management System (AMS) parole agents use for client management (S. Shipinski, personal communication, June 26, 2020). 32

Conversely, in response to issues regarding parole agent non-response for requests for an individual’s movements, the PRB sent a memo to the IDOC Executive Director and Chief of Parole on EM movement and compliance changes (Appendix C). They included 12-hour movements for individuals placed on EM

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28 A tool used to identify a graduated list of sanctions to respond to different violations of conditions of supervision or other undesired behavior while on MSR.
29 These allegations were largely the result of the Spring 2019 legislative session discussions on EM.
30 This cannot be verified by the authors of this report and is purely based on the information provided via personal communication, without data provided to review.
31 Months in relation to this updated system were not provided upon request.
32 The PRB does not have access to O360 (IDOC’s data system) or the AMS system. It may be beneficial to provide the PRB with access data, particularly for EM for compliance reporting (per July 15, 2019 memo to IDOC Director and Chief of Parole) in addition to AMS information related to revocation, EM removal, and requests to add EM to enhance their decision-making as well.
by the PRB as a condition upon release to MSR. While this eliminated some issues regarding parole agent non-compliance to movement requests, it also interfered with parole agents’ ability to modify movements in the community, as appropriate. Greater communication between IDOC and the PRB should occur to ensure EM is practically and effectively used by parole agents. Collaboration and incorporation of research and best practice is needed to create more effective and efficient guidelines and guidance for EM movements and movement requests that will not create barriers to individuals’ ability to succeed on MSR/parole supervision. This necessitates further evaluation as to EM use as used by parole agents when ordered by the PRB upon release to MSR as well as information from individuals place on EM by the PRB.
Section 4.3: Demographic Information and Arrest Histories of Individuals on MSR

This section offers findings from IDOC admissions and release data, PRB order data, CHRI data on arrest history and post-release arrests in addition to demographic information. First, a summary of descriptive information is provided for the full random sample of individuals released from IDOC to MSR in SFY16 from a direct from court commitment. A direct from court commitment is one in which the individual is sentenced and committed from court to IDOC, as opposed to a recommitment for a technical violation. This means the sample only consists of individuals leaving IDOC, presumably for the first time for their sentence, to MSR. Second, descriptives are provided on the full random sample, prior to PSM, of those who were placed on EM and those who were not placed on EM upon release to MSR. This includes tests for differences between these two groups and bivariate analyses. Third, we conducted PSM to create a comparison group and provide descriptive information and additional analyses.

**Full Random Sample of IDOC Exits from SFY2016 (N=1,065)**

Demographic and criminal history information of the full random sample of 1,066 individuals released from IDOC in SFY16 who were initially committed to IDOC direct from court is provided in Table 3. The average age at time of admission to IDOC was approximately 29 years old (28.9, SD=10.4) with a median age of 25, and ages ranging from 17 to 66. The average age at time of IDOC release to MSR was approximately 30 years old (30.5, SD=10.5) with a median age of 27, and ages ranging between 18 and 67 years old. Fifty-one percent of the sample were between the ages of 17 and 25 years old at admit to IDOC and 51% of the sample were between the ages of 18 and 27 years old upon release to MSR from IDOC.

Table 3

**Demographics of Individuals Released from IDOC Facilities after a Direct from Court Admission in SFY16 (N=1,063)**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age at Admission</strong></td>
<td></td>
</tr>
<tr>
<td>17-22 Years Old</td>
<td>372 (35.0)</td>
</tr>
<tr>
<td>23-27 Years Old</td>
<td>246 (23.1)</td>
</tr>
<tr>
<td>28-32 Years Old</td>
<td>152 (14.3)</td>
</tr>
<tr>
<td>33-37 Years Old</td>
<td>88 (8.3)</td>
</tr>
<tr>
<td>38-42 Years Old</td>
<td>63 (5.9)</td>
</tr>
<tr>
<td>43-47 Years Old</td>
<td>65 (6.1)</td>
</tr>
<tr>
<td>48 Years or Older</td>
<td>77 (7.2)</td>
</tr>
<tr>
<td><strong>Age at Release</strong></td>
<td></td>
</tr>
<tr>
<td>18-22 Years Old</td>
<td>285 (26.8)</td>
</tr>
<tr>
<td>23-27 Years Old</td>
<td>259 (24.4)</td>
</tr>
<tr>
<td>28-32 Years Old</td>
<td>184 (17.3)</td>
</tr>
<tr>
<td>33-37 Years Old</td>
<td>103 (9.7)</td>
</tr>
<tr>
<td>38-42 Years Old</td>
<td>61 (5.7)</td>
</tr>
<tr>
<td>43-47 Years Old</td>
<td>72 (6.8)</td>
</tr>
<tr>
<td>48 Years or Older</td>
<td>99 (9.3)</td>
</tr>
</tbody>
</table>

*Source: ICJIA analysis of IDOC administrative data.*

*Note: Percentages may equal just below or just above 100% due to rounding.*

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33 Excluded are those who were released from MSR and recommitted. The direct from court commitment was identified through the IDOC data regarding type of commitment.
In terms of race/ethnicity, nearly half of the sample identified as Black 49.9% (n = 531), 35.0% identified as White (n = 373), 14.3% identified as Latinx (n=152), and 0.8% identified as other (n=9). The sample predominately identified as male (n = 911, 85.5%), with 14.5% female (n=154).

Most frequently, individuals released from IDOC to MSR in SFY16 were initially committed for person offenses (n=393), followed by drug offenses (341) and property offenses (n=308). Twenty-four individuals were released from IDOC to MSR in SFY16 for an “other” offense. Figure 2 provides the percentage breakdowns of the offense types of the full random sample.

Figure 2
Sample of People Released from IDOC in SFY16, by Offense Type (N=1,065)

Source: ICJIA analysis of IDOC administrative data

The full random sample of individuals who exited in SFY16 from a direct from court admission were most frequently admitted on a Class 4 felony (n=344), followed by a Class 2 felony (n=245), Class 1 felony (n=200), Class 3 felony (n=167), Murder (n=13), and Class X (96) (Figure 3).

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34 Those who identified as “other” consisted of nine individuals who identified as Asian and American Indian, per IDOC administrative data.
On average, individuals spent 18.8 months (SD=33.5 months) in an IDOC facility, with a median of 8 months. Nearly 10% of those sampled spent 0 days in custody (9.8%, n=104). These individuals may have been “turnarounds,” or individuals admitted and released on the same day. Sentence lengths ranged from 0 to 340 months (28.3 years).

**Arrest and Court History Prior to Prison Admission**

Nearly all sampled individuals released from IDOC in SFY16, had at least one prior arrest for a felony offense (96.6%, n=1027), 691 individuals (64.9%) had at least one but less than four prior felony arrests, and 971 individuals (91.3%) had a least one prior felony conviction (Figure 4). In addition, 848 (79.8%) individuals had at least one prior arrest for a misdemeanor offense, 426 (40.0%) individuals had more than one but less than four prior misdemeanor arrests, and 432 (40.6%) individuals had at least one prior misdemeanor conviction. In addition, 504 (47.4%) individuals had served at least one probation sentence prior to their IDOC admission. Overall, individuals who exited IDOC in SFY16 had an average of 8.6 prior arrests (SD=7.8) and a median of 7 arrests.

Of the 1,060 individuals released to MSR in SFY16 with information prior to their initial IDOC admission,35

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35 Due to hierarchical coding, only the most severe charge is shown in CHRI for each case. Some misdemeanors may not have been counted.
3.0% (n=32) had at least one prior Class M arrest (only one person had more than one Class M arrest);

26.6% (n=282) had at least one prior Class X arrest (ranging between 1 and 3);

34.0% (n=360) had at least one prior Class 1 felony arrest (ranging between 1 and 6);

40.8% (n=433) had at least one prior Class 2 felony (ranging between 1 and 9);

33.8% (n=358) had at least one prior Class 3 felony arrest (ranging between 1 and 6);

56.2% (n=596) had at least one prior Class 4 felony arrest (ranging between 1 and 16);

78.1% (n=828) had at least one prior Class A misdemeanor arrest (ranging between 1 and 43 arrests); and

25.6% (n=271) had at least one prior Class B misdemeanor arrest (ranging between 1 and 14).

The sample was randomly selected from those exiting prison in SFY16 from a direct from court admission to prison, which is an admission type generally reserved for first-time IDOC commitments. As a result, 99.7% of the sample had no prior IDOC commitment. Future IDOC commitments may be indicated as “discharged and recommitted,” for example, for someone who has already exited IDOC. Limitations of this data sample are discussed in the limitations section of this report.

Figure 4
Prior Arrest, Conviction, and Probation Histories of a Random Sample of Individuals Exiting IDOC is SFY16, by EM Order (N=1,063)

Chi-square tests were performed to examine the relationship between prior arrest and conviction history (before IDOC admission date) and whether the PRB placed the individual on EM as a condition of release to MSR. The relationship between prior probation sentence and EM condition was statistically significant, $\chi^2 (1, 1063)=12.19, p=.000$, but had a weak association (Cramer’s $V=.107$). The relationship
between prior misdemeanor convictions and EM condition was statistically significant, \( \chi^2 (1, 1063) = 21.92, p = .000 \), but also had a weak association (Cramer’s \( V = .144 \)).

**Section 4.4: Prison Review Board Orders including Discretionary Use of Electronic Monitoring**

Electronic monitoring was specified as a condition of MSR by PRB in less than half of all the cases in the sample. Specifically, 43.0% of individuals (\( n=458 \)) in the sample were placed on to EM upon release to MSR via PRB order. Data was unknown or not provided for 254 of the 458 individuals ordered to EM by the PRB upon release to MSR \(^{36}\) on when the individual was connected to an EM device. Of the remaining 204, 39.7% (\( n=81 \)) were hooked up to EM by the technology provider within 1 day of discharge to MSR and 23.5% (\( n=48 \)) were hooked up to EM by the technology provider within 2 days of discharge to MSR. The days until EM device connection for an individual ordered to EM by the PRB upon release to MSR ranged between 0 days (likely on date of discharge) to 469 days; 73.0% (\( n=149 \)) of the 204 individuals with valid EM hook-up dates were connected on the day of discharge or within 2 days of discharge.

Illinois Department of Corrections’ staff recommended EM as a condition less than half as frequently as it was ordered by PRB (\( n=217, 20.4\% \)) for non-statutory purposes for the full random sample (\( N=1,065 \)). \(^{37}\) Correctional counselors and/or field service representatives most frequently recommended substance use disorder counseling (\( n=642, 60.3\% \)), followed by anger management (\( n=259, 24.3\% \)) as conditions for individuals being released to MSR. The PRB most frequently ordered EM as a condition (\( n=458, 43.0\% \)), followed by close supervision (\( n=367, 34.5\% \)). Contrastingly, 4.7% (\( n=50 \)) of the sample was recommended for close supervision by IDOC correctional counselors and/or field service representatives.

Table 4 shows the frequencies of conditions of MSR recommended by IDOC correctional counselors and field service representatives and ordered by PRB.

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\(^{36}\) One individual in the study was statutorily required to be on a GPS device due to a new law in 2009; however, IDOC did not recommend, nor PRB order an EM device for the release of this individual. \(^{37}\) Per IDOC, as of February 2020, forms related to condition recommendations were updated since this current release cohort, in addition to written instruction to IDOC correctional counselors and field service representatives regarding not recommending EM unless it is statutorily required. Written instruction included how to complete the form (S. Shipinski, personal communication, June 26, 2020). However, documentation to such written communication or training information related to this written instruction was not provided by IDOC upon request.

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\(^{37}\) Per IDOC, as of February 2020, forms related to condition recommendations were updated since this current release cohort, in addition to written instruction to IDOC correctional counselors and field service representatives regarding not recommending EM unless it is statutorily required. Written instruction included how to complete the form (S. Shipinski, personal communication, June 26, 2020). However, documentation to such written communication or training information related to this written instruction was not provided by IDOC upon request.
Table 4
IDOC Correctional Counselors/Field Service Representative MSR Condition Recommendations and PRB Orders of MSR Conditions (N=1,065)

<table>
<thead>
<tr>
<th>Condition of MSR</th>
<th>Total # Recommended by IDOC CC/FSR (%)</th>
<th>Total # Ordered by PRB (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electronic Monitoring</td>
<td>217 (20.4)</td>
<td>458 (43.0)</td>
</tr>
<tr>
<td>Substance Use Disorder Counseling</td>
<td>642 (60.3)</td>
<td>700 (65.7)</td>
</tr>
<tr>
<td>Mental Health Counseling</td>
<td>164 (15.4)</td>
<td>204 (19.2)</td>
</tr>
<tr>
<td>Domestic Violence Counseling</td>
<td>50 (4.7)</td>
<td>54 (5.1)</td>
</tr>
<tr>
<td>Anger Management Counseling</td>
<td>259 (24.3)</td>
<td>308 (28.9)</td>
</tr>
<tr>
<td>Close Supervision</td>
<td>50 (4.7)</td>
<td>367 (34.5)</td>
</tr>
<tr>
<td>No Contact with Victim</td>
<td>102 (9.6)</td>
<td>178 (16.7)</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of PRB Orders.
Note: Recommendations for EM did not include those IDOC correctional counselors’ or field service representatives’ recommendations for electronic detention as a condition (n = 55, 5.2%). It also does not include individuals recommended or ordered to GPS as they were excluded from the current study.

Other information provided to PRB by IDOC staff included the following:
- 5.2% (n=55) provided an electronic detention recommendation.
- 23.4% (n=249) indicated it was the individual’s first IDOC incarceration.
- 36.0% (n=383) provided criminal history information, including some juvenile history.
- 12.2% (n=130) did not provide any recommendations to the PRB.
- 40.7% (n=433) provided a Texas Christian University (TCU) drug screen score or indicated a TCU score of 4 or higher.38

The use of TCU scores, recommendations from IDOC correctional counselors and/or field representatives and use by the PRB seemed somewhat inconsistent with the information provided (assessment score) and the scoring manual for the TCU drug screening for criminal justice. For example, 328 (99.7%) cases where no TCU score was provided in the clinical recommendations (though may have been provided to PRB in a master file) were recommended for substance use disorder counseling by IDOC staff; IDOC staff also provided the recommendation of substance use disorder treatment for 25 out of 43 individuals (58.1%) who scored a 0 on the TCU and 30 out of 99 individuals (30.3%) who scored a 1 on the TCU.

In comparison, the PRB placed 24 of 43 individuals (55.8%) who scored a 0 on their TCU assessment and 45 of 99 individuals (45.5%) who scored a 1 on the TCU to the condition of substance use disorder counseling. Individuals who had TCU scores that would indicate a severe disorder (6 or higher; n=154) were recommended by IDOC for substance use disorder treatment more often than they were not recommended (n=9, 5.8%); as too was the case for PRB condition of substance use disorder treatment based on a TCU score indicating a severe disorder, in which fewer were not ordered to substance use disorder counseling who had an indicated severe disorder (n=7, 4.5%) and more often than not, those with a TCU indicating a severe disorder were ordered to substance use disorder counseling. Though the condition of substance use disorder treatment is broad and the TCU manual scoring identifies, more broadly, mild, moderate, or severe disorders, it is unknown how TCU scores were related to IDOC or

38 The TCU is a tool that can indicates the severity of substance use.
PRB recommendations and conditions, respectively, or whether attending disorder severity was used to link individuals to level of appropriate services upon release to MSR by parole agents.

Table 5 lists the number of releases from each IDOC facility by whether IDOC correctional counselors/field service representatives recommended EM and whether PRB specified EM as a condition of release in SFY16. The facility with the most releases was Stateville, followed by Pinckneyville. The IDOC facility with the highest proportion of releases ordered to EM by the PRB was Pontiac, Dixon, Lawrence, and Menard, respectively (though each facility had few releases total).

Table 5
Recommendations by IDOC and PRB Ordered Conditions of EM for People Released to MSR from a Direct from Court Admission Based on IDOC Institution, SFY16 (N=1,063)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Total # Released to MSR in SFY16 (% of total releasees)</th>
<th>IDOC EM Recommendation by Institution n (%)</th>
<th>PRB EM Conditions by Institution n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent Institution</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Big Muddy River</strong></td>
<td>8 (0.8)</td>
<td>0 (0.0)</td>
<td>3 (37.5)</td>
</tr>
<tr>
<td><strong>Centralia</strong></td>
<td>16 (1.5)</td>
<td>4 (25.0)</td>
<td>10 (62.5)</td>
</tr>
<tr>
<td><strong>Danville</strong></td>
<td>21 (2.0)</td>
<td>5 (23.8)</td>
<td>7 (33.3)</td>
</tr>
<tr>
<td><strong>Decatur</strong></td>
<td>60 (5.6)</td>
<td>1 (1.7)</td>
<td>8 (13.3)</td>
</tr>
<tr>
<td><strong>Dixon</strong></td>
<td>12 (1.1)</td>
<td>6 (46.2)</td>
<td>11 (91.7)</td>
</tr>
<tr>
<td><strong>East Moline</strong></td>
<td>51 (4.8)</td>
<td>19 (37.3)</td>
<td>22 (43.1)</td>
</tr>
<tr>
<td><strong>Graham</strong></td>
<td>31 (2.9)</td>
<td>7 (22.6)</td>
<td>19 (61.3)</td>
</tr>
<tr>
<td><strong>Hill</strong></td>
<td>12 (1.1)</td>
<td>2 (16.7)</td>
<td>8 (66.7)</td>
</tr>
<tr>
<td><strong>Illinois River</strong></td>
<td>52 (4.9)</td>
<td>0 (0.0)</td>
<td>22 (42.3)</td>
</tr>
<tr>
<td><strong>Jacksonville</strong></td>
<td>42 (4.0)</td>
<td>12 (27.9)</td>
<td>11 (26.2)</td>
</tr>
<tr>
<td><strong>Lawrence</strong></td>
<td>11 (1.0)</td>
<td>6 (54.5)</td>
<td>9 (81.8)</td>
</tr>
<tr>
<td><strong>Lincoln</strong></td>
<td>17 (1.6)</td>
<td>10 (58.8)</td>
<td>11 (64.7)</td>
</tr>
<tr>
<td><strong>Logan</strong></td>
<td>86 (8.1)</td>
<td>7 (8.1)</td>
<td>11 (12.8)</td>
</tr>
<tr>
<td><strong>Menard</strong></td>
<td>16 (1.5)</td>
<td>2 (12.5)</td>
<td>13 (81.3)</td>
</tr>
<tr>
<td><strong>Pinckneyville</strong></td>
<td>102 (9.6)</td>
<td>54 (52.9)</td>
<td>72 (70.6)</td>
</tr>
<tr>
<td><strong>Pontiac</strong></td>
<td>14 (1.3)</td>
<td>9 (64.3)</td>
<td>12 (85.7)</td>
</tr>
<tr>
<td><strong>Robinson</strong></td>
<td>28 (2.6)</td>
<td>13 (46.4)</td>
<td>15 (53.6)</td>
</tr>
<tr>
<td><strong>Shawnee</strong></td>
<td>47 (4.4)</td>
<td>3 (6.4)</td>
<td>27 (56.3)</td>
</tr>
<tr>
<td><strong>Sheridan</strong></td>
<td>58 (5.4)</td>
<td>3 (5.2)</td>
<td>16 (27.6)</td>
</tr>
<tr>
<td><strong>Sheridan</strong></td>
<td>141 (13.2)</td>
<td>24 (17.0)</td>
<td>50 (35.5)</td>
</tr>
<tr>
<td><strong>Southwestern Illinois</strong></td>
<td>24 (2.3)</td>
<td>0 (0.0)</td>
<td>3 (12.5)</td>
</tr>
<tr>
<td><strong>Taylorville</strong></td>
<td>36 (3.4)</td>
<td>12 (33.3)</td>
<td>14 (38.9)</td>
</tr>
<tr>
<td><strong>Vandalia</strong></td>
<td>62 (5.8)</td>
<td>5 (8.1)</td>
<td>20 (32.3)</td>
</tr>
<tr>
<td><strong>Vienna</strong></td>
<td>98 (9.2)</td>
<td>13 (13.3)</td>
<td>59 (60.2)</td>
</tr>
<tr>
<td><strong>Western Illinois</strong></td>
<td>18 (1.7)</td>
<td>0 (0.0)</td>
<td>6 (33.3)</td>
</tr>
</tbody>
</table>

39 Per IDOC, as of February 2020, forms related to condition recommendations were updated since this current release cohort, in addition to written instruction to IDOC correctional counselors and field service representatives regarding not recommending EM unless it is statutorily required. Written instruction included how to complete the form (S. Shipinski, personal communication, June 26, 2020).
Electronic monitoring was ordered as a condition of MSR by PRB more frequently than it was recommended by IDOC correctional counselors/field service representatives. For individuals released to MSR who were also ordered to EM by the PRB (n=458), IDOC staff recommended EM in 188 (41.0%) of those cases. There were 28 individuals (4.6%) who IDOC recommended for EM where the PRB did not order EM upon release to MSR.

Chi-square tests were performed to identify if there was a relationship between IDOC recommendations of EM and PRB conditions of EM based on race/ethnicity. There was a statistically significant difference in PRB conditions and race/ethnicity, $\chi^2(2, 1063)=21.23$, p=.000, though this association was generally weak (Cramer’s V=.141). There was no statistically significant difference related to IDOC recommendations for EM and race/ethnicity. Of those individuals released to MSR, 49.9% (n=530) identified as Black and 56.3% of those individuals (n=258) were placed on EM; 35.0% of individuals identified as White (n=372) and of those, 33.6% (n=125) were placed on EM upon release to MSR; 15.1% of individuals identified as Hispanic/Latinx or other and 46.6% (n=75) were placed on EM upon release to MSR. Overall, those who identified as Black, Hispanic/Latinx/Other had a higher proportion of EM conditions compared to individuals who identified as White.

