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Treatment Alternatives To Street Crime

ANNUAL EVALUATION REPORT

WEST FLORIDA REGIONAL PLANNING COUNCIL

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ESCAMBIA TREATMENT ALTERNATIVES TO
STREET CRIME PROJECT (TASC)
ANNUAL EVALUATION REPORT: PHASE ONE

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NCJRS

SEP 4 1979

ACQUISITIONS

January 10, 1979

The preparation of this report was funded in part by Grant Number 77-ED-04-0006, awarded to the Escambia County Board of Commissioners by the Law Enforcement Assistance Administration, U.S. Department of Justice.

ACKNOWLEDGEMENTS

The preparation of this report would have been impossible without the cooperation and contributions of several individuals and their respective agencies. I would like to take this time to thank those individuals.

I would like to thank Tom Turner, project administrator, and the entire TASC staff for their cooperation in this effort. I was allowed free access to all project records, and at some time during the year, each staff member either helped collect data or helped to improve my understanding of TASC.

I owe thanks to Dr. Jerry Feulner and Dr. Irvin Williams of the Drug Abuse Program for allowing me free access to client treatment files, and to Charlie Fritch for making client urinalysis reports available.

Lieutenants Charles Grant and Odis Davis of the Escambia County Sheriff's Office were helpful in providing information concerning criminal histories and jail operations, respectively. In addition, the staff of the Clerk of the Courts Office was helpful in locating judicial outcome data.

Finally, I would like to thank Bob Sternhell for his assistance and guidance during the course of the year.

EXECUTIVE SUMMARY

The Phase One evaluation of the Escambia TASC project has provided the following results and conclusions:

1. The TASC system is operating as an effective mechanism for the identification, diagnosis, treatment referral, and supervision of drug-abusing criminal offenders in Escambia County.
2. TASC's contribution to reduced criminal activity and drug usage among clients is evidenced by a 68% client success rate during the study year. In addition, only 5.6% of TASC clients were rearrested while in treatment, and 96% of TASC urinalysis reports indicated no drug usage among clients.
3. The analysis of client characteristics provides a clear picture of the "average" TASC client. Based upon the results of this analysis, one could expect the TASC client to be a young, white male, single, with less than a high school education, working in a low-skilled job, using a variety of different drugs, and having a history of criminal arrests.
4. Based upon the judicial outcomes of a comparison group, TASC is perceived as a more severe sanction than possible incarceration by those choosing not to participate. This indicates some slack in the leverage exercised by the judicial system to direct a potential client to participate in TASC.

5. An analysis of the costs associated with TASC indicates that the cost of processing a client through the TASC system is approximately \$2.06 per day. When compared to the traditional costs of incarceration, the per diem costs of TASC and treatment are significantly less (approximately one-half) for outpatient treatment, and approximately twice as expensive for residential treatment. On the average, the per diem costs of TASC and treatment are approximately 23% higher than the mean per diem costs of incarceration.

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INTRODUCTION AND PROBLEM STATEMENT

Introduction

The Treatment Alternatives to Street Crime (TASC) program was developed in 1972 as a nationwide drug treatment/referral program aimed at stemming the sharp increases in drug abuse and drug-related crime. The TASC program evolved from observations that many drug-dependent persons were engaged in the commission of street crimes in order to support their habits and were recurringly arrested, released, and rearrested.¹

The TASC program attempts to disrupt this cycle by identifying drug abusers as they enter the criminal justice system, and screening them for their treatment needs. TASC then monitors those offenders placed in treatment and reports their progress to the proper component of the criminal justice system.

The treatment strategies underlying the TASC program imply the removal and treatment of those drug offenders requiring services whose criminal careers might be influenced by the delivery of those services. This delivery of treatment services provides drug abusing individuals with a more effective alternative to normal criminal justice system processing.

On June 7, 1977 the Law Enforcement Assistance Administration awarded the Escambia Board of County Commissioners a grant in the amount of \$143,910 to be used in conjunction with the \$15,990 local matching funds supplied by the County for the implementation of the Escambia TASC project. Through a

contractual agreement, the TASC project was implemented with services provided by the Community Mental Health Center of Escambia County, Inc.