<table>
<thead>
<tr>
<th>Committing County</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cook County</td>
<td>530</td>
<td>49.9%</td>
</tr>
<tr>
<td>Illinois Outside of</td>
<td>533</td>
<td>50.3%</td>
</tr>
<tr>
<td>Cook County</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC administrative data and PRB Orders.
Section 4.5: Recidivism Outcomes for Individuals on MSR

Recidivism on or After MSR Discharge for the Full Random Sample (N=1,065)

Overall, 65.3% (n=692) of the 1,060 individuals in the full random sample with attending system-related information, had at least one arrest on or after their MSR date. Figure 5 provides the percentages of individuals who were rearrested, reconvicted, and recommitted to IDOC on or after their MSR discharge date in SFY16. Fewer individuals in the sample had received a probation sentence on or after their MSR date (n=90, 8.5%).

Figure 5
Percentage of Individuals Who Were Rearrested, Reconvicted, and Recommitted to IDOC On or After MSR Date (N=1,060)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least one post-discharge felony arrest</td>
<td>43.3%</td>
</tr>
<tr>
<td>At least one post-discharge misdemeanor arrest</td>
<td>42.8%</td>
</tr>
<tr>
<td>At least one post-discharge IDOC admit</td>
<td>34.6%</td>
</tr>
<tr>
<td>At least one post-discharge felony conviction</td>
<td>26.9%</td>
</tr>
<tr>
<td>At least one post-discharge misdemeanor conviction</td>
<td>10.7%</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of CHRI data and IDOC administrative data.
Note: Five individuals did not have criminal history information that could be linked (see methods section). Due to hierarchical coding, only the most severe charge is shown in CHRI for each case. Some misdemeanors may not have been counted.

Most individuals in the sample were not recommitted to IDOC for a new sentence or on a technical violation, regardless whether they were ordered to EM upon release to MSR. In total, 369 individuals (34.6%) had any IDOC commitment for a new sentence or technical violation on or after their MSR date (Table 6). Of those 369 that were recommitted to IDOC, 193 (52.3%) were committed for a person offense.40

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40 A person offense is also identified as a violent offense, per the Victims of Crime Act. Individuals who committed a sex offense were excluded from this study. Of the 1,060 individuals, 18.1% were admitted to IDOC on or after release to MSR.
Table 6

Admission to IDOC on or After Discharge to MSR, by Admission Type (N=1,065)

<table>
<thead>
<tr>
<th>Type of Admission to IDOC</th>
<th>None (%)</th>
<th>1 or More (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Sentence</td>
<td>852 (80.0)</td>
<td>213 (20.0)</td>
</tr>
<tr>
<td>Technical Violations</td>
<td>811 (76.2)</td>
<td>254 (23.8)</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC administrative data.

Of the 692 individuals who were arrested on or after their MSR date, 57.2% (n=396) were arrested within 12-months on or after their MSR date; 24.9% (n=172) were arrested between 13 and 24 months on or after their release to MSR. Overall, 82.1% (n=568) of the 692 individuals arrested on or after their MSR date were arrested within 2 years. Figure 6 offers time to rearrest for those who were placed on EM and those who were not. There was no statistically significant difference between those placed on EM upon release to MSR and individuals’ time to rearrest [$\chi^2 (5, 692)=3.14, p=.679$].

Figure 6

Percentage of Total Months to Rearrest on or After MSR Date, by PRB Condition of EM (N=692)

Source: ICJIA analysis of CHRI administrative data and PRB order data.

Chi-square tests were performed to analyze the data on dichotomous recidivism outputs (yes or no) for the full random sample. Cramer’s V was used to identify the strength of that association. There were several statistically significant differences (Table 7). There were no statistically significant differences between individuals ordered to EM (or not) and any post felony arrest(s), misdemeanor arrest(s), felony conviction(s), misdemeanor conviction(s), or a new sentence admission(s) to IDOC.
Table 7
Chi-Square Tests for Difference Between Individuals Placed on EM Upon Release to MSR and Individuals not Placed on EM Upon Release to MSR, by Dichotomous Recidivism Outputs (N=1,065)

<table>
<thead>
<tr>
<th>Variables</th>
<th>$\chi^2$</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any post felony arrest</td>
<td>(1, N=1,065)=0.08</td>
<td>.779</td>
</tr>
<tr>
<td>Any post misdemeanor arrest</td>
<td>(1, N=1,065)=0.01</td>
<td>.991</td>
</tr>
<tr>
<td>Any post felony conviction</td>
<td>(1, N=1,065)=1.38</td>
<td>.240</td>
</tr>
<tr>
<td>Any post misdemeanor conviction</td>
<td>(1, N=1,065)=0.16</td>
<td>.685</td>
</tr>
<tr>
<td>Any post person offense admit</td>
<td>(1, N=1,065)=52.28</td>
<td>.000</td>
</tr>
<tr>
<td>Any post IDOC new sentence admit</td>
<td>(1, N=1,065)=0.14</td>
<td>.710</td>
</tr>
<tr>
<td>Any post IDOC technical violation admit</td>
<td>(1, N=1,065)=19.97</td>
<td>.000</td>
</tr>
<tr>
<td>Any post IDOC admit</td>
<td>(1, N=1,065)=8.42</td>
<td>.004</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC and CHRI data.

Though relatively weak, there was some association between the two groups (on EM or not) and any IDOC admission (Cramer’s $V=.089$), any IDOC admission for a technical violation (Cramer’s $V=.137$), and any IDOC admission for a person offense (Cramer’s $V=.222$) on or after release to MSR, as indicated in the table above.

Of those who received EM upon release to MSR, 39.5% had at least one IDOC admission on or after release to MSR and 60.5% did not. For those who did not receive EM upon release to MSR, 31.0% had at least one IDOC admission on or after release to MSR and 69.0% did not. Overall, there was a higher proportion of individuals who had any IDOC admission on or after release to MSR for those who received EM upon release to MSR compared to those who were not ordered to EM upon release to MSR (39.5% and 31.0%, respectively). Of those who received EM upon release to MSR, 30.6% had at least one IDOC admission for a technical violation on or after their MSR date and 69.4% did not. Conversely, of those who did not receive EM upon release to MSR, 18.8% had at least one IDOC admission for a technical violation on or after their MSR date and 81.2% did not. Overall, there was a higher proportion of those ordered to EM upon release to MSR who were admitted to IDOC for a technical violation on or after their MSR date compared to those who were not ordered to EM upon release to MSR (30.6% and 18.8%, respectively). Lastly, of those ordered to EM upon release to MSR, 27.9% had at least one admission to IDOC for a person offense and 72.1% did not. Of those who were not ordered to EM upon release to MSR, 10.7% had at least one IDOC admission for a person offense and 89.3% did not. Again, there was a higher proportion of those ordered to EM upon release to MSR who were admitted to IDOC for a person offense on or after their MSR date compared to those not ordered to EM upon release to MSR (27.9% and 10.7%, respectively).

Figure 7 shows measures of recidivism among individuals ordered and not ordered to EM by the PRB.
Figure 7
Percentage of Individuals who Exited IDOC in SFY16 with Any Rearrest, Reconviction, or Recommitment to IDOC, by Condition of EM (N = 1,065)

![Percentage of Individuals who Exited IDOC in SFY16 with Any Rearrest, Reconviction, or Recommitment to IDOC, by Condition of EM (N = 1,065)](chart.png)

<table>
<thead>
<tr>
<th>Variables</th>
<th>P-value</th>
<th>χ²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any post felony arrest</td>
<td>0.607</td>
<td>0.26</td>
</tr>
<tr>
<td>Any post misdemeanor arrest</td>
<td>0.551</td>
<td>0.36</td>
</tr>
<tr>
<td>Any post felony conviction</td>
<td>0.850</td>
<td>0.04</td>
</tr>
<tr>
<td>Any post misdemeanor conviction</td>
<td>0.684</td>
<td>0.17</td>
</tr>
<tr>
<td>Any post person offense admit</td>
<td>0.001</td>
<td>11.92</td>
</tr>
<tr>
<td>Any post IDOC new sentence admit</td>
<td>0.353</td>
<td>0.86</td>
</tr>
<tr>
<td>Any post IDOC technical violation admit</td>
<td>0.041</td>
<td>4.18</td>
</tr>
<tr>
<td>Any post IDOC admit</td>
<td>0.113</td>
<td>2.51</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC and CHRI data

Note: These differences do not control for any confounding variables that may mediate or moderate the actual relationship between being ordered to EM and recidivism, such as programs or services received in the community or in IDOC.

Recidivism Outcomes using Propensity Score Matching

When analyzing the data on dichotomous recidivism outputs (yes or no), we found several statistically significant differences (Table 8).

Table 8
Chi-Square Tests for Differences in Recidivism Outcomes Between Individuals Placed on EM Upon Release to MSR and Individuals not Placed on EM Upon Release to MSR (N=560)

<table>
<thead>
<tr>
<th>Variables</th>
<th>P-value</th>
<th>χ²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any post felony arrest</td>
<td>0.607</td>
<td>0.26</td>
</tr>
<tr>
<td>Any post misdemeanor arrest</td>
<td>0.551</td>
<td>0.36</td>
</tr>
<tr>
<td>Any post felony conviction</td>
<td>0.850</td>
<td>0.04</td>
</tr>
<tr>
<td>Any post misdemeanor conviction</td>
<td>0.684</td>
<td>0.17</td>
</tr>
<tr>
<td>Any post person offense admit</td>
<td>0.001</td>
<td>11.92</td>
</tr>
<tr>
<td>Any post IDOC new sentence admit</td>
<td>0.353</td>
<td>0.86</td>
</tr>
<tr>
<td>Any post IDOC technical violation admit</td>
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</tr>
<tr>
<td>Any post IDOC admit</td>
<td>0.113</td>
<td>2.51</td>
</tr>
</tbody>
</table>

Source: ICJIA analysis of IDOC and CHRI data
Though very weak, there was some association between the two groups and any IDOC admit for a person offense (Cramer’s V=.146) and any post IDOC admit for a technical violation (Cramer’s V=.086) on or after release to MSR.

Of those who received EM upon release to MSR, 28.9% had at least one IDOC admission for a technical violation and 71.1% did not have any IDOC admission for a technical violation on or after release to MSR. For those who did not receive EM upon release to MSR, 21.4% had at least one IDOC admission for a technical violation and 78.6% did not have at least one IDOC admission for a technical violation on or after release to MSR. Overall, those who received EM upon release had a higher proportion of admissions to IDOC for at least one technical violation compared to those who did not receive EM upon release to MSR (28.9% and 21.4%, respectively). Of those who were ordered to EM upon release to MSR, 24.6% had at least one IDOC admission for a person offense on or after their release to MSR and 75.4% did not. Conversely, of those who were not ordered to EM upon release 13.2% had at least one IDOC admission for a person offense on or after their release to MSR and 86.8% did not. Overall, there was a higher proportion of individuals admitted to IDOC for a person offense on or after their release to MSR for those ordered to EM upon release to MSR compared to those who were not (24.6% and 13.2%, respectively). It is unknown whether any IDOC commitments on or after MSR release date were violations of an EM device while on MSR; however, as previously noted, some research suggests that EM may produce greater likelihood of technical violations compared to those who are not on EM (Gies et al., 2013; Bales et al., 2010).
Section 5: Discussion and Recommendations

Overall, findings suggest that there is a higher proportion of those admitted to IDOC for a person offense and for a technical violation for those who are ordered to EM, discretionarily, upon release to MSR compared to those who are not ordered to EM upon release to MSR. It is unknown whether any IDOC commitments on or after MSR date were a result of a technical violation(s) related to EM while on MSR, as the data did not include information regarding the specifics of technical violations related to IDOC recommittals or any information on technical violations that may not have resulted in commitment to IDOC.\(^{41}\) While this makes sense, as greater surveillance is likely to detect more violations due to more rigorously enforced compliance monitoring (Gies et al., 2013; Bales et al., 2010), the initial development and purpose of EM was not to increase compliance and detect non-compliance, but to assist in the facilitation of reintegration, building self-esteem, and gaining socially valued skills for justice-involved individuals (Gable, 1986; Gable & Gable, 2005).\(^{42}\) For example, in a systematic review of EM for system-involved individuals on reducing recidivism,\(^{43}\) researchers found heightened surveillance of individuals released from a correctional facility and placed on EM as a condition of release can contribute to increased technical violations (i.e., missing curfew, missing appointments). While these infractions are not inherently criminal in nature, they can, and may often, result in reincarceration for those who may not otherwise pose an increased risk to public safety (Belur et al., 2020).

Previous research findings are generally inconclusive on the efficacy of EM in reducing recidivism for individuals on probation or intensive supervision and those on parole/post-release supervision (Aos et al., 2006; Belur et al., 2020; Bonta et al., 2000a; Bonta et al., 2000b; Finn & Muirhead-Steves, 2002; Reagan, 2017; Renzema & Mayo-Wilson, 2005). Further, other research indicates the potential for disruption and barriers to successfully meeting conditions of release and reintegration of individuals back into their communities (Payne & Gainey, 1998; Bales et al., 2010). Some research indicates limited efficacy of EM on recidivism, specific to certain sub-populations of justice-involved individuals, assessed via actuarial RNA as high-risk to recidivate. However, this includes some indication of a dissipating effects at three years, as well as use of EM for individuals that are already at lower likelihood for recidivism (Gable & Gable, 2005; Gies et al., 2013; Finn & Muirhead-Steves, 2002; Padgett et al., 2006). Further, though limited, some research indicates greater efficacy with the use of GPS compared to RF devices for EM purposes (Gies et al., 2012; Gies et al., 2013) and, if used effectively, can help improve treatment and employment outcomes (Andresen & Andersen, 2014; Bonta et al., 2000a). Further, if EM is to be used as a deterrent to engaging in pro-criminal behavior, the data above suggest it may not be an effective deterrent as overall, a higher proportion of those ordered to EM upon release to MSR were admitted to IDOC, admitted to IDOC for a technical violation, and admitted to IDOC for a person offense on or after release to MSR; however, it is unknown if these recidivism outcomes occurred while an individual was connected to an EM device.

The following recommendations are based on the study findings and additional communications and documentation provided by IDOC and the PRB.

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\(^{41}\) There are 16 standard board orders that bring an individual back to IDOC from MSR/parole (S. Shipinski, personal communication, June 26, 2020).

\(^{42}\) Initial prototypes and use of EM sent positive messages and provided individuals with dual communication to their probation/parole officers (Corbett & Pattavina, 2015; Gable & Gable, 2005)

\(^{43}\) This systematic review also included qualitative information to provide more in-depth understanding regarding the quantitative information provided.
**Recommendation #1:** Implement an actuarial risk and needs assessment (RNA) for IDOC to support supervision recommendations, PRB condition decisions, and IDOC MSR case plans and services. This is a requirement of the CRA. Further, reduce reliance on offense severity and offense type in condition decision-making and supervision levels for both IDOC recommendations and PRB conditions, as offense severity does not equate to level of risk for recidivism in the community (Bonta & Andrews, 2017; Andrews et al., 1990; Stahler et al., 2013).

Surveys indicated no RNA is conducted within IDOC prior to an individual’s release to MSR nor while they are on MSR, though a pilot risk assessment tool created in-house by IDOC is being piloted in two districts. Per communication with IDOC personnel, approximately 20 parole agents monitoring around 1,500 individuals currently use the pilot tool, nominally updated since its launch in October 2019; however, this tool will be retired once the Ohio Risk Assessment System (ORAS) is implemented. In correspondence, the IDOC administration indicated it is awaiting training and implementation of the ORAS (S. Shipinski, personal communication, June 26, 2020). While prior criminal history is one, albeit static (non-changeable) aspect of an RNA, there are several other areas of risk that are cumulatively related to an individual’s risk for recidivism (or future law enforcement contact) (Bonta & Andrews, 2017).

Based on the review of statutes, IDOC and the PRB are required, as part of the Illinois CRA of 2009, to implement and use an RNA (or a risk, assets, needs assessment, RANA) and create policies, rules, and regulations regarding the use of RNAs. The CRA of 2009 states:

> The Parole Division of the Department of Corrections and the Prisoner Review Board shall adopt policies, rules, and regulations that, within the first year of the adoption, validation, and utilization of the statewide, standardized risk assessment tool described in this Act, result in at least 25% of supervised individuals being supervised in accordance with evidence-based practices; within 3 years of the adoption, validation, and utilization of the statewide, standardized risk assessment tool result in at least 50% of supervised individuals being supervised in accordance with evidence-based practices; and within 5 years of the adoption, validation, and utilization of the statewide, standardized risk assessment tool result in at least 75% of supervised individuals being supervised in accordance with evidence-based practices. [730 ILCS 190/10(b)(1)]

Based on review of this Act and a recent auditor general report of PRB and IDOC, IDOC and the PRB have not aligned policies and practices with the CRA (see also Lydersen, 2015). Currently, there are no validated, reliable, RNAs used to create “standardized individual case plans that follow the offender through the criminal justice system,” [730 ILCS 190/10-b(1)(A)] and that an individual case plan should be provided, including those supervised in prison, which is to be based upon: assets, risks, and needs of the individual identified through “the assessment tool as described in this Act” [730 ILCS 190/10-b(1)(A)(i)] and incorporates treatment and “supervision services appropriate to achieve the purpose of this Act” [730 ILCS 190/10-b(1)(A)(ii)]. At the time of this report, IDOC had not adopted a validated and reliable RNA. This also suggests that the PRB may not be receiving scores from an RNA, nor have policies or procedures in place for use of an RNA in condition decision-making. Further, the Parole Division of IDOC has also not

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44 IDOC indicated the same tool was used and validated on 1,000 releasees in 2015; however, how the validation was conducted is unknown and the predictive accuracy and validity of the tool is still largely unknown. While additional information regarding this tool and its relation to risk level was provided, documentation describing findings was not provided.

45 In the Crime Reduction Act of 2009, the risk assessment tool is called a Risk, Assets, Needs assessment, or RANA. A RANA task force was developed in 2010 and concluded in 2010. While no formal report was provided, upon its completion, IDOC did start to use the SPin (Orbis Partners Inc.) though it is unknown if this was the result of the RANA task force as no documents could be found to confirm. However, when that contract ended and IDOC stopped using the SPin is unknown.
adopted an RNA.\textsuperscript{46} Further, the CRA indicates the establishment of a system of graduated responses (or graduated sanctions) to violations, in which:

The system of responses shall take into account factors such as the severity of the current violation,\textsuperscript{730} the supervised individual’s risk level as determined by a validated assessment tool described in this act, the supervised individual’s assets [emphasis added], his or her previous criminal record; and the number and severity of any previous supervision violations. In addition, the system shall also define positive reinforcements that supervised individuals may receive for compliance with conditions of supervision. [\textsuperscript{10-b(D)(iii) and (iv)}]

Available research on use of EM, while limited, indicates EM is most appropriate for those identified as highest risk for recidivism via a validated and reliable RNA.\textsuperscript{47} Risk to recidivate and criminogenic needs and strengths are most accurately identified with a reliable, validated, and locally normed actuarial assessment rather than personal, potentially subjective, discretion, offense severity, and offense type. Consistent with evidence-based policy and practice and the CRA, IDOC institutional staff should provide RNA scores to the PRB,\textsuperscript{48} using individuals’ scores to:

- Identify conditions that target criminogenic needs and potential responsivity factors.\textsuperscript{49}
- Determine intensity of service needs based on risk.
- Better identify individuals in which EM may be effective (Taxman & Dezember, 2018).

Further, actuarial RNAs are research- and behavioral science-based and can help prevent or minimize biases and subjectivity, reduce unnecessary discretion in decision-making, help identify proper and appropriate resources for individuals, and/or increase fairness in the judicial process (Taxman & Dezember, 2018). Additionally, validated, and reliable RNAs can help identify responsivity factors—or barriers to being successful on supervision, including compliance with conditions, treatment, and services (e.g., mental health/stability, language barriers, trauma, motivation, transportation, childcare, etc.).

It also is important that the tool is based on factors directly associated with risk for recidivism (or, the desired outcome, such as risk for institutional misconduct and reentry planning), validating, standardizing, and norming the tool to the local population to improve utility and accuracy (Hamilton et al., 2018; Viglione et al., 2015). The customization of the tool and the ability to select the tool that may be best suited to the population being served and corresponding point in the criminal justice system (i.e. pre-trial, incarceration, reentry, community supervision), can potentially enhance stakeholder buy-in, extended use and sustainability of the tool, and quality of tool classification and utility (Hamilton et al., 2018; Viglione et al., 2015). Further, it is important to consider how the RNA will improve or enhance communication between agencies, resulting in better outcomes for its clients (Hamilton et al., 2018).

\textsuperscript{46} Twenty parole agents are using a risk assessment created by the department, though it has not been validated or identified as reliable per standardization, norming, and inter- and intra-rater reliability tests (S. Shipinski and J. Garnett, personal communication, June 26, 2020). Once IDOC moves to the ORAS, they indicated this risk assessment tool will be resigned.

\textsuperscript{47} Limited research indicates EM is most appropriate for high-risk, gang-involved individuals and individuals convicted of a sex offense.

\textsuperscript{48} Based on the state’s current move to the ORAS or what Illinois is calling the Adult Risk Assessment (ARA), it is important that the appropriate ORAS tool is used to assess. While IDOC should be using the ORAS tool at prison intake for institutional decision-making, a separate ORAS tool for reentry prior to release to MSR also should be used to prepare for the individual’s PRB hearing for conditions (or release, if convicted under indeterminate sentencing guidelines). In addition, the ORAS community supervision tool should be used by parole agents in the Parole Division. IDOC institutional and parole divisions are best equipped to complete RNAs.

\textsuperscript{49} Those factors that may impede an individual’s ability to successfully comply with conditions, successfully reintegrate into their communities, and successfully complete supervision, such as mental health concerns, intellectual and cognitive functioning, language barriers, transportation, among others (see Bonta & Andrews, 2017).
The Parole Division of IDOC indicated they were piloting a risk assessment tool that assessed factors that are largely static in nature (factors that are not amenable to change and do not identify criminogenic need areas that are directly associated with reoffending risk). The assessment was in use by approximately 20 parole agents supervising about 1,500 releasees (S. Shipinski, personal communication, June 26, 2020). The reliability, validity, and accuracy of the instrument in its ability to determine risk for recidivism, appropriate supervision levels, and appropriate linkage to treatment and services is unknown, which could result in adverse or unintended effects that may be detrimental to an individual, including inaccurately identifying risk level, resulting in over- or under-supervising individuals.

It would be more efficient and effective for IDOC to begin training and implementation of the appropriate ORAS tools (given the different decision points within the system, for reentry, and in the community), as it has a wealth of research on its validity and reliability. Further, IDOC has already identified that once training and implementation of the ORAS occurs, the current piloted assessment will become non-existent (S. Shipinski, personal communication, June 26, 2020). The ORAS needs only to be validated and normed or standardized to the Illinois MSR/parole population (for community supervision) and, separately, on the ORAS institutional and release tools for individuals incarcerated in an IDOC facility.

Careful considerations must be made in tool development, implementation, and use, and its actual utility, validity, and reliability (Taxman & Dezember, 2018; Bonta & Andrews, 2018). It is unknown whether the risk tool in use incorporates dynamic risk factors (criminogenic needs), which are necessary for parole agent case planning to link individuals on MSR/parole to appropriate services and the intensity (or “dosage”) of treatment and services needed to impact behavior change, based on factors most highly associated with risk for recidivism. Further, while the Service Planning Instrument (SPIn), an RNA previously used within IDOC correctional facilities, it is unknown how frequently SPIn scores were provided by IDOC correctional counselors or field service representatives within their clinical recommendations (S. Shipinski, personal communication, June 26, 2020). It is unknown what and how much information is provided to the PRB for each individual hearing and whether and how long the SPIn has been out of use by IDOC (S. Shipinski, personal communication, June 26, 2020).

The use of RNAs are particularly important for a variety of reasons, but most notably for:

1. IDOC in developing individualized, evidence-informed housing and security placement decisions, understanding risk for institutional misconduct and programmatic and services decisions within IDOC institutions based on the findings of the RNA assessment(s).
2. IDOC in developing evidence-informed release plans (from IDOC correctional counselors and field service representatives) that are evidence-informed based on an individual’s highest criminogenic needs (or risk factors known to be most highly associated with risk for recidivism).
3. PRB in making evidence-informed release decisions and appropriate and relevant condition decisions that minimize bias and subjectivity and providing a basis for the conditions placed on individuals being released to MSR or parole.
4. IDOC Parole Division in creating individualized case plans in the community that target the criminogenic needs—or risk factors known to be most highly associated with risk for

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50 This was communicated by Sharon Shipinski and Chief Jason Garnett and was additionally used in the parole agent survey in which a handful of individuals indicated they were part of the piloting of the risk assessment creating by the Parole Division of IDOC.
51 No date or time-frame was provided as to when training and use of the ORAS may occur. It is possible that a procurement and contract process may be ongoing. For information on validated and reliable RNA tools, see https://www.cpoc.org/sites/main/files/file-attachments/johnson.pdf
52 For information on validated and reliable RNA tools, see https://www.cpoc.org/sites/main/files/file-attachments/johnson.pdf
reoffending—to reduce these risks for potential recidivism while in the community and identify how to build on individuals’ strengths and assets (see Bonta & Andrews, 2017; Taxman, 2018).

It is further important as effective conditions and case plans based on an objective, actuarial assessment of an individual’s risk, needs, and assets (or protective factors) can decrease likelihood of recidivism (Bonta & Andrews, 2017; Taxman, 2018), compared to that of gut instincts or more subjective assessments (e.g. interviews, professional judgment), which may pose issues of inconsistency in assessing risk and needs, misalignment of resources, and potential bias and/or stereotyping (intentionally or otherwise) (Taxman & Dezember, 2018). Further, the foundation of evidence-based decision-making and effective supervision is the use of a validated, reliable RNA and adherence to the Risk-Need-Responsivity (RNR) model of supervision (PEW, 2020). Therefore, current release decisions and conditions are not based on evidence-informed and evidence-based practices.

The Administrative Office of the Illinois Courts recently implemented the ORAS,53 which includes nine separate instruments for use in various contexts and settings, including institutional and community settings. Risk and needs assessments must be conducted while an individual is incarcerated to facilitate appropriate programming, prior to release, and once in the community, as risk and needs at these points are likely to be different. These tools should be validated regarding the IDOC population and IDOC parole/MSR population, a standard practice for adopting and implementing RNAs (Johnson & Hardyman, 2004).

**Recommendation #2:** Allow PRB to place individuals onto EM based on statutory requirements, providing the IDOC parole agents limited, discretionary use of EM to assist non-compliant releasees; limit PRB discretionary EM use to cases where substantive reasons justify its use, and that use is uniformly applied and documented. The IDOC Parole Division should also consider whether and how EM can be used to enhance rehabilitative goals, including whether EM may be impeding an individual’s compliance and ability to successfully complete conditions of supervision, as the current study data indicates it is not necessarily an effective deterrent to engaging in pro-criminal behavior.

Little is known and understood about how the PRB makes MSR condition decisions. Without a validated, reliable RNA, the PRB is limited in its ability to make objective, informed, and evidence-based decisions regarding discretionary EM use for individuals being released from an IDOC facility to MSR. While research is limited, there is some evidence to support EM efficacy with highest risk system-involved individuals (Bales et al., 2012; Gies et al., 2012; Gies et al., 2013; Padgett et al., 2006). Further, by initially placing individuals on EM upon release into the community, parole agents are left without a potential redress for non-compliance, a point that was heavily noted in parole agent surveys. Overuse of EM may limit tools available to parole agents (or rewards through early removal of EM), in addition to potentially creating more barriers for individuals’ successful reentry and reintegration into their communities. Qualitatively, research indicates those placed on EM feel stigmatized or shaming effects, felt their relationships were negatively impacted (i.e. stress, inconvenience, cost), privacy issues (e.g. not being able to get away from family or roommates when desired), social restrictions as a result of movement restrictions (i.e. not being able to go to the store or take a walk when desired, inability to meet up with support networks, friends), and obtaining and/or retaining employment due to EM’s visibility, not being able to stay late when needed, or having work interruptions from law enforcement calls (Bales et al., 2010; Gainey & Payne, 2000).

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53 For youth, the Ohio Youth Assessment System (OYAS) is being implemented. In Illinois, the ORAS is called the Adult Risk Assessment (ARA) and for youth, the OYAS is called the Juvenile Risk Assessment (JRA).
In a memo dated July 15, 2019, to IDOC Acting Director and Chief of Parole, drafted in response to the Spring 2019 legislative session, the PRB outlined changes to conditions of release and compliance reporting for individuals released to MSR/parole and placed on EM as a condition (Appendix C). The memo described intentions for changes and clarified the change to 12-hour movements for individuals placed on EM as a condition of supervision (discretionary use). The memo included an example document for compliance reporting for individuals placed on EM or GPS, which provided IDOC parole agents with another avenue to secure early removal of EM or GPS, in addition to parole agents’ current ability to do this through PRB amendment order requests. However, the compliance report had not been used by parole agents at the time of this report, per IDOC and the PRB.

In survey findings and personal communication with the PRB and IDOC, EM with 12-hour movements was described as merely a “curfew monitor” for individuals, creating a span of 12 hours that may or may not be structured and could be done without EM. Curfew is not specific to those only on EM; however, it eliminates the issue related to timely approvals for movement. Parole agents indicated that the new policies regarding 12-hour movements eliminate the usefulness of EM as “that defeats the purpose of what EM is to be used for.” Agents said, “You can’t monitor an offender with that much movement per day,” and, “a ‘blanket policy’ regarding allowable movement is a very poor decision.”

Despite the parole agents’ reaction to the change, it is also largely unknown how allowing 12-hour movements impacts EM (and its efficacy or lack thereof) and individuals’ successful community reentry. This is something outside the scope of this report but should be evaluated, as merely placing an individual on EM as a condition of release does not provide any understanding as to how parole agents relay policies, expectations, and rules other than documents provided to their clients, nor parole agents’ actual application of EM for that individual on MSR. Further, incorporating feedback from advocates, information on parole agents’ use and understanding of EM’s application and purpose, and feedback from individuals directly impacted by EM, particularly as it relates to societal reintegration, would be important to gather for this purpose as well.

The PRB and IDOC, as well as those directly involved in reentry planning and community supervision, should be in concordance regarding terminology—application of specific conditions (re: electronic monitoring, home detention, and electronic home detention)—so that their applications and uses are consistent throughout IDOC (including parole districts and agents) and among the PRB; and specifically, for those individuals responsible for overseeing individuals in the community with the ability to limit, restrict, or otherwise grant movements. Further, because EM devices are operated by a third party through a monitoring center, another entity must be included in the discussions for policies and procedures related to EM application, use, and policies, particularly as it relates to approved movements and violation of those movements. As DeMichele notes, “these tools [EM via RF or GPS] are all dependent on humans and only work as well as the infrastructures supporting them and the people operating them” (2014, p. 396). In addition, these tools are not infallible. They can malfunction, including breaking and failing to report correctly. An overreliance on EM devices as the “silver bullet” for compliance can decrease the one-on-one contact with the supervising officer, potentially creating complacency in actual check-ins with clients, and increasing workload for supervising officers in the way of data on movements, responding to alerts (real or due to a malfunction), in addition to already large caseload sizes (DeMichele, 2014). It is suggested that treating EM as a program rather than a technological tool can create unintended negative consequences; rather than finding ways to catch people when they are non-compliant, EM

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54 This is based on the discretionary use of EM and GPS and not related to the use of EM or GPS that would go against Illinois statute for specific offenses.
should be considered for its ability to improve long-term outcomes (DeMichele, 2014; Corbett & Pattavina, 2015;).

Additionally, imperative to this study and the understanding of what EM is, as DeMichele (2014) notes that, “GPS, radio-frequency devices, and other forms of electronic monitoring are only tools that officers can use,” and that, “researchers and policy makers need to step away from treating these tools as programs or strategies” (p. 396). Moreover, these tools can increase an officer’s job workload and costs related to supervision, with the potential for both positive and negative effects of the tools’ use (DeMichele, 2014; DeMichele & Payne, 2009; Gies et al., 2013). It can increase a parole agent’s workload related to receiving and verifying movement requests, continually going back and forth to the PRB, and the requirements necessary to effectively and consistently monitor and check for EM related technical issues or violations of EM. For example, one parole agent indicated that EM and the process for EM placement and removal, “…is more of a hindrance to me than to the offenders,” while another parole agent indicated, “it is more of a hassle than it’s worth;” and that, “as currently used [sic] it is a liability to the agents, and the system.”

The overall purpose of EM, at its impetus, was for rehabilitative purposes—where one could track an individual’s location while providing a means for two-way communication (Corbett & Pattavina, 2015). However, since the 1980s, EM has been punitive in nature (Corbett & Pattavina, 2015; Kilgore, 2012). Research and information from the parole agents survey identifies one potential, yet understudied use, of EM—to help support an individual to come back into compliance (from non-compliance with conditions of supervision), using it as a last resort prior to revocation (DeMichele, 2014). Placing individuals on EM upon release may send the message that they are already not in compliance or that, somehow, putting an individual on EM makes them more compliant (though there is limited research to indicate this). Electronic monitoring does not provide “intrinsic supervisory powers,” may provide minimal information as to where an individual is (or where they are not) and does not provide information relevant to what an individual may be doing, prosocial or otherwise (DeMichele, 2014, p. 396).

The efficacy of the 12-hour movement policy is unknown outside of likely decreasing individual movement requests. The policy also hampers the ability for parole agents to restrict movement when appropriate and necessary. At the same time, too much discretion given to parole agents ability to restrict movements may also inhibit an individual’s ability to reintegrate into their communities and successfully complete their release supervision and attending conditions (Payne & Gainey, 1998; Bales et al., 2010). Further, what is known about EM indicates, “little appreciable effect on recidivism rates” (Belur et al., 2020, p. 2). While EM has generally been identified as cost-effective, those savings have been tied to EM use in lieu of jail or prison, as it is generally more costly than traditional community supervision, but less than incarceration (Aos et al., 2006; DeMichele, 2014).

**Considerations for Parole Agent Use of EM**

Electronic monitoring, as currently used, does not serve rehabilitative goals, or substantially impact recidivism, based on the findings from the statute, policy, and procedure reviews; survey findings; and administrative results. Therefore, it is important to understand how EM may be used to enhance other community correctional programming and practices that support behavior management and change, as the current study suggests it may not be an effective deterrent to engaging in pro-criminal behavior. However, little research is available around EM’s utility in achieving rehabilitative goals. More rigorous, substantive research is needed in this area if it is to be a rehabilitative tool, including how best to implement the technology in a way that increases compliance and supports prosocial behavioral change. Some research suggests there is potential for utility when used appropriately and with fidelity to
contingency management\textsuperscript{55} and behavioral management principles. Specifically, EM used as a method of delivering positive reinforcement, positive punishment, and negative punishment could be successful (Corbett & Pattavina, 2015).

### Reinforcement, Punishment, and Theory

#### Operant Conditioning

*Reinforcement* – rewarding outcomes of desired behavior; helps in shaping behavior

- Positive reinforcement – “adding” something that is pleasant or desired to encourage continued behavior
- Negative reinforcement – “taking away” or subtracting something that is unpleasant or undesirable to encourage continued behavior

#### Classical Conditioning

*Punishment* – an aversive condition to eliminate some undesirable behavior

- Positive punishment – “adding” something that is undesirable or unpleasant for the individual
- Negative punishment – “taking away” or subtracting something that is desirable or pleasant for the individual

#### Social learning theory and differential association theory

*Differential association theory* – posits that criminal behavior is learned in interaction with other people and intimate personal groups. Further, that criminal activity results from an excess of favorable definitions of law violating, and that these learning mechanisms are similar to other ways we learn things.

*Social learning theory* – building upon differential association theory, social learning theory posits that behaviors are learned through observation and imitation, and vicarious reinforcement – or seeing the rewards and consequences of others’ behavior. Further, this theory posits that learning is a cognitive process that occurs within environmental and social contexts and that reinforcement plays some role in learning, though is not fully responsible for learned behaviors.


However, positive punishment, such as adding EM to bring an individual under supervision back into compliance if they are currently non-compliant with their conditions of supervision, is insufficient in rehabilitating justice-involved individuals because it merely acknowledges an unwanted or undesirable behavior but does not sufficiently provide support or teach the individual what to do instead (Corbett & Pattavina, 2015; Van Voorhis & Salisbury, 2016). Research on the use of operant conditioning—or use of reinforcements—has been shown to be more effective in teaching new, more prosocial behaviors for justice-involved individuals, particularly compared to classical conditioning (or punishments) (Van Voorhis & Salisbury, 2016).\textsuperscript{56} For example, Pattavina et al. (2010) noted that with traditional EM usage, positive reinforcement for compliant behavior is only provided to individuals during infrequent contact meetings, and thus, the effect of EM as a reinforcement is weakened compared to its use as a

\textsuperscript{55} Contingency management includes the use of reinforcements or rewards for engaging in positive behavior and meeting specific behavioral goals (Abadinsky, 2018).

\textsuperscript{56} See also Spiegler & Guevremont (2010) for best practices in using reinforcement and punishment, as this goes beyond the scope of this report.
reinforcement provided in real-time. Instead of delaying positive reinforcement, individuals on EM with a mobile connection could be sent motivational messages encouraging compliant behavior, particularly at times where they are at highest risk for relapse (Pattavina et al., 2010). Therefore, the researchers suggest that EM with GPS monitoring and a mobile connection could be used as a notification system in which individuals are texted appointment reminders, alerted to nearby job opportunities or treatment services (at least until the individuals are able to strengthen their own skillsets), and sent motivational messages to reduce recidivism and supervision failure (Corbett & Pattavina, 2015). With research, this could prove as one potential use of EM for individuals released to MSR or parole. Negative reinforcement could be applied by parole agents via early removal of EM if ordered as a condition of release to MSR/parole. Though the avenue of early removal of EM exists for parole agents, its use is limited (Table 9).

Table 9
Parole Agent Requests for Adding and Early Removal of an EM or GPS Device, 2019

<table>
<thead>
<tr>
<th>Parole Agent Requests: EM/GPS</th>
<th>Electronic Monitoring</th>
<th>GPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adding EM:</td>
<td>559</td>
<td></td>
</tr>
<tr>
<td>Adding GPS:</td>
<td></td>
<td>83</td>
</tr>
<tr>
<td>Removing EM:</td>
<td>138</td>
<td></td>
</tr>
<tr>
<td>Removing GPS:</td>
<td></td>
<td>14</td>
</tr>
<tr>
<td><strong>EM Total:</strong></td>
<td><strong>697</strong></td>
<td><strong>97</strong></td>
</tr>
</tbody>
</table>

Source: Data provided by the Illinois Prisoner Review Board Order Requests.

However, and frequently cited in criminal justice research decision-making, is understanding that decision-makers for EM may over-place individuals upon release to EM/GPS and/or over-revocate individuals based on a continuum of less to more serious violations to be risk averse (Laskorunsky et al., 2018). Findings regarding placement on EM as a condition set by the PRB may indicate over-placement of individuals to (discretionary) EM upon release to MSR; however, this is largely unknown as the PRB has not identified policies and procedures, other than those in statute, for when and why EM is used for individuals being released into the community from an IDOC facility. Further, comments from open-ended questions on the parole agent survey indicate, “[EM should] only be used as a sanction for non-compliance...not implemented for new releases except for those required by statute,” and that the state should, “Eliminate it” and “Get rid of it all together [sic]. It is not an effective deterrent for most parolees that are required to be monitored.” In addition, agents reported “there is no consistency in who qualifies for EM and who doesn’t.” Though limited in responses and not generalizable, of 10 respondents, 70% indicated they were extremely dissatisfied with the PRB process of identifying EM placement for individuals being released to MSR. While this study could not identify the potential for over-revocation of individuals, it is possible to analyze PRBs’ decisions to put more restrictions on individuals upon release or in a higher revocation rate for those who must go back to the PRB due to a technical violation(s) (in addition to low-release decisions for those sentenced under indeterminate sentencing structures) as possible identification of risk aversion rather than best practice.

Recommendation #3: Develop more transparent policies and processes related to IDOC correctional counselor and field service representative recommendations, limiting recommendations to those that are supported by actuarial and clinical assessments, with offense information used for statutory release and condition purposes. Similarly, develop more transparent policies and processes related to PRB condition setting, limiting conditions to those that are related to actuarial assessments or, minimally, professional structured judgment tools. At minimum, conditions should require a reason or purpose, preferably grounded in evidence/research, as indicated in the CRA.
For the discretionary use of EM, there are no requirements or policies that indicate when, who, or how the PRB should make these decisions, aside from the use of an RNA and adherence to evidence-based practices per the CRA. The same is true for policies and practices for parole agents’ application of EM upon its order from the PRB (except for those statutorily indicated). Based on data from PRB orders, when there was an indication of why someone was being placed on EM, the most common reasons were due to

- Criminal (and/or juvenile) arrest and conviction history (largely unspecified).
- the current or instant offense (largely unspecified).
- A Class 1, Class X, or Class M offense (instant offense or unspecified).
- Variations (aggravated or otherwise) of residential burglary, robbery, home invasion, DUI, battery, firearm(s) arrest(s)/conviction(s)/history, assaults (among some others).
- An active order of protection or violation of an order of protection (ICJIA analysis of PRB order data).

This is supported by a Sentencing Policy & Advisory Council (SPAC) report which indicated when justifications for EM were provided (by either IDOC staff or the PRB), the reasons were not universally applied in all cases (Illinois SPAC, 2019).

Based on our surveys and review of PRB orders, many of the recommendations provided by IDOC correctional counselors and/or field service representatives (aside from the actual conditions set by the PRB) had limited clinical or actuarial assessment information and/or program information. More frequently, these recommendations included information on an individual’s criminal and/or juvenile history or related to current offense (n=383, 36.0%), with limited clinical information. The 383 individuals who had IDOC recommendations that consisted of criminal/juvenile histories excludes instances in which the current or instant offense\(^{57}\) is mentioned; this would increase the number and percentage of offense information reported in IDOC’s “clinical” recommendations. While this is otherwise included in a master file provided to the PRB, it may be beneficial for IDOC correctional counselors and/or field service representatives to provide a more clinical or assessment-based set of recommendations that exclude those tools that are otherwise non-rehabilitative in nature (e.g., EM, GPS, electronic detention) and other non-clinical information that is/can be provided in individuals’ master file.\(^{58}\) This also includes the recommendation of close supervision, as this, per CRA, should be based on a validated RNA.