The TASC project focuses primarily on the heroin/opiate abuser because of the severity of the problem and its associated costs, and because of the relationship between heroin/opiate abuse and criminal activity. Specifically, the Escambia TASC project serves the following functions:

- identifying drug abusers who come into contact with the criminal justice system and offering those eligible the opportunity to participate in the TASC project;
- diagnosing the drug abuser's problems and recommending the appropriate treatment;
- monitoring the performance of TASC clients and returning those in violation of TASC requirements to the criminal justice system for appropriate action;
- counseling TASC clients about treatment needs and providing crisis intervention and other necessary services;
and
- managing the project, conducting research, and evaluating client progress.

Problem Statement

The purpose of the present study is to determine the effectiveness of the Escambia TASC project in reducing the incidence of drug abuse and drug-related crime among TASC clients. The present study represents the first of a two-phase evaluation of TASC. Because it is inappropriate to measure the long-range impacts of TASC after one year of operation, Phase One of the evaluation will focus on the analysis of the TASC process as described above. Phase Two of the evaluation will focus on the project's long-range impacts on both the criminal justice and treatment systems.

The "method of rationales" (Figure 1) provides those unfamiliar with TASC with a conceptual framework of the logic underlying TASC. By describing TASC as a series of assumptions about successive events, the method of rationales demonstrates to the reader exactly how TASC is supposed to operate.

Phase One of the evaluation, by focusing on process, will examine the relationship between the immediate results and the inputs and activities of the project. The analysis of process is significant where the evaluation indicates that a project is not working as expected. By locating the source of the failure, it is then possible to modify the project so it will work correctly. Phase One may then be seen as a feedback mechanism to provide project staff and decision makers with information about how well TASC is working.

Phase Two of the evaluation will focus on project impacts.

Figure 1. T.A.S.C. METHOD OF RATIONALES

	INPUT	ACTIVITIES	IMMEDIATE RESULTS	OUTCOMES
STATED	Personnel .Project Director .Screening Interviewer (2) .Intake Counselor .Court Liaison .Juvenile Court Liaison .Tracking Coordinator .Secretary	Identification and screening of potential clients	Reduction in jail overcrowding	Reduction in recidivism rates for project clients
	Equipment .Office .Van	Referral to treatment	Reduction in illicit drug use	Reduced human and fiscal costs to the criminal justice system and society
	Office Space Office Supplies Phone	Monitoring of clients	Reduction in drug-related crimes	
	Contractual .Urine Screen .Evaluation (RPC)	Direct Service delivery	Reduced arrests	Linkage between the criminal justice and treatment systems
		Administration/Management	Increased referrals from criminal justice and treatment agencies	
IMPLIED/UNANTICIPATED	Escambia County Community Mental Health Center Drug Abuse Program	Transportation of clients between jail and intake	Employment/job retention	Improve quality of justice
	.Personnel .Lab facilities .Office facilities .Other resources	Urinalysis/drug usage tests	Family stability	Increased criminal justice system efficiency
	Cooperative agreements .Law enforcement agencies .Correctional agencies .Court agencies .Treatment agencies	Establish referral procedures	Revitalized health	
			Improved economic status	Increased treatment system efficiency

Conducted at the end of the second year of project operation, Phase Two will examine the extent to which the long-range goals of the project have been realized.

The specific objectives of the present study (Phase One) are as follows:

1. To monitor the objectives of the TASC project, focusing on the quality and use of project inputs and activities.
2. To examine social, historical, and demographic characteristics of TASC clients, and generate a "client profile".
3. To analyze the extent to which TASC, within its judicial context, is able to function as an effective alternative to incarceration for those choosing to participate.
4. To examine the costs of TASC and treatment in comparison with the costs of incarceration.

It is the intent of the evaluator, through the results derived from the analysis of the above study objectives, to provide both project staff and County policy makers with the most accurate, timely, and useful information possible regarding the operations and results of TASC during its first year of operation.