As mentioned previously, TCU scores have some inconsistencies in when substance use disorder treatment is recommended and/or ordered by the PRB as a condition; there is limited information on the level of intensity or service recommended for substance use disorder treatment, which may be of more assistance to the PRB when making conditions for substance use disorder treatment. Further, it is important to note that programming and treatment for substance use, mental health, or other cognitive and/or behavioral programming within an institution does not negate the need for those same services upon release from the institution, as the setting has changed for that individual to one that may be more

\(^{57}\) An instant or current offense is the offense for which that individual was incarcerated.

\(^{58}\) Electronic detention, or electronic home detention, per 730 ILCS 5/5-8A-4, is a form of custody with the requirement that individuals remain within the inside or property boundaries of their residence at all times during hours indicated by the supervising authority. People who are on MSR are not in the custody of IDOC but are subject to the department’s supervisory authority. However, this may include approved movement from the inside or property boundaries for instances related to employment or employment seeking (approved by the court), treatment and services being received (approved by the court), education or other programs (approved by the court), regularly scheduled religious services (approved by supervising authority), participation in community work release or community service (approved by supervising authority), and/or for any other compelling reason consistent with public interest (approved by the supervising authority).
risky or require more support when it comes to community reintegration (Clark et al., 2016; Duwe, 2017; Rydberg et al., 2013).

**Recommendation #4**: Create an electronic database for PRB orders to better understand PRB decision-making, processes, and condition-setting, revocations, and other order information. This includes development of performance indicators to illustrate how EM—among other conditions—are being used, including supervision outcomes and potential unintended impacts on those outcomes. This further includes the incorporation of interviews and information from those directly impacted, negatively or positively, by EM.

While most PRB orders were legible, we found a substantial amount of illegibility when there were handwritten notes or comments on the PRB order. Further, we had to hand-enter PRB order data from PDF scanned forms into an Excel spreadsheet to identify who ordered to on EM upon release to MSR, among other conditions and release requirements. To provide, minimally, descriptive information regarding individuals incarcerated in an IDOC facility and their release decisions, the PRB should maintain an electronic database, one that preferably connects or is incorporated with IDOC’s current data management system, Offender360 (O360) or can be connected through individual’s IDOC numbers.

While performance measures are not indicative of efficacy of programs, practices, or in this case, tools (as EM is a technological tool and not a program or practice), measures can be used to understand the landscape of what is being provided to individuals upon release into the community from an IDOC facility. The PRB created new PRB order documents, and recently approved by the PRB Chairman, Chief Counsel, and Chief of Program Operations, to improve clarity in the orders (PDF fillable forms that can be used for data entry or data points that could be incorporated into O360, including definitions of conditions). The Chief Counsel of the PRB, stated,

> It is important to have transparent and clear set of guidelines and definitions for these orders because due process is best served by making sure that expectations and the goals and restrictions being set are clear and understood from the outside. (J. Sweat, personal communication, June 29, 2020)

The recently approved version of these documents is provided in Appendix D.

The Governor’s Office of Management and Budget (GOMB) inquired about what measures could be collected to better understand how EM is used and its potential impact on individuals being supervised upon release from IDOC. If the authority for EM placement remains with the PRB, the PRB should be the entity collecting this information. If the authority of EM changes to the Parole Division of IDOC, then it should be the entity collecting this information. Both entities can collect data relevant to their respective positions. For example, the PRB could collect data based on orders whereas parole could collect data on order requests for adding or removing EM, reasons for this, and technical violations associated with EM violations or other violations while on EM (it is likely that parole keeps information on technical violations, in general). Some potential performance indicators to collect on a regular basis for EM could include:

- Demographic and offense information related to individuals placed on and not placed on to EM upon release into the community (i.e. age, race/ethnicity, offense class, offense type, arrest history, IDOC history, institutional misconduct).
- Length of time an individual is connected to EM (in addition, looking to see how length of time may impact risk for recidivism or not).
• Number of parole agents requesting amendment orders to enact EM for an individual they are supervising and reasons.
• Number of parole agents requesting amendment orders to disengage EM early for an individual they are supervising and reasons.
• Purpose of EM placement upon release to the community.
• Purpose of EM placement while in the community.
• Other quality-of-life indicators such as educational/vocational attainment, employment, (socio-emotional) skill development, stable housing, prosocial recreational/leisure activities, and/or supports in the community.
• Number of recommitments based on EM violations and number of recommitments based on other violations.
• The frequency with which EM violations result in recommitment to IDOC and attending descriptions of EM-related violations (what they were doing when they violated their EM movement).
• Number of parole/MSR conditions placed on an individual at any one time, as more conditions can increase recidivism (Breetzke & Polaschek, 2018)
• Collecting RNA information to identify, more generally, highest needs among individuals under MSR or parole supervision, with reassessment every six months to identify any changes in risk and needs.
• Frequency (or number of) parole agent contacts and provider contacts.
• Dosage and intensity of services received in the community (number of hours per week, number of weeks, criminogenic need or responsivity factor being targeted).

Further, there are several measures identified in the Crime Reduction Act of 2009, specifically 730 ILCS 190/10(f).

While this list is not exhaustive, it can provide a good start to get a better understanding related to who is placed on EM, how it may impact them—negatively or positively—and any potential issues regarding EM use/application. In addition, (re)evaluation is vital to continuously understanding the use of EM post-incarceration, its impact, and whether it is having the intended effect—in theory—would be recidivism reduction and increase of compliance (if looking to deter individuals). However, as noted, use of EM as a deterrent is not necessarily effective as currently used, and consideration for how EM can be used as a rehabilitative technology is important and whether discretionarily ordering an individual to EM serves a legitimate purpose. This is especially relevant given the limited reasons behind the discretionary placement of individuals to EM upon release to MSR. Continuous evaluation also would provide for quality assurance on EM performance and application, helping to identify, clarify, and revise the use and purpose as the technology and population evolves. This information should be gathered and discussed by both the PRB and parole, as ordering an individual to EM is merely a condition whereas parole agents are responsible for the actual supervision, instruction, and application of EM in the field that can directly impact individuals’ outcomes. The Robina Institute is a good place to start in looking for information, research, policies, and procedures regarding measuring and identifying appropriate measures for EM and PRB decision-making. Most important is the collaboration, communication, and data sharing between IDOC and the PRB for EM application, use, and rules to identify how information can be shared on both ends to create more informed processes and decisions. The collaboration could enhance efficacy and efficiency in the flow of information and the clarity of information among these agencies, but also between administration, supervisors, line staff, board members, other stakeholders, and individuals released into the community regarding expectations, smoothing out the reentry process for both entities.
This also includes getting a better understanding as to how parole agents use EM for those released to their supervision.
Section 6: Study Limitations

First, data was a limitation. We specifically chose individuals released to MSR from SFY16 who were initially admitted direct from court; this limits the analyses above to those who are only directly admitted from court, generally on their first commitment (99.7% had no prior IDOC commitments). While this provides for a “blank slate” to look at the impact of EM and recidivism, it limits the generalizability by excluding those who were discharged and recommitted, those recommitted on a technical violation, or other ways an individual may be recommitted or committed to IDOC. Future research should consider the different types of admits and releases in relation to EM, potentially looking at any new sentence to IDOC admissions rather than only direct from court admissions. Further, future research could analyze those individuals who are released from IDOC on a technical violation who are placed on EM or specifically analyze those individuals whose release from IDOC stems from a technical violation related to EM. What makes the ability to repull this data and rerun the current analyses difficult is that PRB orders are currently in the form of PDF scanned files, requiring hand-entry of all PRB order information to identify who was or was not placed on EM upon release from an IDOC institution.

The inability to pull PRB data also was a limitation as they are not collected in a database or provided in an easily usable format. Hand-entering of data opens the door to possible human error. While this could be true for a database as well, there may be better protocols in place in a web-based or electronic database rather than hand-written PDF forms scanned for data entry. Further, some of the PRB orders were illegible or missing necessary information. For example, 262 (24.6%) of PRB orders for this sample did not identify a “Board Action” (MSR approval, release prior to hearing, or statutory parole approved).

Another limitation was the response rates for both surveys. With significant attrition, the survey information was rendered non-generalizable to IDOC staff or parole agents, but potentially non-generalizable to the total number of individuals that submitted the surveys due to small sample size. Low response rates are common among organizational surveys, including criminal justice organizations, compared to surveys distributed to the general population (Baldauf et al., 1999; Baruch, 1999; Tomaskovic-Devey et al., 1994; Taxman et al., 2007).

Another limitation was due to the time-frame in which this study was conducted. While the study was to be started in the Fall 2019, an intergovernmental agreement between ICJIA and GOMB did not commence until February 2020, resulting in an extremely limited time-frame in which to conduct this study. This ultimately limited our ability to talk to individuals on MSR or parole and their families, gaining their insights into the use of EM, its impacts, and its utility from their perspective. Future research should incorporate those affected by these policies, positively or negatively. In addition, future research should evaluate the actual application of EM for individuals supervised by parole agents, as the actual application on the ground of EM once ordered by the PRB is of limited knowledge.

Lastly, due to legal concerns of the PRB, we were unable to talk to or survey PRB members. This significantly hampered our ability to know or understand policies, procedures, and processes regarding how and why certain conditions are ordered for individuals. Therefore, most of the PRB-related information comes from Illinois statutes, the PRB website, PRB orders provided by the PRB, and other publicly available documents. Seeing as the PRB is the entity charged with making conditions for individuals released to the community, including the decision of EM, it would have been vital to get insight into the group of individuals that make these recommendations. However, recommendations

59 While more time would have been extremely beneficial to a more thorough and comprehensive understanding of EM use for individuals released to MSR, it is unknown what impact COVID-19 would have had on our ability to conduct interviews with impacted individuals and families, depending on when these would have been conducted. However, it is likely these could have been modified to phone or video interviews.
below may provide for more transparency and understanding on policies, processes, and procedures related to PRB decision-making for individuals being released into the community from an IDOC facility.
Section 7: Conclusion

The present study filled a gap in knowledge regarding EM use in Illinois. A document review revealed the PRB has the statutory authority over EM—whether by ordering an individual to EM upon release from an IDOC institution, placing an individual back on EM per a parole agent request, or early removal of EM per a parole agent request, in addition to MSR and parole revocation decisions and overall condition setting. While the PRB has overarching authority over EM per statute, the current evaluation is in accordance with SPAC’s conclusion that neither IDOC nor the PRB has sole authority, or has taken sole authority, for the implementation of EM or its practical application on the ground. This includes its discretionary application, use, rules, and policies, especially as it relates to what actually occurs between parole agents and their clients. We, too, could not identify regulatory consistency in the application of EM for the PRB nor how those released to MSR with the condition of EM are being supervised in the community. Clearer guidelines and policies as they relate to parole agents’ use, including policies regarding restriction of movement, are necessary to create transparency and clarity regarding expectations related to EM for individuals released to MSR. Further, clarity in legislation could better differentiate the roles and responsibilities of IDOC and the PRB.

Though limited in response rate and completeness, we analyzed surveys of IDOC correctional counselors and field service representatives—those responsible for making recommendations to the PRB regarding conditions of supervision and general “clinical” recommendations—and parole agents charged with supervising individuals upon release into the community. Among IDOC correctional counselor and field service representatives, the individual’s current charge was the most important factor in making condition recommendations. Neither the Parole Division of IDOC (parole agents) or IDOC correctional counselors and field service representatives use a validated, reliable RNA.

We analyzed many sources of administrative data to offer information regarding the use of EM and EM’s impact on recidivism outcomes. Most frequently, individuals in the final random sample (placed on EM and not placed on EM) (N = 1,065) had prior felony and misdemeanor arrests as well as prior felony convictions and 66.4% of the total sample had at least one arrest on or after their MSR discharge date. When conducting analyses on the full random sample, a higher proportion of individuals of color were ordered to EM upon release to MSR compared to their White counterparts. PSM was conducted, there were some differences on recidivism outcomes between those placed on EM and those not on EM who exited IDOC in SFY16 on a direct from court admission. Though weak associations, those placed on EM had a slightly higher proportion of post-discharge IDOC admits for person offenses and IDOC admits for technical violations on or after release to MSR based on the PSM analyses. There was no difference regarding race/ethnicity, as individuals in each of the groups for the PSM analyses were matched on race/ethnicity to create groups that were as equal as possible on a variety of measures.

While this report provides a wealth of knowledge largely unknown in Illinois, information remains unknown on PRB decision-making, input from impacted individuals and families, and MSR technical violations and use of EM by parole agents. It is also important for IDOC and the PRB to create a more collaborative relationship that provides for data sharing necessary to make evidence-informed decisions while enhancing compliance with the CRA. Further, implementation of policies and procedures should be discussed between IDOC and the PRB to create a more fluid, efficient, and effective process of communication between the two entities and the individual being released from IDOC to MSR, as “poor implementation can make things worse and add to the confusion, doubt, and uncertainty, leading to a lack of support among staff” (Burrell, 2018, p. 40).

Future research should include interviews and/or focus groups with parole agents, individuals on MSR, individuals who have been subjected to EM whether upon release or at any point in their post-release supervision, and, if possible, with PRB members. This report provides limited information on how
individuals placed on EM view the tool, including positive or the negative aspects. The lack of voice provided to individuals under MSR or parole supervision who are or have been placed on EM limits the findings of this report, as does the limited information related to parole agent use and views on EM, how parole agents enact policies and procedures related to EM, and information regarding allowable (and restricted) movements. Additionally, future research should consider incorporating a larger group of individuals of different admission types; however, the use of PSM does enhance the rigor of the current study analyses. The shortened study period and lack of time and resources to enter thousands of paper PRB orders into a database limited analyses to what could be feasibly conducted.
References


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Appendix A: IDOC Correctional Counselor and Field Service Representative Survey Documents

Survey documents provided in this Appendix include the scripts used for the organizational points of contact for them to use when distributing the survey to participants, informed consent forms explaining the research and their rights as a research participant; and the survey questions asked.

1. IDOC Correctional Counselors/Field Service Representatives Contact Script

Hi Illinois Department of Corrections correctional counselors and field service representatives,

My name is Lily Gleicher and I am a research analyst at the Illinois Criminal Justice Information Authority. We are conducting a study on electronic monitoring (EM) as a condition of mandatory supervised release (MSR). You are receiving this e-mail because you have been identified as an Illinois Department of Corrections (IDOC) employee who is a transition coordinator or an employee who has a hand in making recommendations to the PRB regarding release conditions. This survey seeks to gain insight into the processes, policies, procedures, and input regarding the use of EM as a condition of MSR.

Participation in this survey will be able to help address an issue that has anecdotally been highlighted as an issue of interest in Illinois that needs further study, as well as contribute to the limited body of research on this topic. The information gleaned from this study will provide recommendations to help guide state policy and practice for more effective and efficient use of EM for individuals released to MSR.

Below is the survey link. The survey will take approximately 25 minutes to complete and begins with information regarding the study and your consent to participate (or not) in the survey.

Please let us know if you have any questions. Thank you!

[ link will be inserted here]

Best,

Lily Gleicher

Lily Gleicher, Ph.D.
Research Analyst, Center for Justice Research and Evaluation
Illinois Criminal Justice Information Authority
Lily.Gleicher@illinois.gov

II. Follow-up Scripts (Reminders)

Hi Illinois Department of Corrections correctional counselors and/or field service representatives:

This is a reminder for the survey that I am conducting as a research analyst from the Illinois Criminal Justice Information Authority on electronic monitoring (EM) as a condition of mandatory supervised release (MSR).

You are receiving this e-mail because you have been identified as an Illinois Department of Corrections (IDOC) employee who provides recommendations to the PRB regarding MSR conditions. This survey seeks to gain insight into the processes, policies, procedures, and input regarding the use of EM as a condition of MSR.

Participation in this survey will be able to help address an issue that has anecdotally been highlighted as an issue of interest in Illinois that needs further study, as well as contribute to the limited body of research on this topic. The information gleaned from this study will provide recommendations to help guide state policy and practice for more effective and efficient use of EM for individuals released to MSR.
Below is the survey link. The survey will take approximately 25 minutes to complete and begins with information regarding the study and your consent to participate (or not) in the survey.

Please let us know if you have any questions. Thank you!

[Link inserted here]

Best,
Lily Gleicher

Lily Gleicher, Ph.D.
Research Analyst, Center for Justice Research and Evaluation
Illinois Criminal Justice Information Authority
Lily.Gleicher@illinois.gov

III. IDOC Correctional Counselor and Field Service Representatives Consent Form

Illinois Criminal Justice Information Authority
Research Information and Consent for Participation in Research
An Exploratory Study of the Use of Electronic Monitoring of Individuals Leaving the Illinois Department of Corrections

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigators Name and Title: Lily Gleicher, PhD, Research Analyst
   H. Douglas Otto, MA, Research Analyst

Department and Institution: Research & Analysis Unit
   Illinois Criminal Justice Information Authority
   300 W. Adams St., Ste 200
   Chicago, IL 60606
   (312) 793-8550.

This project was funded by the Governor’s Office of Management and Budget (GOMB) with partial funding through Edward J. Byrne funds (JAG).

Why am I being asked?
You are being asked to be a subject in a research study about individuals released to mandatory supervised release (MSR) who are ordered to electronic monitoring (EM). For the purposes of this study, electronic monitoring and GPS monitoring are together called “EM” unless otherwise specified, despite many technological and practical differences. You have been asked to participate in this research because you have been identified as an employee of the Illinois Department of Corrections (IDOC) who is involved in making recommendations to the Prisoner Review Board (PRB).

Your participation in this research is voluntary, and your decision to participate will not affect your current or future dealings with the Illinois Criminal Justice Information Authority (ICJIA). If you decide
to participate, you are free to withdraw at any time without affecting that relationship.
Approximately, 80 participants may be involved in this research study. Along with IDOC correctional
counselors and field service representatives, up to 15 PRB members, and up to 300 parole officers will
also be surveyed on the same topic. Further, data from a random sample of 10,000 individuals released to
MSR in State Fiscal Year (SFY) 2016 will be analyzed with a three-year follow-up.

What is the purpose of this research?
The purpose of this study is to determine how, why, and to what extent EM is part of an individual’s
release conditions from Illinois Department of Corrections (IDOC) facilities. This study will also seek to
better understand the impact of EM on recidivism among those on parole/MSR, and to gain insight into
the process of IDOC, PRB, and parole agent use and roles of decision-making regarding EM.

What procedures are involved?
You are being asked to complete an online survey regarding EM and MSR. The survey will take about 25
minutes to complete, and your participation is entirely voluntary and anonymous.

What are the potential risks and discomforts?
To the best of our knowledge, participating in the focus group will have no more risk for harm than you
would experience in everyday life. Please know, you may choose at any time not to answer the questions
asked. You may also choose to stop the interview at any time.

Are there benefits to taking part in the research?
You will not receive any direct benefits; however, information gathered from the survey will be used to
inform recommendations regarding policies and practices of EM use for individuals on MSR/parole.

What other options are there?
You have the option to not participate in this study.

What about privacy and confidentiality?
Only the members of the research team will have direct knowledge that you participated in this study. The
researchers will do everything to mask identities and report findings in a way that does not identify the
individual survey respondent. In addition, survey responses are completely anonymous, being stripped of
IP address and e-mail association, and does not request personally identifiable information.

A report will include a summary of information received from this and other sources. The Authority will
publish the results from the study on their website. Authority staff may also share the results at meetings
or other public forums. When the results of the research are published or discussed at conferences, no
information will be included that would reveal your identity.

What are the costs for participating in this research?
There are no costs to you for participating in this research other than your time to take the survey.

Will I be reimbursed for any of my expenses or paid for my participation in this research?
There will no reimbursement for any expenses (though there should be no expenses) or payment for
participation in this survey.

Can I withdraw or be removed from the study?
If you decide to participate, you are free to withdraw your consent and discontinue participation at any
time.
**Who should I contact if I have questions?**

Contact the researchers Lily Gleicher, PhD, Research Analyst, at (312) 814-5189 or Lily.Gleicher@Illinois.gov if you have any questions about this study or your part in it, or, if you have questions, concerns or complaints about the research.

**What are my rights as a research subject?**

If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the IRB secretary, Scott Risolute, Associate General Counsel, at (312) 793-8550 or Scott.Risolute@Illinois.gov.