* * * * *

Footnotes

¹National Institute of Law Enforcement and Criminal Justice, "Treatment Alternatives to Street Crime (TASC)", Washington, D. C.: U. S. Department of Justice, 1976, p.1.

STUDY OBJECTIVE ONE

TO MONITOR THE OBJECTIVES OF THE TASC PROGRAM, FOCUSING ON THE QUALITY AND USE OF PROGRAM INPUTS.

Screening

The TASC screening component serves the function of identifying those drug abusing individuals coming into contact with the criminal justice system, and offering those eligible the opportunity to participate in an appropriate treatment program. To do this, TASC screening interviewers must (1) review the arrest/booking logs at the county jail and juvenile detention facility; and (2) screen and interview those individuals most likely to have a drug problem. Those individuals that are identified as having a drug problem, and volunteer to become TASC clients, are referred by the screening interviewers to the intake component for intake and diagnosis.

The objective of the TASC screening component is to screen 100% (approximately 900) of the drug abusers entering the criminal justice system, and to refer 300 to intake for diagnosis and evaluation. Given that TASC does not utilize screening interviewers on an "around the clock" basis, it is unrealistic to assume that 100% of the drug abusing individuals entering the criminal justice system will be identified by TASC. Some percentage of this target population will be released on bond before screened by TASC. It seems more realistic then, to focus the evaluation of the TASC screening component on whether

or not approximately 900 drug abusing individuals were identified, with 300 referred to intake for diagnosis and evaluation.

TASC screening activity occurred primarily at two locations: the Escambia County Jail, where potential adult clients were screened; and the Escambia County Juvenile Justice Center, where potential juvenile clients were screened. Tables 1 and 2 provide a breakdown of TASC screening activity during the first year of project operation.

As indicated in Table 1, TASC screening staff reviewed a total of 5,798 adult arrests from October 21, 1977 to October 31, 1978 and screened 1,328 potential clients. Of these 1,328 potential clients screened:

- 313 potential clients were interviewed by TASC screening interviewers and referred to intake for diagnosis and evaluation of their treatment needs;
- 137 potential clients were interviewed but did not volunteer to participate in TASC;
- 820 potential clients were interviewed but stated that they did not have a drug problem;
- 9 potential clients could not be interviewed; and
- 49 potential clients refused to be interviewed.

On December 22, 1977, TASC requested permission from LEAA to screen and accept juvenile clients. Approval was granted on January 9, 1978, and TASC began screening potential juvenile clients on February 1, 1978. The December 22, 1977

memorandum stated that TASC would screen approximately 40 potential juvenile clients per month, with 10 interviewed and referred to intake, and 5 placed into treatment.

Since February 1, TASC screening staff reviewed a total of 114 juveniles arrested and held at the Escambia Juvenile Justice Center. Of this total, 90 potential juvenile clients were screened, with 87 interviewed and 82 referred to intake for diagnosis and evaluation of treatment needs.

The above juvenile screening activity represents an average of 10.0 potential juvenile clients screened per month, 9.7 interviewed, and 9.1 referred to intake. Thus, TASC did not achieve the level of juvenile screening activity specified in the memorandum of December 22, 1977. It is important to note that, due to confidentiality restrictions, potential juvenile clients were screened by Division of Youth Services personnel. Thus, TASC did not have access to the total juvenile population, as they did with adults. The juvenile screening objectives were formulated on the assumption that TASC would have access to the total juvenile population.

By screening a total of 1,418 potential adult and juvenile clients, and by referring a total of 395 potential clients to intake, TASC has achieved the overall screening objectives as specified in the subgrant application.

As stated earlier, it is unrealistic to assume that TASC will identify 100% of those drug-abusing individuals entering the criminal justice system. However, by estimating

Table 1. TASC Screening Activity (Potential Adult Clients)
 October 21, 1977 - October 31, 1978

Activity	Oct. 21, 1977 Apr. 30, 1978	May 1, 1978 Oct. 31, 1978	Total
Arrestee population	3,319	2,479	5,798
Interviewed and referred	174	139	313
Interviewed/non-volunteer	67	70	137
Interviewed/no drug usage	341	479	820
Unable to be interviewed	6	3	9
Refused to be interviewed	19	30	49
Total Number Screened	607	721	1,328

Table 2. TASC Screening Activity (Potential Juvenile Clients)
February 1, 1978 - October 31, 1978

Activity	Feb. 1, 1978 Apr. 30, 1978	May 1, 1978 Oct. 31, 1978	Total
Arrestee population	40	74	114
Number screened	36	54	90
Number interviewed	36	51	87
Number referred	36	46	82

the total population of potential TASC clients, one can get some idea of how efficient TASC is in identifying potential clients from this population. To estimate the total population of potential TASC clients, the evaluator reviewed the TASC screening disposition form for arrests that were street/property crimes or drug related. Using this procedure, the evaluator identified a population of 2,235 potential TASC clients.

By defining "efficiency" as the ratio of actual output to workload input, TASC's efficiency with respect to screening and referring potential clients from the total population of potential clients may be measured as follows:

$$\begin{aligned}
 \text{Screening Efficiency} &= \frac{\text{Number of potential clients screened}}{\text{Total population of potential clients}} \\
 &= \frac{1,418}{2,235} \\
 &= 63.5\%
 \end{aligned}$$

$$\begin{aligned}
 \text{Referral Efficiency} &= \frac{\text{Number of potential clients referred to intake}}{\text{Number of potential clients screened}} \\
 &= \frac{395}{1,418} \\
 &= 27.9\%
 \end{aligned}$$

Thus, TASC screened 63.5% of the estimated total population of potential clients, with 27.9% of those screened referred to intake for diagnosis and evaluation of treatment needs. Closer

examination of the TASC screening disposition forms revealed that 68% (560) of the 817 potential clients that were not screened by TASC were released on bond prior to TASC screening. This is to be expected, given that TASC does not utilize screeners on an "around the clock" basis.

Intake

The TASC intake component serves the function of diagnosing the drug abuser's problems and recommending the appropriate treatment. The objective of the intake component is to conduct psycho-social evaluations on at least 300 drug abusing individuals referred by the TASC screening component during the first year of the project.

Based upon the results of the intake evaluations, the TASC intake counselor may then recommend the individual for placement into treatment, or reject the individual at this time. TASC proposes as an objective to place 75% (225) of those drug abusing individuals referred to intake into treatment, primarily community-based.

The intake objective also states that 60 clients will be placed into residential treatment, 40 clients will be placed into in-jail treatment, and 125 clients will be placed into outpatient treatment during the first year.

Table 3 provides a breakdown of intake activity during the first year of TASC. As indicated, the TASC intake component conducted 298 psycho-social evaluations and re-evaluated 17 psycho-social evaluations already on file at the Drug Abuse Program (intake notes). This represents a total of 315 psycho-social evaluations, thereby achieving the first intake objective.

Table 3 also indicates that a total of 213 clients were admitted during the first year of TASC. This total falls 12 short of the stated intake objective of admitting 225 clients into TASC. If one defines "effectiveness" as the ratio of actual output to planned output (objective), then one may conclude that TASC intake was 95% effective in achieving this objective.

Of the 213 clients admitted to TASC, 59 were placed into outpatient treatment, 73 were placed into residential treatment, and 81 were placed into in-jail/correctional treatment. Thus, TASC intake achieved its objectives of placing 60 clients into residential treatment and 40 clients into in-jail treatment, but placed only 47% of the anticipated 125 clients into outpatient treatment.

It is important to remember that placement of a client into treatment should be based upon evaluation and diagnosis of that client's individual treatment needs, not upon some arbitrarily assigned objective. The TASC intake component has placed clients according to their treatment needs. To do otherwise would build in failure by referring a client to an inappropriate treatment component.