**Remember:**

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current standing at the Illinois Department of Corrections or current or future relations with ICJIA. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

I have read the consent form and understand my rights as a study participant:

I UNDERSTAND MY RIGHTS  I DO NOT UNDERSTAND MY RIGHTS

I agree to participate in this study:

I AGREE TO PARTICIPATE  I DO NOT WANT TO PARTICIPATE

---

**IDOC Correctional Counselor/Field Service Representative Survey**

*For the purposes of this survey, the questions relate to the discretionary use of electronic monitoring (EM), not those statutorily required to be on GPS monitoring.*

1. In your current position, do you provide recommendations to the Prisoner Review Board (PRB) regarding conditions of supervision for individuals being released to Mandatory Supervised Release (MSR)?
   a. Yes
   b. No (*end survey*)

2. How long have you been employed at the Illinois Department of Corrections (IDOC)?
   a. Less than 1 year
   b. 1-3 years
   c. 4-7 years
   d. 8-10 years
   e. 11-13 years
   f. 14-16 years
   g. 17+ years

3. What is your role/job title at IDOC?
   a. Field service representative
b. Correctional counselor  
c. Correctional officer (*end survey*)  
d. Supervisor (*end survey*)  
e. Administrator (*end survey*)

4. What is your highest degree earned:  
   a. High school diploma or GED  
   b. Associates degree in criminal justice or related field (i.e., social work, sociology, human services, paralegal studies, etc.)  
   c. Bachelor’s degree in criminal justice or related field (i.e., social work, sociology, human services, etc.)  
   d. Master’s degree in criminal justice or related field (i.e., social work, sociology, human services, etc.)  
   e. Doctorate degree in criminal justice or related field (i.e., social work, sociology, human services, etc.)  
   f. Juris doctorate (law degree)

5. Before your employment at IDOC, what was your prior experience, if any (please select all that apply)?  
   a. No prior work experience  
   b. Law enforcement (policing)  
   c. Prosecution  
   d. Defense attorney  
   e. Judiciary  
   f. Juvenile justice professional/practitioner  
   g. Policy analyst or advisor  
   h. Military  
   i. Substance use disorder treatment  
   j. Mental health treatment  
   k. Social work  
   l. Public health  
   m. Political activities (i.e., working in the Mayor’s or Governor’s office)  
   n. K-12 Education  
   o. Higher education  
   p. Adult probation or parole  
   q. Juvenile probation or aftercare/parole  
   r. Institutional corrections (jail or prison)  
   s. Administrative Office of the Illinois Courts  
   t. Federal government work  
   u. Non-profit organization  
   v. Other (please specify): ____________________

6. What do you believe your role(s) is as a correctional counselor or field service representative at IDOC in relation to making condition recommendations for individuals being released to MSR?

7. What do you believe your role(s) is as a correctional counselor or field service representative at IDOC regarding recommending EM as a condition for individuals being released to MSR (other than those who are statutorily required)?
8. What factors do you consider when deciding recommendations of conditions to the Prisoner Review Board (PRB)? Please check the top eight factors that you use in deciding release condition recommendations for an individual being released from an IDOC facility.
   a. Current offense type
   b. Current offense seriousness
   c. Current offense class
   d. Arrest history
   e. Prior IDOC commitments
   f. Previous or current firearm offenses
   g. Previous or current offenses that involve any weapons
   h. Risk or risk/needs assessment score(s)
   i. Any participation in IDOC programs and services
   j. Completion of IDOC programs and/or services
   k. Substance use disorder/misuse history
   l. Mental health history
   m. Mental health stability
   n. Prior EM placement
   o. Prior EM violations
   p. Prior MSR violations
   q. Prior MSR revocations
   r. Individual’s social support in the community
   s. Individual’s disciplinary record while incarcerated
   t. Victim input (if applicable)
   u. Stable housing upon release
   v. Job acquisition prior to release
   w. Other (please specify): _______________

6a. (Follow-up—) please rank these top eight factors from strongest to weakest factor in your decision to place an individual on EM upon release from an IDOC facility. (this will be done in Qualtrics, so the responses will carry over)

9. What factors do you consider when making the recommendation of electronic monitoring (EM) to the PRB? Please check the top eight factors that you use in your decision to place someone on EM other than statutory requirements for GPS monitoring.
   a. Current offense type
   b. Current offense seriousness
   c. Current offense class
   d. Arrest history
   e. Prior IDOC commitment
   f. Previous or current firearm offenses
   g. Previous or current offenses that involve any weapons
   h. Risk or risk/needs assessment score(s)
   i. Any participation in IDOC programs and/or services
   j. Completion of IDOC programs and/or services
   k. Substance use disorder/misuse history
   l. Mental health history
   m. Prior EM placement

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n. Prior EM violation
o. Prior MSR violation
p. Prior MSR revocation
q. Individual’s social support in the community
r. Individual’s disciplinary record while incarcerated
s. Victim input (if applicable)
t. Other (please specify):_______________

7a. (Follow-up—) please rank these top eight factors from strongest to weakest factor in your
decision to recommend placement of an individual to EM upon release from an IDOC facility.
(this will be done in Qualtrics, so the responses will carry over)

(definitions to set up following questions)

Actuarial risk/needs assessments help identify the possible probability of an individual’s
likelihood to reoffend compared to the norm-based population. Examples include:
  •  Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)
  •  Service Planning Instrument (SPIn)
  •  Ohio Risk Assessment System (ORAS)
Actuarial risk assessment that rely more on static or historical factors, or factors that are not
amenable to change (i.e., prior criminal history, age at first offense).
  •  Salient Factor Scale (SFS),
  •  the Static-99 for male sex offenders, or
  •  Violent Risk Appraisal Guide (VRAG).

Structured clinical/professional judgement uses career knowledge in conjunction with a
structured actuarial assessment and information gathering to provide guidelines for factors to
evaluate as well, such as the
  •  Historical-Clinical-Risk Management-20 (HCR-20)
  •  Self-Appraisal Questionnaire (SAQ)

10. Do you currently score-out/assess an individual’s risk to recidivate using risk and/or risk/needs
assessments tool or structured professional judgement tool to make recommendations to the PRB
regarding conditions of release?
   a. Yes, a risk assessment
   b. Yes, a risk/needs assessment
   c. Yes, structured professional judgement tool
   d. No
   e. Other (please specify):

11. Do you currently score-out/assess an individual’s risk to recidivate using an risk or risk/needs
assessment or rely on a structured professional judgement tool to help make recommendations
about placing an individual who is to be released to MSR on EM?
   a. Yes, a risk assessment
   b. Yes, a risk/needs assessment
   c. Yes, structured professional judgement tool
   d. No
e. Other (please specify):

12. Please rank the following statements based on the strength of the priority regarding your job as an IDOC correctional counselor or field service representative when making a recommendation to place an individual on EM upon release to MSR:
   a. Provide public safety and protection
   b. Provide an opportunity for individual offender reintegration and change
   c. Provide offender accountability through imposing conditions
   d. Ensure punishment for violations to deter future behavior
   e. Make recommendations that address offenders’ needs in the community
   f. Make recommendations that deter offenders from violating conditions or committing new crimes
   g. Provide parole officers with recommendations for offender services and programming upon release from an IDOC facility.

13. Who is responsible for determining which individuals should be placed on EM (other than those who are statutorily required to be on GPS under MSR)?
   a. IDOC correctional counselors and/or field service representatives
   b. PRB member(s)
   c. Other (please specify):

14. Are there processes, policies, and procedures in making recommendations regarding conditions of MSR?
   a. Yes
   b. No
   c. Unsure
   d. Other (please specify):

15. Are there processes, policies, and procedures in place for making recommendations for individuals to be placed on EM (other than those statutorily required)?
   a. Yes
   b. No
   c. Unsure
   d. Other (please specify):

16. Please rank the following statements from strongly disagree to strongly agree:

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offenders have very few strengths to build upon as they are released to the community. My experience and instincts are more accurate at determining risk to recidivate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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in the community than an actuarial assessment.
PRB members stay current with new research on offender reentry.
PRB members stay current with new research on EM.
IDOC correctional counselors and/or field service representatives stay current with research on offender reentry.
IDOC correctional counselors and/or field service representatives stay current with new research on EM.
Parole officers stay current with new research on offender reentry.
Parole officers stay current with new research on EM.
IDOC administrators and supervisors stay current with new research on offender reentry.
IDOC administrators and supervisors stay current with new research on EM.
EM is a cost-effective strategy for offenders released to MSR.
EM is effective at reducing recidivism for most offenders.
EM is effective at reducing recidivism for specific types of offenders.

17. Which violations of conditions of MSR do you think are significant enough to warrant PRB Amendment Order request for placement onto EM in every case, or almost every case?

18. Are there written guidelines or criteria, other than statutory policies, that describes the process for EM revocations within IDOC?
   a. Yes
   b. No
   c. Unsure
   d. Other (please specify):

19. If you could change one thing about the PRB case review process, what would it be?

20. If you could change one thing about the IDOC process of making condition recommendations, what would it be?

21. What challenges do IDOC correctional counselors and field service representatives face when working with the PRB on release condition decisions for individuals leaving IDOC to MSR?
22. What challenges do IDOC correctional counselors and field service representatives face when working with the PRB on deciding which individuals should be placed on EM upon release to MSR (other than individuals statutorily required)?

23. How satisfied are you with the current PRB process of identifying which incarcerated individuals will be placed on EM upon release to MSR?
   a. Not satisfied at all
   b. Somewhat satisfied
   c. Moderately satisfied
   d. Satisfied
   e. Very satisfied

24. How satisfied are you with the current IDOC process of making recommendations to PRB about an individual’s conditions for MSR?
   a. Not satisfied at all
   b. Somewhat satisfied
   c. Moderately satisfied
   d. Satisfied
   e. Very satisfied

25. How satisfied are you with the current IDOC process of making recommendations as to which individuals will be placed on EM once released to MSR?
   a. Not satisfied at all
   b. Somewhat satisfied
   c. Moderately satisfied
   d. Satisfied
   e. Very satisfied

26. Please provide any other comments or information you think is relevant when thinking about how EM is used for individuals on MSR or how you make decisions to recommend that individuals be placed on EM when they are released.

27. Gender:
   a. Female
   b. Male
   c. Other

28. Race:
   a. White/Caucasian
   b. Black/African American
   c. Native American/Alaska Native
   d. Asian/Pacific Islander
   e. Other (please specify):________

29. Ethnicity:
   a. Hispanic or Latinx
   b. Non-Hispanic or non-Latinx

30. Age:
a. 18-25  
b. 26-34  
c. 35-42  
d. 43-50  
e. 51-59  
f. 60 or older
Appendix B: Parole Division of IDOC Survey Documents

I. IDOC Parole Agents Survey Script

Hi Parole Agents/Officers:

My name is Lily Gleicher and I am a research analyst at the Illinois Criminal Justice Information Authority. We are conducting a study on electronic monitoring (EM) as a condition of mandatory supervised release (MSR). You are receiving this e-mail because you have been identified as an employee of the Illinois Department of Corrections (IDOC) within parole/mandatory supervised release (MSR). This survey seeks to gain insight into the processes, policies, procedures, and input regarding the use of EM as a condition of MSR.

Participation in this survey will be able to help address an issue that has anecdotally been highlighted as an issue of interest in Illinois that needs further study, as well as contribute to the limited body of research on this topic. The information gleaned from this study will provide recommendations to help guide state policy and practice for more effective and efficient use of EM for individuals released to MSR.

Below is the survey link. The survey will take approximately 25-30 minutes to complete and begins with information regarding the study and your consent to participate (or not) in the survey.

Please let us know if you have any questions. Thank you!

[Link inserted here]

Best,
Lily Gleicher

Lily Gleicher, Ph.D., Research Analyst
Center for Justice Research and Evaluation
Illinois Criminal Justice Information Authority
Lily.Gleicher@illinois.gov

II. Follow-up Scripts

Hi Parole Agents/Officers:

This is a reminder for the survey that I am conducting as a research analyst from the Illinois Criminal Justice Information Authority on electronic monitoring (EM) as a condition of mandatory supervised release (MSR).

You are receiving this e-mail because you have been identified as an employee of the Illinois Department of Corrections (IDOC) within parole/mandatory supervised release (MSR). This survey seeks to gain insight into the processes, policies, procedures, and input regarding the use of EM as a condition of MSR.

Participation in this survey will be able to help address an issue that has anecdotally been highlighted as an issue of interest in Illinois that needs further study, as well as contribute to the limited body of research on this topic. The information gleaned from this study will provide recommendations to help guide state policy and practice for more effective and efficient use of EM for individuals released to MSR.
Below is the survey link. The survey will take approximately 25-30 minutes to complete and begins with information regarding the study and your consent to participate (or not) in the survey.

Please let us know if you have any questions. Thank you!

[Link inserted here]

Best,

Lily Gleicher

Lily Gleicher, Ph.D., Research Analyst
Center for Justice Research and Evaluation
Illinois Criminal Justice Information Authority
Lily.Gleicher@illinois.gov

III. IDOC Parole Agent Consent Form

Illinois Criminal Justice Information Authority
Research Information and Consent for Participation in Research
An Exploratory Study of the Use of Electronic Monitoring of Individuals Leaving the Illinois Department of Corrections

You are being asked to participate in a research study. Researchers are required to provide a consent form such as this one to tell you about the research, to explain that taking part is voluntary, to describe the risks and benefits of participation, and to help you to make an informed decision. You should feel free to ask the researchers any questions you may have.

Principal Investigators Name and Title: Lily Gleicher, PhD, Research Analyst
H. Douglas Otto, MA, Research Analyst

Department and Institution: Research & Analysis Unit
Illinois Criminal Justice Information Authority
300 W. Adams St., Ste 200
Chicago, IL 60606
(312) 793-8550

This project was funded by the Governor’s Office of Management and Budget (GOMB) with partial funding through Edward J. Byrne funds (JAG).

Why am I being asked?
You are being asked to be a subject in a research study about individuals released to mandatory supervised release (MSR) who are ordered to electronic monitoring (EM). For the purposes of this study, electronic monitoring and GPS monitoring are together called “EM” unless otherwise specified, despite many technological and practical differences. You have been asked to participate in this research because you have been identified as an Illinois Department of Corrections (IDOC) parole officer/agent.

Your participation in this research is voluntary, and your decision to participate will not affect your current or future dealings with the Illinois Criminal Justice Information Authority (ICJIA). If you decide to participate, you are free to withdraw at any time without affecting that relationship.
Approximately, 300 participants may be involved in this research study. Along with parole officers, up to 15 PRB members and 80 IDOC staff will also be surveyed on the same topic. Further, data from a random sample of 10,000 individuals released to MSR in State Fiscal Year (SFY) 2016 will be analyzed with a three-year follow-up.

**What is the purpose of this research?**
The purpose of this study is to determine how, why, and to what extent EM is part of an individual’s release conditions from Illinois Department of Corrections (IDOC) facilities. This study will also seek to better understand the impact of EM on recidivism among those on parole/MSR, and to gain insight into the process of IDOC, PRB, and parole agent use and roles of decision-making regarding EM.

**What procedures are involved?**
You are being asked to complete an online survey regarding EM, parole/MSR, and reentry processes. The survey will take about 25-30 minutes to complete, and your participation is entirely voluntary and anonymous.

**What are the potential risks and discomforts?**
To the best of our knowledge, participating in the focus group will have no more risk for harm than you would experience in everyday life. Please know, you may choose at any time not to answer the questions asked. You may also choose to stop the interview at any time.

**Are there benefits to taking part in the research?**
You will not receive any direct benefits; however, information gathered from the survey will be used to inform recommendations regarding policies and practices of EM use for individuals on MSR/parole.

**What other options are there?**
You have the option to not participate in this study.

**What about privacy and confidentiality?**
Only the members of the research team will have direct knowledge that you participated in this study. The researchers will do everything to mask identities and report findings in a way that does not identify the individual survey respondent. This includes stripping survey responses of IP addresses and e-mail associations, and so that researchers do not have that information. Information will not be provided to any of those who helped recruit individuals or those agencies being surveyed.

A report will include a summary of information received from this and other sources. The Authority will publish the results from the study on their website. Authority staff may also share the results at meetings or other public forums. When the results of the research are published or discussed at conferences, **no information will be included that would reveal your identity.**

**What are the costs for participating in this research?**
There are no costs to you for participating in this research.

**Will I be reimbursed for any of my expenses or paid for my participation in this research?**
There will no reimbursement for any expenses (though there should be no expenses) or payment for participation in this survey.

**Can I withdraw or be removed from the study?**
If you decide to participate, you are free to withdraw your consent and discontinue participation at any time.

**Who should I contact if I have questions?**
Contact the researchers Lily Gleicher, PhD, Research Analyst, at (312) 814-5189 or Lily.Gleicher@Illinois.gov if you have any questions about this study or your part in it, or, if you have questions, concerns or complaints about the research.

**What are my rights as a research subject?**
If you feel you have not been treated according to the descriptions in this form, or if you have any questions about your rights as a research subject, including questions, concerns, complaints, or to offer input, you may call the IRB secretary, Scott Risolute, Associate General Counsel, at (312) 793-8550 or Scott.Risolute@Illinois.gov.

**Remember:**
Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current standing at the Illinois Department of Corrections or current or future relations with ICJIA. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

I have read the consent form and understand my rights as a study participant:

I UNDERSTAND MY RIGHTS       I DO NOT UNDERSTAND MY RIGHTS

I agree to participate in this study:

I AGREE TO PARTICIPATE       I DO NOT WANT TO PARTICIPATE

**IV. IDOC Parole Agent Survey**

Parole Officer Staff Survey

*For the purposes of this survey, the questions relate to the discretionary use of electronic monitoring (EM), not those statutorily required to be on GPS monitoring. Individuals employed at the Illinois Department of Corrections (IDOC) who make recommendations to the PRB are referred to as correctional counselors and/or field service representatives.*

*For the purposes of this survey, the researchers request that only those who currently, directly supervise individuals on MSR, and who currently, or have ever supervised, individuals on EM. Parole officers and Senior Parole officers are referred to as Parole Officers, or POs throughout the survey.*

1. Do you currently, directly supervise individuals on Mandatory Supervised Release (MSR)?
   a. Yes
   b. No (*end survey*)

2. Have you ever supervised an individual on MSR who is also on EM?
   a. Yes, I currently supervise individual(s) on MSR who are also placed on EM
   b. Yes, but I do not currently have any individual on my caseload who is on EM
   c. No (*end survey*)
3. How long have you been employed in any capacity with the Illinois Department of Corrections (IDOC)?
   a. Less than 1 year
   b. 1-3 years
   c. 4-7 years
   d. 8-10 years
   e. 11-13 years
   f. 14-16 years
   g. 17+ years

4. What is your current role/job title within IDOC?
   a. Parole agent/officer
   b. Senior parole agent/officer
   c. Supervisor/manager (end of survey)
   d. Intake coordinator/agent/officer (end survey)
   e. Director/Deputy Director/Administrator (end of survey)
   f. Other (please specify): ______________

5. How long have you been employed as an IDOC parole officer?
   a. Less than 1 year
   b. 1-3 years
   c. 4-7 years
   d. 8-10 years
   e. 11-13 years
   f. 14-16 years
   g. 17+ years

6. Which parole district do you currently work in? This information is for geography purposes and reporting of any kind will not reveal specific district responses.
   a. District 1
   b. District 2
   c. District 3
   d. District 4
   e. District 5
   f. District 6
   g. District 7
   h. District 8
   i. District 9
   j. District 10
   k. District 11
   l. District 12
   m. District 13
   n. District 14
   o. District 15
   p. District 16
   q. District 17
   r. District 18
   s. Other (please specify):
7. What is your highest degree earned:
   a. High school diploma or GED
   b. Associates degree in criminal justice or related field (i.e., social work, sociology, human services, paralegal studies, etc.)
   c. Bachelor’s degree in criminal justice or related field (i.e., social work, sociology, human services, paralegal studies, etc.)
   d. Master’s degree in criminal justice or related field (i.e., social work, sociology, human services, etc.)
   e. Doctorate degree in criminal justice or related field (i.e., social work, sociology, human services, paralegal studies, etc.)
   f. Juris doctorate (law degree)

8. Prior to working as an IDOC parole officer, what was your previous experience, if any (please select all that apply)?
   a. No prior work experience
   b. Law enforcement (policing)
   c. Prosecution
   d. Defense attorney
   e. Judiciary
   f. Juvenile justice
   g. Policy analyst or advisor
   h. Military
   i. Substance use disorder treatment
   j. Mental health treatment
   k. Social work
   l. Public health
   m. Political activities (i.e., working in the Mayor’s or Governor’s office)
   n. K-12 Education
   o. Higher education
   p. Adult probation or parole
   q. Juvenile probation or aftercare/parole
   r. Institutional corrections (jail or prison)
   s. Administrative Office of the Illinois Courts
   t. Federal government work
   u. Non-profit organization
   v. Other (please specify):__________________

9. Do you supervise a specific, specialized caseload?
   a. Sex offender only caseload (*end survey*)
   b. Gang member only caseload
   c. Females only caseload
   d. Veterans only caseload
   e. Mental health only caseload
   f. Domestic violence only caseload
   g. Substance use only caseload
   h. Apprehension agent (*end survey*)
   i. No, a general caseload
   j. Other (please specify):__________
10. What do you believe your main role or roles are as a parole officer or senior parole?

11. What do you believe is the main goal or goals of EM for offenders on MSR?

12. What factors do you consider when deciding to request a Prisoner Review Board (PRB) Amendment Order for an offender on your caseload to be placed on (back on, or extend) EM? Please check the top eight factors you consider when requesting a PRB Amendment Order.
   a. Current offense type
   b. Current offense seriousness
   c. Current offense class
   d. Arrest history
   e. Prior IDOC commitments
   f. Previous or current firearm offenses
   g. Previous or current offenses that involve any weapons
   h. Risk or risk/needs assessment score(s)
   i. Any participation in community-based programs and/or services
   j. Non-completion of community-based programs and/or services
   k. Substance use disorder/misuse history
   l. Current substance use/positive urine tests
   m. Mental health history
   n. Current mental health stability
   o. Prior EM placement
   p. Prior EM violations
   q. Prior MSR violations
   r. Prior MSR revocations
   s. Offender’s social support in the community
   t. Offender’s demeanor when interacting with parole officer during visits
   u. Violating the terms of EM movements
   v. Violating any condition of MSR
   w. Other (please specify):__________________

11a. (Follow-up—) please rank these top eight factors from strongest to weakest factor in your decision to request a PRB Amendment Order to place an offender on EM or back on EM (this will be done in Qualtrics, so the responses will carry over)

13. What factors do you consider when deciding to request an early removal of EM through a PRB Amendment Order for an offender on your caseload? Please check the top eight factors you consider when requesting an offender’s early removal of EM.
   a. Current offense type
   b. Current offense seriousness
   c. Current offense class
   d. Arrest history
   e. Prior IDOC commitments
   f. Previous or current firearm offenses
   g. Previous or current offenses that involve any weapons
   h. Risk or risk/needs assessment score(s)
   i. Any participation in community-based programs and/or services
   j. Completion of community-based programs and/or services
   k. Substance use disorder/misuse history
l. Mental health history
m. Prior MSR violations
n. Prior MSR revocations
o. Offender social support in the community
p. Offender’s disciplinary record while incarcerated
q. Offender’s demeanor in interactions with you as the parole officer
r. Negative urine screens
s. Positive interactions with the individual on MSR
t. Obtaining stable housing
u. Obtaining employment
v. Offender social support in the community
w. Other (please specify): _______________

12a. (Follow-up—) please rank these top eight factors from strongest to weakest factor in your decision to request a PRB Amendment Order for early removal of EM (this will be done in Qualtrics, so the responses will carry over)

14. Do offenders exiting IDOC to MSR know their conditions of supervision prior to exiting an IDOC facility?
   a. Yes
   b. No
   c. Unsure

15. How do offenders released to MSR know what their MSR conditions are?
   a. Provided in writing by the PRB directly to the offender in custody.
   b. Provided verbally by the PRB directly to the offender in custody.
   c. Provided in writing to an IDOC correctional counselor and/or field service representative to give to the offender exiting IDOC.
   d. Provided verbally by an IDOC correctional counselor and/or field service representative to the offender exiting IDOC.
   e. Provided in writing to the parole officer who is supervising/supervising agency of the offender exiting IDOC.
   f. Provided verbally to the parole officer who is supervising/supervising agency of the offender exiting IDOC.
   g. Other (please specify):

16. Do you provide information on EM to an offender on MSR who is released with EM as a condition?
   a. Yes, verbally
   b. Yes, via written document
   c. No
   d. Unsure

14a. If no, how is EM information relayed to the offender on MSR?

17. Do you supervise/monitor offenders on your caseload who are placed on EM upon release from an IDOC facility more frequently or less frequently than offenders who are not on EM?
   a. Less frequently
   b. More frequently
c. Other (please specify):

18. Do you get an alert from the EM provider when an offender is indicated outside of their specified movement time(s)?
   a. Yes
   b. No
   c. Other (please specify):

19. How do you handle offender emergency situations in which the offender violates the parameters of their EM movement(s) (i.e. offender is taken to the hospital or offender has family member in the hospital outside of their movement hours)?

20. On average, how long does it take before an offender on MSR is allowed any movement?
   a. Less than a week
   b. 1-2 weeks
   c. 3-4 weeks
   d. 5-6 weeks
   e. 7-8 weeks
   f. 9-10 weeks
   g. 11-12 weeks
   h. 13-14 weeks
   i. 15 or more weeks
   j. Other (please specify):

21. On average, how frequently do you make a request to the PRB for an offender’s early removal from EM to the PRB?
   a. Less than 10% of the time
   b. 10% to 20%
   c. 21% to 30%
   d. 31% to 40%
   e. 41% to 50%
   f. 51% to 60%
   g. 61% to 70%
   h. 71% to 80%
   i. 81% to 90%
   j. 91% to 100%
   k. Other (please specify):

22. What technical violations make an offender on MSR eligible for an Amendment Order request to PRB for EM placement (please select all that apply)?
   a. One positive urine screen
   b. More than one positive urine screen
   c. One instance of police contact—no arrest
   d. More than one instance of police contact—no arrest
   e. Police contact—arrest
   f. One time late or no-show to office visit
   g. Late or no-show more than once to an office visit
h. One time late or no-show to other services or programming
i. Late or no-show more than once to other services or programming
j. Absconding
k. Inability to find employment
l. Leaving the state without permission
m. Accessing a computer without permission (sex offender)
n. Non-compliance with sex offender registry (sex offender)
o. Find individual in possession of a firearm or other dangerous weapon
p. Knowingly associating with other individuals on parole or MSR
q. Other (please specify):

(definitions to set up following questions)

**Actuarial risk/needs assessments** help identify the possible probability of an individual’s likelihood to reoffend compared to the norm-based population.

Examples include:
- *Correctional Offender Management Profiling for Alternative Sanctions (COMPAS)*
- *Service Planning Instrument (SPIn)*
- *Ohio Risk Assessment System (ORAS)*

**Actuarial risk assessment** that rely more on static or historical factors, or factors that are not amenable to change (i.e., prior criminal history, age at first offense).
- *Salient Factor Scale (SFS)*,
- *the Static-99 for male sex offenders, or*
- *Violent Risk Appraisal Guide (VRAG).*

**Structured clinical/professional judgement** uses career knowledge in conjunction with a structured actuarial assessment and information gathering to provide guidelines for factors to evaluate as well, such as the
- *Historical-Clinical-Risk Management-20 (HCR-20)*, or
- *Self-Appraisal Questionnaire (SAQ).*

23. **Do you currently score-out/assess an individual’s risk to recidivate using an** actuarial risk or risk/needs assessment with individuals on your caseload?
   a. Yes
   b. No
   c. Unsure
   d. I have started to implement a new risk assessment provided to us.

*(if yes, the following questions will be asked)*

23a. **How do you use** the actuarial risk or risk/needs assessment? *Please check all that apply.*
   a. Statutory purposes
   b. Case management
   c. Case planning
   d. Goal setting
   e. Service linkage
   f. Identifying the frequency of contacts
   g. Drug testing
h. Frequency of home visits  
i. Collateral contacts  
j. Service hour dosage  
k. Triaging your caseload  
l. Identifying restrictions  
m. Identifying sanctions  
n. Other (please specify): ______________

24. Please rank the following statements based on the strength of the priority regarding your role as a parole officer or senior parole officer?
   a. Provide public safety and protection  
b. Provide an opportunity for offender reintegration and change  
c. Provide offender accountability through imposing conditions  
d. Ensure punishment for violations to deter future behavior  
e. Ensure linkage to appropriate services and programs based on individuals’ needs  
f. Sanction offenders when they have not acted in accordance with their release conditions  
g. Prevent offenders from violating release conditions by assisting the individual’s reentry into society  
h. Prevent offenders from violating release conditions by monitoring and/or surveilling individuals to ensure compliance.

25. Please indicate your responses to the following statements from strongly disagree to strongly agree:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Neutral</th>
<th>Agree</th>
<th>Strongly agree</th>
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<tr>
<td>Offenders have very few strengths to build upon as they are released to the community.</td>
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<td>My experience and instincts are more accurate at determining risk to recidivate in the community than an actuarial assessment.</td>
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<tr>
<td>PRB members stay current with new research on offender reentry.</td>
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<tr>
<td>PRB members stay current with new research on EM.</td>
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<tr>
<td>IDOC correctional counselors and/or field service representatives stay current with research on offender reentry.</td>
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<tr>
<td>IDOC correctional counselors and/or field service representatives stay current with new research on EM.</td>
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<tr>
<td>Parole officers stay current with new research on offender reentry.</td>
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<tr>
<td>Parole officers stay current with new research on EM.</td>
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</tbody>
</table>
26. If you could change one thing about EM, what would it be?

27. If you could change one thing about the PRB case review process regarding individuals’ conditions of release, what would it be?

28. What challenges do you face working with offenders on EM?

29. What challenges do you see offenders on MSR face who are placed on EM?

30. How satisfied are you with the current PRB process of identifying which offenders will be placed on EM once released to MSR (other than statutory requirements)?
   a. Not satisfied at all
   b. Somewhat satisfied
   c. Moderately satisfied
   d. Satisfied
   e. Very satisfied

31. How satisfied are you with the IDOC correctional counselors and/or field service representatives making recommendations as to which offenders to place on EM once released to MSR (other than statutory requirements)?
   a. Not satisfied at all
   b. Somewhat satisfied
   c. Moderately satisfied
   d. Satisfied
   e. Very satisfied
   f. Don’t know

32. Please provide any other comments or information you think is relevant when thinking about how EM is used for offenders on MSR/parole or how decisions are made to request a PRB Amendment Order to place an offender on EM while being supervised or request early EM release.
33. Gender:
   a. Female
   b. Male
   c. Other

34. Race:
   a. White/Caucasian
   b. Black/African American
   c. Native American/Alaska Native
   d. Asian/Pacific Islander
   e. Other (please specify):________

35. Ethnicity:
   a. Hispanic or Latinx
   b. Non-Hispanic or non-Latinx

36. Age:
   a. 18-25
   b. 26-34
   c. 35-42
   d. 43-50
   e. 51-59
   f. 60 or older
MEMORANDUM

From: Craig Findley, Chairman, Illinois Prisoner Review Board

To: Rob Jeffreys, Acting Director, Illinois Department of Corrections
    Jason Garnett, Chief of Parole, Illinois Department of Corrections

In re: Changes to Conditions of Release and Compliance Reporting

Background

During the Spring 2019 Legislative Session, numerous concerns were raised regarding the conditions of parole and mandatory supervised release ("MSR"). Of special note were a number of initiatives focused upon: the usage of electronic and global positioning system monitoring of releasees; the collection, reporting, and analysis of data regarding the usage of monitoring; limitations on authorized movement for releasees; and generally revising standard conditions to encourage successful reintegration into the community. In response to those concerns, the Prisoner Review Board ("the Board") has committed to implementing several standardized changes to the supervisory practices of the State of Illinois.

Changes to Conditions of Release and Compliance Reporting

Effectively immediately, the following changes shall be enacted:

(1) The Board will focus upon imposing discretionary monitoring upon initial release from incarceration only in cases where the Board feels strongly that it is necessary, based upon the totality of the circumstances in each case. Utilization of risk and needs assessments, consideration of victims' rights and safety, and recommendations from IDOC staff and parole agents will continue to play integral roles in these decisions.

(2) The Board will generally limit the imposition of discretionary initial monitoring to a period of time not to exceed 60 days, except where specific cause for extension of the duration is shown (for example, non-compliance with the initial 60-day term).
(3) The Board will begin requiring that compliance reports be kept and reported to the Board in cases where discretionary monitoring is ordered. In particular, the supervising agent shall keep a written report regarding the releasee's compliance with the monitoring terms and provide a copy of that report to the Board as follows:

(A) no later than day 45 of a 60-day order,
(B) no later than day 60 of a 90-day order,
(C) no later than day 90 of a 120-day order,
(D) no later than day 120 of any order in excess of 180 days, or
(E) upon specific request of the Board.

An exemplar copy of the compliance report that shall be kept and provided as described herein is attached to this Memorandum.

(4) Authorized movement hours for all releasees, including those on electronic or GPS monitoring, shall be subject to the following standard order:

"All releasees on parole or mandatory supervised release shall have at least twelve (12) hours of authorized movement each day. Further restriction of authorized movement hours shall only be permitted by specific order of the Board. Movement outside of authorized time periods for purposes of responding to a medical emergency shall not be the basis for an alleged violation of parole or mandatory supervised release, so long as reasonable proof of the emergency is provided by the releasee within forty-eight (48) hours of the end of the medical emergency. Nothing in this order shall be construed to prevent an agent of the Department of Corrections from requiring that any releasee attend programs or meetings as ordered by the agent."

Conclusion

The Board anticipates that these changes will effectively resolve the serious concerns which have been identified without jeopardizing public safety. The Board will also continue our existing practice of requesting that IDOC identify individuals who have been fully compliant or otherwise highly successful with their conditions of release overall, with the particular goal of terminating the release early where appropriate (typically occurring halfway through the supervision period set forth by statute). The Chairman will also continue to periodically review MSR orders to ensure compliance with the directives described above and best practices more generally.

Craig Findley
Chairman, Illinois Prisoner Review Board
### Releasee Information

<table>
<thead>
<tr>
<th>Name:</th>
<th>IDOC Number:</th>
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<tr>
<th>Parent Facility:</th>
<th>Release Date:</th>
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### Current Holding Offense:

### Employment and Education Overview

- **Is this Releasee currently employed?**
  - YES ☐ NO ☐
- **Place of employment, if applicable:**
  - 
- **Occupation, if applicable:**
  - 
- **Is this employment full-time or part-time?**
  - FT ☐ PT ☐
- **Is this Releasee enrolled in an educational institute or program?**
  - YES ☐ NO ☐
- **Name of institute or program, if applicable:**
  - 

### IPRB Condition Compliance

- **Has this Releasee been compliant with Electronic or GPS Monitoring as ordered by the Board during this term of release?**
  - YES ☐ NO ☐
- **Summary of the non-compliance, if applicable:**
  - 

### IDOC Agent Summary of Overall Compliance

---

/ ____________________________  ________________ / ____________________________

Submitted by (IDOC Agent) (Print Name) / Position Title of IDOC Agent  Signature (IDOC Agent) / Date of Compliance Report
Date of Board Review and Action:

**Board Action:** □ No Change to Order □ Remove Order: ____________

Modify: _________________

Comments:

_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

Member (Review Chair)   Member   Member
Current Form in Use

STATE OF ILLINOIS
Prisoner Review Board Order

Facility: ___________________________ Date: ___________________________
Offender Name: _____________________ ID#: ___________________________

Adult Transition Center Yes ☐ No ☐ If yes, time in the community

Clinical Services Recommendations for Release:
________________________________________________
________________________________________________
________________________________________________
________________________________________________

Counselor: ___________________________ Supervisor: ______________________

Signature ______________________________ Signature ______________________

Board Action:
☐ Mandatory Supervised Release Approved Effective When Eligible
☐ Released Prior to Hearing
☐ Statutory Parole Approved

The releasee is obligated to obey the general rules governing parolees or mandatory supervised releasees and the following special order(s):

Conditions:

1. ☐ Substance Abuse Counseling - (CD) ☐ Assessment
   (To include drug and/or alcohol evaluation for need and/or completion of recommended counseling program.)

2. ☐ Anger Management Counseling - (CG)
   (To include evaluation for need and/or completion of recommended counseling program.)

3. ☐ Sex Offender Counseling - (CX)
   (To include evaluation for need and/or completion of recommended counseling program.)

4. ☐ Outpatient Mental Health Counseling - (CP) ☐ Inpatient Assessment Recommended
   (To include evaluation for need and/or completion of recommended counseling program.)

5. ☐ Electronic Monitoring - (CE) FOR A PERIOD OF ___________________________
   (Electronic Monitoring shall not be removed prior to this time unless approved by the Prisoner Review Board. Any request for
   Electronic Monitoring removal shall be submitted by the Illinois Department of Corrections with a current progress report.)

6. ☐ No Victim Contact - (CT) ___________________________

7. ☐ No Computer/Internet Access - (CC) YOU ARE NOT TO HAVE INTERNET ACCESS OF ANY TYPE THROUGH A COMPUTER, WEBTV, CELL PHONE, PERSONAL DIGITAL ASSISTANT (PDA), OR ANY OTHER DEVICE WITHOUT PRIOR APPROVAL BY YOUR PAROLE AGENT. APPROVAL FOR INTERNET ACCESS MAY ONLY BE MADE FOR EMPLOYMENT AND SCHOOL RELATED ACTIVITIES. YOU ARE PROHIBITED FROM ESTABLISHING A PROFILE OR UTILIZING SOMEONE ELSE’S PROFILE ON A SOCIAL-NETWORKING WEBSITE AND FROM CONTACTING OR COMMUNICATING WITH MINORS ON THESE SITES.

8. ☐ Domestic Violence Counseling - (DV)

9. ☐ Close Supervision - (CS)
   (Note specific check in times here/These reporting instructions are in addition to instruction given by the IDOC Agent)

10. ☐ Mandated GPS (GP) (Use ONLY for cases Mandated and noted in the IDOC recommendations field)
For the Board:

Signature: ____________________________  Date: ____________________________

Signature: ____________________________  Date: ____________________________

Signature: ____________________________  Date: ____________________________

For use during personal interviews only:
I hereby attest that I have been served the above noted conditions of my parole/mandatory supervised release and understand that failure to follow these conditions may result in the revocation of my parole.

Releasee's Signature: ____________________________  Date: ____________________________
STATE OF ILLINOIS
Prisoner Review Board Order

Facility ___________________________ Date: _______________________

Offender Name: ______________________ ID#: ______________________ MSR: ______________________

□ No □ Yes Is the offender residing in an Adult Transition Center? If yes, provide date of release for Board review: ______________________

□ No □ Yes Is the offender currently employed? Where employed? ______________________ How long? ______________________

□ No □ Yes Does the offender have a GED or HSD?

□ No □ Yes Was the offender released prior to hearing (immediate release)? If yes, provide date offender was released: ______________________

□ No □ Yes Has the offender been released in accordance with the IDOC Electronic Home Detention program or Over 55 State Statute? If yes, length of time since offender was released: ______________________

Has the offender successfully completed any of the programs in IDOC listed below? (Select all that apply)

□ Thinking for a Change □ Building Change □ Aim Higher
□ Anger Management □ Domestic Violence □ Start NOW
□ Substance Abuse Education □ Substance Abuse Treatment □ Re-entry
□ Educational (please specify): ______________________
□ Vocational (please specify): ______________________
□ ICI (please specify): ______________________
□ Other (please specify): ______________________

Counselor: ______________________ Signature ______________________

Supervisor: ______________________ Signature ______________________

Release Hearing Type:

□ Mandatory Supervised Release Approved - Effective when eligible
□ Statutory Parole Approved

CONDITIONS: The releasee is obligated to obey the general rules governing parolees or mandatory supervised releasees as provided in 730 ILCS 5/3-3-7(a) and the following special order(s) of the Illinois Prisoner Review Board:

IDOC Recommendation PRB Orders

TREATMENT AND COUNSELING
(To include evaluation for need and/or completion of recommended counseling program.)

1. ☐ ☐ Substance Use Disorder Counseling – (CD)

IDOC Clinical Review:
TCU score: _______
2. ☐ ☐ ☐ Anger Management Counseling – (CG)

**IDOC Clinical Review:**
☐ IDR of violence  
Date of last IDR for violence: ____________

3. ☐ ☐ ☐ Domestic Violence Counseling – (DV) (Do not use in conjunction with Anger Management)

**IDOC Clinical Review:**
- History of DV conviction in the last five years: No ☐ Yes ☐
- History of VOOP conviction in the last five years: No ☐ Yes ☐
- Violation of Stalking/Civil No Contact conviction(s): No ☐ Yes ☐
- Active OP/Stalking/Civil No Contact Order(s): No ☐ Yes ☐


5. ☐ ☐ ☐ Outpatient Mental Health Counseling – (CP)

**IDOC Clinical Review:**
- Current Mental Health caseload: No ☐ Yes ☐

6. ☐ ☐ ☐ Sex Offender Counseling – (CX)

**IDOC Clinical Review (Include SOF attachment):**
- Current sex offense conviction: No ☐ Yes ☐
- Past sex offense conviction date: ____________
- CSOS Recommended: No ☐ Yes ☐

**BEHAVIORAL RESTRICTIONS**

7. ☐ ☐ ☐ No Victim Contact – (CT) (Identify by criminal case number(s), active no contact order case number(s) or victim name(s)).

8. N/A ☐ ☐ Movement Restrictions – (MS)

All releasees on parole or mandatory supervised release shall have at least twelve (12) hours of authorized movement each day. Further restriction of authorized movement hours shall only be permitted by specific order of the Board. Movement outside of authorized time periods for purposes of responding to a medical emergency shall not be the basis for an alleged violation of parole or mandatory supervised release, so long as reasonable proof of the emergency is provided by the releasee within forty-eight (48) hours of the end of the medical emergency. Nothing in this order shall be construed to prevent an agent of the Department of Corrections from requiring that any releasee attend programs or meetings as ordered by the agent.

**Board use only:**
- ☐ Authorized Movement Hours Restriction (to be used only where < 12 hours/day) as specified: __________________________
- ☐ Geographic Restriction
  - ☐ Stay away from __________________________
  - ☐ Do not enter __________________________

9. N/A ☐ ☐ Electronic Monitoring – (CE) For a period of ________________.


10. ☐ ☐ ☐ Global Positioning System (GPS) – (GP) For a period of ________________.

IDOC shall report compliance via PRB000211 pursuant to the provisions of the Discretionary Compliance Report Memo 7/19 and 730 ILCS 5-3-14-2(c)(f). Discretionary monitoring shall not be removed early unless approved by the Illinois Prisoner Review Board.

11. ☐ ☐ ☐ No Computer or Internet Access Restriction – (CC)
(Includes any type of access through a computer, Web TV, cell phone, personal digital assistant (PDA), or any other device without prior approval by your parole agent. Approval for internet access may only be made for employment and school related activities. You are prohibited from establishing a profile or utilizing someone else’s profile on a social networking website and from contacting or communicating with minors on these sites.)

Rational basis for restriction - Board use only:

- [ ] SO – General Restrictions
- [ ] SO – Minor Victim (Sexual Predator)
- [ ] SO – Use of Computer/Internet in Offense/Violation of MSR
- [ ] Non-SO – Use of Computer/Internet in Offense/Violation of MSR

12. N/A  [ ] Other – (CO)

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For use during personal interviews only:

I hereby attest that I have been served the above noted conditions of my parole/mandatory supervised release and understand that failure to follow these conditions may result in the revocation of my parole.