Table 3. TASC Intake Activity
 October 21, 1977 - October 31, 1978

Activity	Oct. 21, 1977 Apr. 30, 1978	May 1, 1978 Oct. 31, 1978	Total
Intake Evaluations			
Adult	118	113	231
Juvenile	25	42	67
Intake Notes	17	0	17
Total Intake Activity	160	155	315
Adult Clients Admitted			
Outpatient	30	14	44
Residential	24	20	44
In-Jail/Camp 5	27	25	52
Total	81	59	140
Juvenile Clients Admitted			
Outpatient	10	5	15
Residential	18	11	29
In-Jail/Boys' Base	7	22	29
Total	35	38	73
Total Clients Admitted	116	97	213

Table 4 provides a breakdown of points of entry into TASC. As indicated, the majority of clients were referred to TASC on a pretrial basis. What is important to note is that the number of posttrial, probation/parole, and other referrals during the last six months more than doubled the number of referrals from those sources during the first six months. This indicates that TASC is gaining recognition and credibility among criminal justice agencies, and a reduced reluctance on the part of these agencies to refer potential clients to TASC.

Tracking and Monitoring

The TASC tracking and monitoring component serves the function of monitoring the performance of TASC clients and returning those violating TASC requirements to the criminal justice system for appropriate action. Monitoring of clients is assumed to have a positive effect on performance, since any violations of TASC requirements would be reported to the appropriate criminal justice agency.

The major activities performed by the TASC tracking and monitoring component include (1) tracking the clients' treatment progress; (2) reporting violations and client progress to the appropriate criminal justice system representatives; and (3) following clients' court dates so that clients will be contacted regarding court appearances.

Table 4. TASC Point of Entry

Point of Entry	Oct. 21, 1977 Apr. 30, 1978	May 1, 1978 Oct. 31, 1978	Total
Pretrial	97	48	145
Posttrial	15	34	49
Probation/Parole	13	9	22
Other (Police, self, etc.)	1	6	7
Total	116	97	213

Given that TASC admitted 213 clients during the first year of operation, it is impossible to expect the tracking and monitoring coordinator to have individual contact with each client on a weekly basis. The tracking and monitoring coordinator does, however, hold weekly group sessions with those clients placed into the residential treatment component. Weekly counseling sessions are also held at the county jail with members of the in-jail treatment group. Those clients in outpatient treatment are placed under the supervision of counselors at the Drug Abuse Program with each counselor assigned 3-5 TASC clients. The counselor maintains contact with the client and reports treatment progress to the tracking and monitoring coordinator. Those clients that are not making satisfactory progress are referred to the tracking and monitoring coordinator for appropriate action.

In addition, one of the TASC screening interviewers was reassigned to track and monitor potential clients from the time they are interviewed and referred until the time they enter treatment, and to also assist with outpatient tracking. This procedure was implemented in an attempt to reduce the number of potential clients lost during this time period.

Table 5 provides breakdown of client status at the end of the year. This information may be used to determine the overall success rate of TASC through the following formula:

$$\begin{aligned}
\text{Success rate} &= \frac{\text{Successful terminations} + \text{Neutral terminations} + \text{Clients still in treatment}}{\text{Total clients admitted}} \\
&= \frac{12 + 37 + 96}{213} \\
&= \frac{145}{213} \\
&= 68.1\%
\end{aligned}$$

This means that over 68% of all clients admitted were either successfully or neutrally* discharged, or were still in treatment at the end of the study year. An evaluation of the national TASC program, conducted by System Sciences, Inc. reported that in all projects examined (n = 12), over 64% of all clients ever admitted to the TASC projects were either successfully or neutrally discharged, or were still in treatment at the end of the study year.¹ Based upon this finding, the success rate of the Escambia TASC project is acceptable.

Two significant indicators of client treatment progress are level of drug usage and level of criminal activity. If the tracking and monitoring component is effective, then one would anticipate reduced levels of both drug usage and criminal activity among TASC clients.

To determine the level of drug usage among TASC clients, the evaluator reviewed urinalysis reports located at the Detox Unit of the Drug Abuse Program, and TASC client files. A sample

*A neutral discharge refers to a case where a client is terminated from treatment prior to completion of TASC requirements, but termination is not the result of client failure.