Releasee’s Signature: ___________________________ Date: ___________________________
Preamble:
You have been ordered to comply with one or more behavioral restrictions while on Mandatory Release (MSR) or Parole. All conditions are set based upon a review of your behavioral and criminal history, clinical evaluations and recommendations, the results of any risk and needs assessments available, and your interview with the Board (where applicable).

BEHAVIORAL RESTRICTIONS

No Contact Order – You are hereby prohibited from contacting, either directly or through a third party, any of the individuals identified by the Department of Corrections or identified specifically in these orders, unless provided specific permission by your Parole Agent, an employee of the Department of Corrections, or the Prisoner Review Board. This order prohibits any form of communication, including contact that is in person or by written or oral communications, such as telephone, letter, email, or social media. You may also be specifically prohibited from coming within a certain distance of various locations, as identified by the Department of Corrections or identified specifically in these orders.

Movement Restrictions –
All releasees on parole or mandatory supervised release shall have at least twelve (12) hours of authorized movement each day. Further restriction of authorized movement hours shall only be permitted by specific order of the Board. Movement outside of authorized time periods for purposes of responding to a medical emergency shall not be the basis for an alleged violation of parole or mandatory supervised release, so long as reasonable proof of the emergency is provided by the releasee within forty-eight (48) hours of the end of the medical emergency. Nothing in this order shall be construed to prevent an agent of the Department of Corrections from requiring that any releasee attend programs or meetings as ordered by the agent.

Restrictions include:
Authorized movement hours – Movement is restricted to less than 12 hours
Geographic Restriction – You are restricted from entering named areas
Stay Away From – You are to have no contact with named citizen
Do Not Enter - Buildings or locations you are not allowed to enter
Electronic Monitoring – To comply with this condition, you must comply with the directives of the Department of Corrections or your Parole Agent regarding electronic monitoring. Unless otherwise ordered by the Prisoner Review Board, you will have at least twelve (12) hours of authorized movement each day. Your agent may, however, require your attendance at meetings or direct you to attend counseling or other programming as needed. Your compliance with this monitoring condition will be reported regularly to the Board, and monitoring may be removed early if you successfully comply with the monitoring as ordered.

Global Positioning System Monitoring – To comply with this condition, you must comply with the directives of the Department of Corrections or your parole agent regarding electronic monitoring. Unless otherwise ordered by the Prisoner Review Board, you will have at least twelve (12) hours of authorized movement each day. Your agent may, however, require your attendance at meetings or direct you to attend counseling or other programming as needed. Your compliance with this monitoring condition will be reported regularly to the Board, and monitoring may be removed early if you successfully comply with the monitoring as ordered. If you are mandatorily subject to GPS monitoring by state statute, then you must be monitored for as long as the statute requires, at minimum.

OTHER CONDITIONAL ORDERS DEFINED:

No Driving (DUI) – You are hereby prohibited from operating any motor vehicle, snowmobile, all-terrain vehicle, or watercraft without a valid driver’s license from the Secretary of State’s office.

Seek Employment or Education – You are hereby ordered to seek employment, pursue a course of study, or engage in vocational training.

No Special Orders Given – At this time, you are not subject to any special orders of the Prisoner Review Board. You must comply with all standard orders as provided in your parole or mandatory supervised release agreement. Any violation or non-compliance with those standard orders may result in the addition of special orders by the Board.

No Computer or Internet Access Restriction – Your access to computers and the internet will be limited, in accordance with the specific provisions provided below.

Internet Access Restriction Tier Level Explanations
1. All Sex Offenders:
   a. shall:
      i. submit to periodic unannounced examinations of any Internet-capable device by the offender’s supervising agent, a law enforcement officer, or assigned computer or information technology specialist, including the retrieval and copying of all data from
the Internet-capable device and any internal or external peripherals and removal of such information, equipment, or device to conduct a more thorough inspection; and

ii. submit to the installation on the offender’s Internet-capable device, at the offender’s expense, of one or more hardware or software systems to monitor the Internet, computer network, or application usage. Such installation shall be at the discretion of the offender’s supervising agent; and

iii. submit to any other appropriate restrictions concerning the offender’s use of or access to any Internet-capable device imposed by the Board, the Department of Corrections, or the offender’s supervising agent; and

iv. provide, upon request, any username, password, or passcode necessary for the inspections or installations described in subsections (a)(i) and (a)(ii).

b. shall not:

i. visit, access, download, or use any website, computer program, or application which qualifies as a dating website or dating application; or

ii. visit, access, download, or use any website, computer program, or application in order to share, view, download, upload, or discuss pornographic, romantic, or sexual material; or

iii. visit, access, download, or use any portion of a website with a variety of forums for discussing current events, news, politics, hobbies, or other matters, where that section of materials of a dating, pornographic, romantic, or sexual nature are visited or accessed; or

iv. visit, access, download or use any website, computer program, or application designed for the specific purpose of anonymizing, masking, spoofing, or otherwise obscuring the user’s IP address, browsing history, messages, emails, postings, data uploads, or other similar actions from later investigation or review. This is not intended to apply to automated data encryption protocols involved in data transfer by Internet-capable devices; or

v. visit, access, download, install or use any scrubbing device on any Internet-capable device used by the offender. This includes any website, computer program, or application which is designed to transmit data, including, but not limited to, documents, images, photos, or written messages, and which subsequently deletes the data or transfer history or both as an automated function of the website or application.

2. In addition to the above, all Sexual Predators and Sex Offenders with minor victims:

a. Shall not visit, access, download, or use any social networking website or social networking application which is primarily geared towards minors; and

b. Shall not use any social networking website or social networking application to interact with any person who is not related to the sexual predator and whom the sexual predator knows or reasonably should believe to be under 18 years of age. A person is not related to the sexual predator for purposes of this subsection if the person is not the spouse, brother, sister, descendant, first or second cousin, or step-child or adopted child of the offender.
3. Superseding subsections (1) and (2) above, any Sex Offender whose original criminal conduct or instant violation of mandatory supervised release or parole involved the use of an Internet-capable device:
   a. Shall not use or access any Internet-capable device without specific permission from the offender’s supervising agent, the Department of Corrections, or the Prisoner Review Board. In the event that use is permitted, such use shall be limited to counseling, education, religion, and employment-related purposes, and any appropriate portions of (1) and (2) shall also apply.

4. Any Non-sexual Offender whose original criminal conduct or instant violation of mandatory supervised release or parole involved the use of an Internet-capable device:
   a. Shall not use or access any Internet-capable device without specific permission from the offender’s supervising agent, the Department of Corrections, or the Prisoner Review Board. In the event that use is permitted, such use shall be limited to counseling, education, religion, and employment-related purposes, and any appropriate portions of (1) and (2) shall also apply.

**Internet Restriction Definitions**

(Where possible, replicating definitions as found in 720 ILCS 5/17-0.5.)

As used in application of conditions of Mandatory Supervised Release or Parole:

(a) “Application” or “App” means any computer program that is used on an internet-capable device which adds some new functionality to said device.
(b) "Computer" means a device that accepts, processes, stores, retrieves, or outputs data and includes, but is not limited to, auxiliary storage and telecommunications devices connected to computers.
(c) "Computer network" means a set of related, remotely connected devices and any communications facilities including more than one computer with the capability to transmit data between them through the communications facilities.
(d) "Computer program" or "program" means a series of coded instructions or statements in a form acceptable to a computer which causes the computer to process data and supply the results of the data processing.
(e) "Data" means a representation in any form of information, knowledge, facts, concepts, or instructions, including program documentation, which is prepared or has been prepared in a formalized manner and is stored or processed in or transmitted by a computer or in a system or network. Data is considered property and may be in any form, including, but not limited to, printouts, magnetic or optical storage media, punch cards, or data stored internally in the memory of the computer.
(f) “Dating Website” or “Dating Application” means any website or application designed for the purpose of developing romantic or sexual relationships between users.
(g) "Document" includes, but is not limited to, any document, representation, or image produced manually, electronically, or by computer.

(h) “Internet-capable device” means any machine which can access the Internet or any computer network, including, but not limited to, cellphones, desktop computers, handheld video game devices, laptops, tablets, televisions, and video game consoles.

(i) “Non-sexual Offender” means any individual whose conviction or convictions do not fall under the authority of the Sex Offender Management Board Act or the Sex Offender Registration Act.

(j) “Password or Passcode” means any protective feature required to access or use an account or profile on any Internet-capable device, computer program, app or application, social networking website, or other similar account.

(k) “Sex Offender” means any individual convicted of a sex offense as defined in the Sex Offender Management Board Act.

(l) “Sexual Predator” means any individual convicted of an offense which would qualify the individual as a sexual predator under the Sex Offender Registration Act.

(m) “Scrubbing device” means any computer program, application, or other device used for the purpose of deleting, destroying, obscuring, over-writing, or otherwise eliminating data so that such data cannot later be investigated, retrieved, or reviewed.

(n) "Social networking website" means an Internet website containing profile web pages of the members of the website that include the names or nicknames of such members, photographs placed on the profile web pages by such members, or any other personal or personally identifying information about such members and links to other profile web pages on social networking websites of friends or associates of such members that can be accessed by other members or visitors to the website. A social networking website provides members of or visitors to such website the ability to leave messages or comments on the profile web page that are visible to all or some visitors to the profile web page and may also include a form of electronic mail for members of the social networking website.

(o) “Social networking application” means any computer program or application which performs a similar function as a social networking website

(p) “Username” means a title which is used to identify the person accessing or using any Internet-capable device, computer program, app or application, social networking website, or other similar account. This can be the person’s name, nickname, email address, or other alias.
Appendix E

Budgeting for Results Illinois Horizontal Capital Budget Report
Introduction

In 2019 the General Assembly passed Rebuild Illinois, the largest capital program in the state’s history. State, local and federal investments for transportation make up $33.2 billion of the $44.8 billion Rebuild Illinois capital plan. GOMB works with state agencies to review potential capital investments and projects. Projects include roads and bridges, transit and rail systems, aeronautics, schools, environmental protection, energy programs, information technology infrastructure, and deferred maintenance. These long-term investments are designed to improve the quality of life for all Illinois residents, promote economic development, increase state operating efficiencies and create jobs in every region of the state. Capital budgets are enacted on an annual basis, often times as part of multi-year, branded capital plans. Fiscal year 2020 is the inaugural year of a new capital plan, Rebuild Illinois.

This report requested by the Illinois Budgeting for Results Commission summarizes the current state of funding prioritization practices for investments in roads and bridges, which is termed “horizontal capital.”

Budgeting for Results Commission 2019 Recommendation

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.¹

Background

Transportation Asset Management Plan

In 2012, the federal government passed the Moving Ahead for Progress in the 21st Century law (MAP-21), and built upon it in 2015 with the Fixing America’s Surface Transportation act (FAST). MAP-21 and FAST combined several new and existing federal transportation programs to create a structure for implementing Transportation Performance Management (TPM)².

MAP-21 and FAST mandated that each state’s Department of Transportation (IDOT) create a Transportation Asset Management Plan (TAMP). The TAMP must include asset management objectives

¹ https://www2.illinois.gov/sites/budget/Documents/Budgeting%20for%20Results/2019-BFR-Annual-Commission-Report-Final.pdf (p. 22)
and measures, performance gap identification, lifecycle cost, risk management analysis, a financial plan and future investment strategies³.

The Illinois Department of Transportation (IDOT) began working on the state’s TAMP in 2017. The final TAMP was approved by the Federal Highway Administration (FHWA) on August 29, 2019. IDOT’s stated priority is to focus funding on transportation preservation, the maintenance and upkeep of existing roads and bridges.

**Multi-Year Plan**

IDOT has also released the *Proposed Highway Improvement Program*, a Multi-Year Plan (MYP) for fiscal years 2020-2025. The MYP explains that IDOT is following the strategy set up in the TAMP to focus on the maintenance and preservation of existing roads and bridges.

IDOT has also begun working on the Illinois Statewide Intelligent Transportation Systems (ITS) Architecture and Strategic Plan. ITS is “the integrated application of sensor, computer, electronics, and communications technologies and management strategies to provide traveler information to increase the safety and efficiency of the surface transportation system.”⁴ The IDOT ITS Strategic Plan is still in the development stage.

IDOT is working to complete the five steps in developing their MYP; (1) determine available revenue, (2) assess highway system needs, (3) develop funding targets, (4) ensure performance targets are achieved and (5) publish the program for General Assembly review.

Illinois plans to use a data driven approach in decision-making, however “IDOT recognizes that it currently does not have pavement and bridge management systems that meet the minimum requirements outlined by the federal requirements. Therefore, one of the most important enhancements that will occur is the acquisition and implementation of a new Enterprise Asset Management System (EAMS) that contains software that will give IDOT the ability to evaluate the long-term impacts and cost-effectiveness of different pavement and bridge treatment strategies.”⁵

On October 10, 2019, IDOT awarded a contract to a consultant for the development of the EAMS. The development of the EAMS will take up to three years for completion and implementation. Currently, IDOT has made enhancements to existing data driven tools and created new tools to assist the districts in identifying project needs and selection.

IDOT also explains in the TAMP that analysis of the Rebuild Illinois capital construction plan on “funding and projected asset conditions will be assessed and the TAMP will be fully revised.”⁶

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**Performance Based Planning and Programming**

Performance Based Planning and Programming (PBPP) is another federal requirement of MAP-21 and FAST. The United States Department of Transportation (USDOT) requires PBPP be used to coordinate federally mandated transportation planning and programming processes including; asset management, congestion management and safety planning. PBPP was created to help municipalities, states and the federal government align long-range and short-range investment decision-making.

Outside of the asset management discussed in TAMP, IDOT has identified six programs in its MYP receiving further investment; Highway Safety Improvement Program, Illinois Transportation Enhancement Program, Congestion Mitigation/Air Quality (CMAQ) Program, Illinois Special Bridge Program (ISBP), the National Highway Freight Program and statewide line items.

According to the FHWA, PBPP is intended to be used monitor the performance of these programs and plan for future program development. IDOT’s TAMP should be closely aligned with their PBPP goals and should reflect the agencies Long Range Transportation Planning (LRTP). Performance based planning of asset management is influenced by the physical condition of facilities, including passenger and freight demand, safety characteristics, capacity, and user behavior, “Agencies should try to ensure that the schedule for developing the TAMP aligns with planning and programming cycles so that the results can be incorporated into these processes. Planning staff should be involved in TAMP development so that there is heightened coordination between the TAMP and LRTP.”

MAP-21 and FAST stress the importance of priority alignment within the Federal highway and state transit programs. Through the TAMP, IDOT is updating its approach to preservation funding from a reactive ‘worst first’ priority funding approach toward proactive strategic lifecycle management and alignment with LRTP.

According to IDOT, at current funding levels and the present state of roads and bridges, it will take several years to “achieve and sustain a desired state of good repair over the lifecycle of the assets at a minimum practicable cost.”

**Beyond Maintenance**

Every state has produced a TAMP within the past year, aligning maintenance and preservation practices and priorities across the nation. Some states have begun to go further by implementing evaluation tools to prioritize funding which has not been algorithmically pre-assigned.

In 2016, USDOT presented a report to Congress on the use of Benefit-Cost Analysis (BCA) in transportation funding. The report summarized state DOT use of BCA, common obstacles and suggestions on best practices.

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7 [https://www.fhwa.dot.gov/asset/tamp/workplan.pdf](https://www.fhwa.dot.gov/asset/tamp/workplan.pdf)
According to the USDOT report, the use of BCA is not systematic, but ad hoc and inconsistent among states nationwide, “Of 40 State DOTs responding to GAO’s survey, only 12 reported conducting BCA more than half the time for highway expansion projects.”

BCA is most commonly used to help determine safety standards for stand alone projects, and often other criteria are added based on individually determined needs. Alternatives to BCA also exist for state DOTs to use, like life-cycle cost analysis or multifactor scoring systems.

The quality of state BCA, or fidelity to a pre-approved standard, has also been inconsistent, “Overall, while the quality of BCAs varies from State to State and project to project, the literature describes a number of deficiencies commonly found in States' analyses. According to GAO, issues that are frequently encountered in States' BCAs include erroneously including economic development impacts or construction costs as benefits; double-counting benefits; omitting certain categories of impacts; not discounting future values correctly; using unrealistic base cases; and failing to include reference to other viable alternatives.”

The USDOT report concludes that BCA can be a valuable asset to states because it allows for common currency comparisons (apples to apples) among competing capital claims. Several suggestions are made in the report for how to properly create a BCA program, including the development of a clearinghouse of BCA resources and programs, technical assistance with analysis and visualization tools, and updated methodologies on how to estimate and quantify costs and benefits.

**Illinois**

Former IDOT Secretary Randy Blankenhorn spoke in 2017 to the Metropolitan Planning Council on the need to create criteria for funding based on desired outcomes. Secretary Blankenhorn said that although performance reporting on safety and national alignment in the TAMP were important, they were not the only issues Illinois citizens identified as priorities. He identified six criteria; mobility, safety, livability, economic development, transparency of delivery timeliness and regional priorities. Secretary Blankenhorn stressed that Illinois is still early in the development process of criteria and analytical tools.

**Virginia – SMART SCALE – Best Practice**

A comparison of other state horizontal capital prioritization practices identified Virginia as a best practice. Beginning in 2016, the Virginia Commonwealth Transportation Board (CTB) has phased in and administered the peer reviewed SMART SCALE evaluation tool, a quantitative and qualitative assessment process to manage and allocate transportation resources. A technical evaluation team is appointed by CTB staff to validate proposed capital project information, evaluate project readiness and calculate project scores.

There are two criteria considered for calculating SMART SCALE scores. Capital projects must fit into Virginia’s LRTP and be used for at least one of the LRTP goals; safety, congestion mitigation, accessibility,

environmental quality, economic development and land use coordination. The technical evaluation team at CTB analyzes and calculates qualitative ratings for each goal of a proposed project. The second criterion the team considers in Smart Scale scoring is Area Typology, “Area typologies are used to evaluate each project’s benefit on a scale relative to the needs of that region.”

The SMART SCALE evaluation process has six steps, from the calculation of project measures to producing a list of scored projects for CTB to prioritize. “Each project’s benefit is determined by calculating values for each of the evaluation measures, converting those values into a normalized value for each factor (0 to 100 scale), and then by weighting the factor values according to one of several potential weighting frameworks approved by the CTB. Ultimately, a Project Benefit is divided by the amount of funds requested from the SMART SCALE programs to obtain the final SMART SCALE score used to rank projects and develop the staff-recommended funding scenario.”

Ten percent of projects that are accepted are randomly put through a second evaluation to ensure the consistency of results. “The CTB is not required to fund the highest-scoring projects and may use other considerations, in addition to the SMART SCALE process, to make final funding decisions. However, if the CTB makes modifications to the staff recommended funding scenario, then the member seeking such change must provide a rationale for such modification and seek approval, by majority vote, of the Board.”

The Smart Scale team also produces a public Tableau visualization on the development and completion of state projects.

**Conclusion**

MAP-21 and FAST are the existing federal transportation programs created to structure and guide public transportation investments across the nation. MAP-21 and FAST mandated that the Illinois Department of Transportation create a Transportation Asset Management Plan (TAMP). The TAMP must include asset management objectives and measures, performance gap identification, lifecycle cost, risk management analysis, a financial plan and future investment strategies.

The Illinois Department of Transportation’s TAMP was approved by the Federal Highway Administration on August 29, 2019. IDOT’s priority in the TAMP is to focus funding on the maintenance and upkeep of existing roads and bridges.

Illinois is still early in the development of the technology and analytical tools required to move beyond the focus on transportation preservation, and create performance goals based on mobility, safety, livability, economic development, transparency of delivery timeliness, regional priorities, or other criteria IDOT determine.

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16 http://dashboard.vasmartscale.org/
Appendix F

2020 Comprehensive Program Assessment Reports
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**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 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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Section 1

Program Overview
**Program Overview – Licensed Recovery Homes Program**

The number of people in Illinois with opioid use, alcohol and marijuana dependence, and other illicit drug use disorders has increased over the past decade. Fatal overdoses in Illinois from heroin and other opioids have nearly doubled during the last five years, from 1,203 in 2014 to 2,098 in 2019. Substance use disorder (SUD) treatments have continued to evolve and improve alongside a growing set of challenges. Recovery housing can be an important step in treatment and recovery. The Illinois Department of Human Services-Division of Substance Use Prevention and Recovery (IDHS/SUPR) Licensed Recovery Homes are rules-based structured housing facilities which can include staff-led activities, peer-led groups or other organized operations that are focused on maintaining sobriety for people in early recovery and those who have finished a substance use disorder treatment.

The IDHS/SUPR Licensed Recovery Home program is for the treatment and recovery of people addressing substance use disorders, many of whom increasingly have co-occurring issues such as homelessness and mental health needs. Recovery Homes licensed by IDHS/SUPR are alcohol and drug-free housing with support services. People who use Recovery Homes need a higher level of monitoring and assistance because they are recently out of treatment and early in their recovery. Licensed Recovery Homes have an operator and manager who ensure a sober environment, provide treatment options, and supply referrals. The manager and operator do not live on site, one operator may work with many homes, whereas each home has their own manager.

The IDHS/SUPR Licensed Recovery Home program is organized within the framework created by the National Association of Recovery Residences (NARR). NARR Recovery Residences are structured by level of support, based on the amount and type of administration, level of support services offered and category of residence. The philosophy and make-up of the IDHS/SUPR Licensed Recovery Home program, and recovery housing in general, is established strongly on the work of William White, Emeritus Senior Research Consultant at Chestnut Health Systems / Lighthouse Institute and past chair of the board of Recovery Communities United.

Recent budget appropriations and expenditures presented in Table 1 are exclusively on the program Licensed Recovery Homes within IDHS/SUPR.

<table>
<thead>
<tr>
<th></th>
<th>FY 2018</th>
<th>FY 2019</th>
<th>FY 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriated</td>
<td>$12,032,881</td>
<td>$13,495,801</td>
<td>$14,094,359</td>
</tr>
<tr>
<td>Expended</td>
<td>$11,768,383</td>
<td>$13,035,936</td>
<td>$13,929,540</td>
</tr>
</tbody>
</table>

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3 [https://idph.illinois.gov/OpioidDataDashboard/](https://idph.illinois.gov/OpioidDataDashboard/)

4 [http://www.dhs.state.il.us/OneNetLibrary/27896/documents/RecoveryHousingEnvironmentalScan.pdf](http://www.dhs.state.il.us/OneNetLibrary/27896/documents/RecoveryHousingEnvironmentalScan.pdf)


A majority of IDHS/SUPR funding for all SUD treatment and recovery is based on the American Society of Addiction Medicine (ASAM) criteria which organize treatment and recovery into levels of care. Service providers are reimbursed for treating a client. However, Licensed Recovery Homes are funded as a program separate from ASAM levels of care. The appropriations above include all IDHS/SUPR funding, but the expenditures are exclusively on Licensed Recovery Homes.

Using national literature and program information gathered with IDHS/SUPR, BFR matched the Licensed Recovery Home program with the program profile “Sober Living Houses” in the Results First benefit-cost model. This profile is based on national research on a variety of Recovery Home programs offered to people recently out of SUD treatment or in early recovery. More information on the evidence base for the Licensed Recovery Homes 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>Illinois Department of Human Services, Division of Substance Use Treatment, Prevention and Recovery</th>
<th>Licensed Recovery Homes$^8</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Optimal Benefits per participant</strong></td>
<td>$67,595</td>
</tr>
<tr>
<td><strong>Real Cost (Net) per participant</strong></td>
<td>$3,226</td>
</tr>
<tr>
<td><strong>Benefits – Costs (Net Present Value)</strong></td>
<td>$64,369</td>
</tr>
<tr>
<td><strong>Benefits/Costs (OROI)</strong></td>
<td>$20.95</td>
</tr>
<tr>
<td><strong>Chance Benefits Will Exceed Costs</strong></td>
<td>89%</td>
</tr>
<tr>
<td><strong>SPART Score</strong></td>
<td>83, Effective</td>
</tr>
</tbody>
</table>

The optimal return on investment calculated by BFR on the Licensed Recovery Home program determined that for every dollar spent by IDHS/SUPR, $20.95 of future benefits from increased employment and reduced crime could be realized by program participants and Illinois taxpayers.

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$^7$ Further program profile and meta-analysis information available at: [https://www.wasipp.wa.gov/BenefitCost/Program/718](https://www.wasipp.wa.gov/BenefitCost/Program/718)

$^8$ 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 – Licensed Recovery Homes

The Results First benefit-cost model uses the effect size determined by the program profile for “Sober Living Homes.” The Sober Living Home program profile aligns most closely with NARR Level 1 and Level 2 housing. The Licensed Recovery Home program aligns with NARR Level 2 supportive housing. Costs were provided by IDHS/SUPR.

Studies that contributed to the benefit-cost analysis for this program include three randomized controlled trials (RCTs) comparing outcomes for NARR Level 1 Oxford House residents with participants assigned to usual care. Usual care may include treatment or self-help group involvement, in which Oxford House residents may also engage. One of these RCTs also included a second treatment group assigned to a NARR Level 2 Therapeutic Community: a more intensive, time-limited residential community. A fourth RCT included a usual care control group, a group assigned to NARR Level 2 recovery housing (not Oxford House), and a group assigned to NARR Level 2 recovery housing plus an outpatient program using reinforcement-based treatment behavioral counseling.

One of the RCTs recruited 150 individuals in the Chicago metropolitan area who completed treatment at alcohol and drug abuse facilities, over half of which were women. The participants were randomly divided between Oxford Houses and community-based aftercare services (Usual Care). Nearly 90% of the participants were tracked throughout the two-year study. The results showed positive outcomes toward decreasing substance use, but significantly also showed positive outcomes of increased employment9. Budgeting for Results was able to monetize the effect of participant’s earnings via employment by using Licensed Recovery Home program population education data provided by IDHS/SUPR.

The annual costs and benefits for the IDHS/SUPR Licensed Recovery Home program can be seen below in Figure I. 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 IDHS/SUPR Licensed Recovery Home program includes IDHS/SUPR staff time and staff training.

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 II, BFR projected the program benefits out 50 years and found that optimal expected program benefits per participant are $67,595 when discounted to present value. The benefits accrue consistently throughout the program participant’s life.

The return on investment from the benefit-cost analysis calculates the benefits from deceased crime, earnings via employment, lower health care costs and participant mortality. Other benefits 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.

9 https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2888149/
Figure I - Annual Cash Flows Per Participant

Figure I illustrates the trends for annual program costs and total benefits per participant starting with the year of initial investment. Note that the initial program cost occurs only in year one with an expenditure of $4,608. The average annual total benefits over the next 30 years is $3,326.27. The breakeven point occurs before year one ends, and the program benefits are reaped for almost 30 years after the initial investment.

The IDHS/SUPR Licensed Recovery Home program accumulates benefits over time to various groups. The benefits to Illinois are based mostly on increased earnings via employment of the program participant, decreased substance use disorder, avoided state medical costs, and avoided private costs incurred due to fewer crime victims. The private victimization costs include lost property, medical bills, wage loss, and the pain and suffering experienced by crime victims.

Better outcomes for participant employment as opposed to alternative available treatments lead to increased tax revenue for the state and a decreased need for taxpayer services.

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. Savings for Illinois due to reduced crime 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 II below illustrates how benefits accumulate to different Illinois stakeholders. The majority of the benefits for the participant come from increased earnings due to employment and decreased mortality due to illicit drug use. Taxpayers mainly benefit from increased taxable income and decreased future spending (deadweight cost).
Figure II – Annual Benefits by Perspective (Not Discounted)

Figure II illustrate the annual benefits for program participants, taxpayers, others, and deadweight costs. Most of the benefits for the participant come from increased earnings due to employment and decreased mortality due to illicit drug use. Taxpayers mainly benefit from increased taxable income and decreased future spending (deadweight cost).

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 III shows the range of OROI resulting from running the simulations. The optimal program benefits exceeded the program costs in 89 percent of the simulations.
Figure III - Monte Carlo Risk Analysis (Results of Simulation Runs)

Monte Carlo Risk Analysis (Results of Simulation Runs)

Net Present Value

Chance benefits will exceed costs: 89%
Section 3

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

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 Human Services (DHS). 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).

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 55 points; and performance management/measurement, worth up to 45 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. 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

Program: Licensed Recovery Homes

Agency: 444 – Department of Human Services

Is this program mandated by law? Yes __ No __ X 10

Identify the origin of the law: State __ Federal ___ Other ___

Statutory Cite: The Substance Use Disorder Act (20 ILCS 301)

Program Continuum Classification: Recovery

Evaluability

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

The Illinois Department of Human Services Division of Substance Use Prevention and Recovery (IDHS/SUPR) does not directly run the Licensed Recovery Homes. The Licensed Recovery Homes are owned and administered by private organizations. Data collection, performance management based on data, and facility oversight are progressing as the Licensed Recovery Home program grows in Illinois. Over the past decade, IDHS/SUPR has worked with the recovery home service providers to promote stronger qualifying credentials on SUD, mental health and homelessness for managers at Licensed Recovery Homes.

Key Performance Measure

<table>
<thead>
<tr>
<th>Key Performance Measure</th>
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<th>FY 2018</th>
<th>FY 2019</th>
<th>Reported in IPRS Y/N</th>
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<tr>
<td>See Key Performance Measures in the Supplemental Information Section</td>
<td></td>
<td></td>
<td></td>
<td>No</td>
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10 The Substance Use Disorder Act (20 ILCS 301) requires DHS to issue licenses to Recovery Homes, but does not require any associated funding. The act requires the department to fund a “comprehensive” range of SUD services including recovery support, but Recovery Homes are not specified.
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>- Evidence Based 25pts &lt;br&gt;- Theory Informed 15 pts &lt;br&gt;- Unknown Effect 0 pts &lt;br&gt;- Negative Effect -5 pts</td>
<td>25</td>
<td>Theory Informed</td>
</tr>
<tr>
<td>Describe the evidence base reviewed.</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

**Explanation:** The National Association of Recovery Residences defines four levels of recovery residences, with varying levels of staffing and services. IDHS/SUPR licensed Recovery Homes align most closely with NARR Level 2.

While this report is on Recovery Homes, the most rigorous research on sober living houses has focused on the Oxford House model, which aligns with NARR Level 1. Oxford Houses are a particular type of chartered recovery house. A large portion of the literature on Oxford Houses in particular has come out of a research group at DePaul University.\(^{11}\) Much of this research studies Oxford Houses located in Illinois (specifically the Chicago area), and this work is referenced by DHS in some of their materials about other recovery housing grant and loan programs.

IDHS/SUPR-licensed Recovery Homes have paid staff, unlike Oxford Houses. Oxford Houses place a similar emphasis on peer-led counseling, though residents are encouraged to attend meetings offsite rather than having groups hosted within the residence. For these reasons, Oxford Houses in Illinois do not seek IDHS/SUPR licensure and are therefore not eligible for contract funding. The Oxford House model was included in the U.S. Substance Abuse and Mental Health Services Administration’s National Registry of Evidence-based Programs and Practices (NREPP).\(^{12}\)

Although IDHS/SUPR licensed Recovery Homes are closely related to the evidence-based Oxford House model, questions exist as to whether the evidence in support of this model can be applied to other types of recovery residences, which provide differing levels of support and target clients at different stages of the recovery process. Limited research exists on the NARR Level 2 category of staffed recovery residences. BFR staff reviewed several observational studies on non-Oxford House sober living houses in California. These studies did find positive outcomes but were based on before-and-after comparisons of program participants, not on comparison with a randomized control group. Due to the limitations of applying Oxford House research to other recovery residences and the need for more rigorous research on the level of recovery residences licensed by IDHS/SUPR, BFR considers this program theory informed.

\(^{11}\) [https://csh.depaul.edu/about/centers-and-institutes/ccr/oxford-house/Pages/default.aspx](https://csh.depaul.edu/about/centers-and-institutes/ccr/oxford-house/Pages/default.aspx)

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Full/Partial/No</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2 To what extent is the program implemented and run with fidelity to the program design? Describe the core components of the program as designed and as implemented in Illinois.</td>
<td>25</td>
<td>Partial</td>
<td>20</td>
</tr>
</tbody>
</table>

**Explanation:** One important component of recovery residences is providing a supportive, recovery-oriented social network for residents, including participation in self-help groups such as 12-step groups. Research has suggested that the combination of recovery residences and self-help groups may support recovery better than either approach alone, although it is difficult to isolate the effects of recovery residences without self-help groups, since most recovery residences mandate or strongly encourage self-help group participation.\(^{13}\) In conformance with this component, IDHS/SUPR licensed Recovery Homes are required to provide peer-led community gatherings at least five times per week.

A second core component of effective recovery residences is a common thread across many behavioral health interventions: sufficient treatment duration. Unlike residential treatment centers, recovery residences generally do not have a maximum length of stay or target “completion” date. Instead, clients are encouraged to move toward independent living at their own pace. IDHS/SUPR Recovery Homes appear to have fidelity to this component. According to the IDHS/SUPR Contractual Policy Manual\(^{14}\) for FY2020, the daily reimbursement rate for Recovery Home – Adult is $54.82. At a median cost of $3224.30 the average length of stay would be about 60 days.

Research on Oxford Houses emphasizes the resident-financed structure of these residences. The primary benefit of this structure is to reduce public costs, which makes unlimited lengths of stay more feasible. However, some researchers also connect resident employment and rent payment with increased self-sufficiency and self-esteem that can support recovery. IDHS/SUPR subsidizes costs for many Recovery Home residents through contracts with the Recovery Homes. While these facts increase public costs compared to resident-financed homes, it also may increase access for low-income clients. Unlike substance use disorder treatment services, recovery residences are not covered by private insurance or Medicaid, so IDHS/SUPR is the only avenue of subsidy for clients who cannot pay for themselves.

A final component of many successful recovery residences is democratic organization and resident empowerment. Some research has expressed concern about recovery residences that are run in a top-down “strong manager” style, with little input from residents.\(^{15}\) It is possible that the IDHS/SUPR requirement for a house manager could cut against this component. However, many recovery residence managers do recognize the importance of resident empowerment and solicit resident engagement through resident councils or other mechanisms.

\(^{13}\) Groh et al, 2009.


\(^{15}\) Polcin and Henderson, 2008.
### Question

<table>
<thead>
<tr>
<th>Question</th>
<th>Points Available</th>
<th>Yes/Partial/No</th>
<th>Points Awarded</th>
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<tbody>
<tr>
<td>2.3 To the extent that the program did not receive full points in question 2.2, has the program been adapted responsibly according to competing best practices in the field, or have modifications been made due to under-resourcing or for other reasons?</td>
<td>(15)</td>
<td>Yes</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation:** As discussed above, while subsidizing resident costs rather than relying on a resident-financed structure increases costs, it also increases access for low-income residents who may be in earlier stages of their recovery and not yet able to support themselves. IDHS/SUPR’s contribution is particularly important since private insurance and Medicaid do not generally cover recovery residences.

Similarly, while democratic organization may support recovery through increased resident engagement and empowerment, there are also arguments in favor of requiring qualified house managers. Recovery Home operators and managers are required to be certified or have a certain amount of experience in substance use disorders and recovery support. This requirement helps ensure that managers are educated in current best practices in recovery, such as Medication Assisted Recovery (MAR) for clients in recovery from opioid use disorder. Many recovery residences have a strong culture of abstinence and are uncomfortable with allowing residents who are on MAR, which can create barriers.

<table>
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<tbody>
<tr>
<td>2.4 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>5</td>
<td>Yes</td>
<td>5</td>
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</table>

**Explanation:**

See [Section 2: Benefit-Cost Analysis](#).
Part 3: Performance Management/Measurement

<table>
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<th>Yes/Partial/No</th>
<th>Points Awarded</th>
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</thead>
<tbody>
<tr>
<td>3.1 Does the program regularly collect timely and credible performance measures? Partial points may be awarded for an existing but not yet implemented plan for a performance measure regime.</td>
<td>10</td>
<td>Yes</td>
<td>10</td>
</tr>
</tbody>
</table>

**Explanation:** IDHS/SUPR collects performance measure data from treatment providers, including Recovery Homes, in the Division’s Automated Reporting System (DARTS), which providers also use to submit claims data. IDHS/SUPR publishes these data annually on its website. Recovery Home performance measures include measures on client engagement and retention, and client status at admission and discharge on measures such as employment, stable housing, criminal justice involvement, self-help group involvement, other supportive social interactions, and abstinence from alcohol and drugs. Most of the performance measures in this report are National Outcome Measures (NOMS), which are also reported to the federal government as part of IDHS/SUPR’s federal block grant funding.

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<tbody>
<tr>
<td>3.2 Do the performance measures focus on outcomes?</td>
<td>5</td>
<td>Yes</td>
<td>5</td>
</tr>
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**Explanation:** The outcomes reported reflect IDHS/SUPR’s holistic approach to recovery. Data are reported not only on abstinence from drugs and alcohol, but also on other dimensions that are important to stable recovery, such as employment and housing.

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<tbody>
<tr>
<td>3.3 Do the performance measures include data on program implementation and fidelity to core principles?</td>
<td>5</td>
<td>Yes</td>
<td>5</td>
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</table>

16 [http://www.dhs.state.il.us/page.aspx?item=117108](http://www.dhs.state.il.us/page.aspx?item=117108)
**Explanation:** Performance measures for Recovery Homes include data on client length of stay, which is important as longer lengths of stay are associated with improved client outcomes. Data are also included on client engagement with self-help groups and other supportive social interactions. Encouraging and increasing such engagement is a core component of the sober living house model. It would be useful if IDHS/SUPR also collected information on the presence of structures for resident engagement and input, such as resident councils.

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</thead>
<tbody>
<tr>
<td>3.4 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>5</td>
<td>Partial</td>
<td>3</td>
</tr>
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</table>

**Explanation:** In 2018, a consulting firm issued a brief “environmental scan” report on recovery housing in Illinois, as part of the federal Cooperative Agreements to Benefit Homeless Individuals (CABHI) Project. This is a small study that describes the recovery residence landscape in Illinois, the significant gap between the number of people exiting SUD treatment in Illinois and the number of available beds in recovery residences, and the challenges to increasing the quantity and quality of recovery housing. Given the limited scope of this report, more thorough independent evaluation would be desirable, particularly if it could contribute to the limited body of research on recovery residences that operate at the level of IDHS/SUPR licensed Recovery Homes.

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<tbody>
<tr>
<td>3.5 Does the agency use performance information (including that collected from program partners) to adjust program priorities or allocate resources?</td>
<td>5</td>
<td>No</td>
<td>0</td>
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</table>

**Explanation:** IDHS/SUPR has a limited number of performance measures related to its Substance Abuse and Mental Health Services Administration (SAMHSA) Substance Abuse Block Grant (SABG) reporting. DARTS data are currently not very accessible within IDHS/SUPR, beyond the PDF reports that are also made available to the public. However, IDHS/SUPR is currently in the process of incorporating DARTS data into a Tableau dashboard. This project will make DARTS data more transparent and much easier to analyze. IDHS/SUPR plans to roll out this data visualization in stages, first to IDHS/SUPR staff, then to the rest of DHS, and eventually to other key stakeholders in state government and potentially the public.

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17 [https://www.samhsa.gov/homelessness-programs-resources/grant-programs-services/cabhi-program](https://www.samhsa.gov/homelessness-programs-resources/grant-programs-services/cabhi-program)
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<tbody>
<tr>
<td>3.6 Does the agency use performance information to adapt program implementation or take other appropriate management actions?</td>
<td>5</td>
<td>No</td>
<td>5</td>
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</table>

**Explanation**: IDHS/SUPR currently provides performance data collected in DARTS to provide feedback to providers about program management through yearly PDF reports with the intention that service providers improve outcomes based on that feedback. IDHS/SUPR hopes that the data visualization project described above will improve their ability to utilize performance data to take appropriate management actions.

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<tbody>
<tr>
<td>3.7 Are key performance measures for this program reported in the Illinois Performance Reporting System? Partial points may be awarded if key performance measures are not reported in IPRS but are made available to the public through other means.</td>
<td>10</td>
<td>Partial</td>
<td>5</td>
</tr>
</tbody>
</table>

**Explanation** The DARTS performance measures are publicly available on an annual basis. The entire IDHS/SUPR division is one program in IPRS, and the DARTS performance measures on drug and alcohol abstinence at discharge are reported in IPRS, as well as the percentage of clients who complete services. The measures reported in IPRS are for all SUD treatment levels combined. IDHS/SUPR has expressed discomfort with abstinence as the primary outcome measure for SUD treatment and recovery support services, because current best practices favor a more holistic view of recovery. It is therefore recommended that IDHS/SUPR report in IPRS more of their existing measures on other outcomes such as employment. It is also recommended that IPRS measures and programs be disaggregated to separate Recovery Home spending and outcomes from spending and outcomes for treatment facilities.
Concluding Comments

The Licensed Recovery Home program was adopted by DHS in 2010 to provide alcohol and drug-free housing for those in early recovery or who have completed substance use disorder treatment. The Illinois Licensed Recovery Home program profile “Sober Living Homes” is supported as effective in achieving positive outcomes for participants and the state by four randomized controlled trials.

IDHS/SUPR collects performance measures that are important to a participant’s stable recovery, including living arrangements and employment at admission and discharge. Licensed Recovery Homes are privately run, making treatment and programming options variable to resource availability, staff training and resident need.

IDHS/SUPR provides information about how performance measures are currently used to adjust program priorities and resource allocation largely through its SAMHSA SABG reporting. IDHS/SUPR is currently in the process of incorporating DARTS program performance data into Tableau dashboards, creating additional transparency and ease of use in the future.

Final Program Score and Rating

![Bar Chart]

<table>
<thead>
<tr>
<th>Final Score</th>
<th>Program Rating</th>
</tr>
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<tbody>
<tr>
<td>83</td>
<td>Effective</td>
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</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.

Section 4

Supplemental Materials
Supplemental Information

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.\(^\text{18}\)

**Randomized Controlled Trial (RCT)**: A study that randomly assigns participants into one or more treatment groups and a control group. This is the most rigorous type of study, because the random assignment allows researchers to isolate the effects of treatment from other participant characteristics that may be correlated with receiving treatment in the absence of random assignment. However, RCTs are not feasible or ethical in every research setting.

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\(^{18}\) https://www.ncbi.nlm.nih.gov/books/NBK32789/
**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


Key Performance Measures

Key performance measures are on the subsequent pages.