Table 5. Client Status

Status	Number	Percent
Active at the end of first year	96	45%
Successfully completed TASC requirements	12	6%
Dropped out against advice or failed TASC requirements	65	31%
Achieved temporary success, but were not able or required to complete TASC requirements	37	17%
Terminated because of rearrest	3	1%
Totals	213	100%

of 863 urinalyses conducted on TASC clients during the study year was examined for indications of drug usage. The evaluator found that 96.3% (831) of these reports indicated no drug usage among TASC clients. Given the profile characteristics of the TASC client identified in the next section, TASC would appear to be a very effective mechanism for reducing drug usage among clients.

Of the 213 clients admitted to TASC during the study year, only 13 were arrested while active in treatment. This represents a rearrest rate among active clients of 5.6%. Nationally, only 7% of TASC clients are arrested on new charges while in treatment.² A detailed analysis of recidivism, comparing rates of TASC clients with rates of similar groups of non-TASC participants, will be presented in the Phase Two evaluation report.

The evaluator examined a random sample of 75 client files in order to assess TASC's documentation of client treatment progress. The results of this examination are documented below:

1. In almost every instance, the files of residential clients were more current and up-to-date than either outpatient or in-jail client files. Weekly treatment progress and urinalysis reports were well documented. The major area of deficiency was documentation of staff contact with clients.
2. Files of outpatient clients showed marked improvement in documentation during the last quarter. Client contact, urinalysis, and weekly treatment progress

reports were current and up-to-date for clients admitted during this period. Files of outpatient clients admitted prior to this are characterized by missing weekly progress reports and urinalysis results.

3. Files of in-jail and Camp 5 clients (adult) were generally current and up-to-date, with the exception of documentation of client contacts. Weekly progress reports and therapist's progress notes were well documented.
4. Files of juvenile clients located at the Pensacola Boy's Base were the most deficient. Many did not include screening/intake information and weekly progress reports. Files of juvenile clients admitted during the last quarter reflect improved documentation of treatment progress. The major areas of deficiency include documentation of client contact and client's legal status.

As another means of assessing the effectiveness of the tracking and monitoring component, the evaluator reviewed both the TASC files and treatment program files of a random sample of 50 clients. The purpose of this activity was to compare one set of records to the other, and to identify any inconsistencies, gaps in information, and contradictions. The results may be generalized as follows:

1. Both sets of records indicate that the TASC tracking and monitoring coordinator stayed in close and frequent contact with TASC clients.
2. The evaluator had a much better idea of the client's treatment progress after examining treatment program records than after examining TASC records. The client's progress in treatment, as documented in TASC records, was noted by phrases such as "cooperative", and "progressing well", etc. These notations are inadequate to accurately convey the client's treatment progress.
3. Although most of the treatment violations were reported in TASC records, there were some contradictions between TASC records and treatment program records regarding missed appointments, negative treatment progress, and treatment plan/contract violations.

* * * * *

Footnotes

1. System Sciences, Inc., "Final Report: Evaluation of the Treatment Alternatives to Street Crime Program, Phase II". Law Enforcement Assistance Administration.
2. LEAA Newsletter, "TASC Participation Hits 10,000". Law Enforcement Assistance Administration, U.S. Department of Justice, Washington, D.C. Vol. 4, No. 6, December, 1974, p. 15.

STUDY OBJECTIVE TWO

TO EXAMINE SOCIAL, HISTORICAL, AND DEMOGRAPHIC CHARACTERISTICS OF TASC CLIENTS, AND GENERATE AN ACCURATE "CLIENT PROFILE".

Methodology

Social, historical, and demographic information was collected from the screening and intake forms in each individual client's project records. Where information regarding a client's arrest/criminal history was missing, the evaluator searched the client's arrest file at the Escambia County Sheriff's Office for the missing information.

Findings

An analysis of the gender of TASC clients revealed that 86% of all clients admitted during the study year were male, and 14% were female. Seventy-three percent of TASC clients admitted were white, 26% were black, and less than 1% were of other races.

Table 6 provides a breakdown of the TASC client population by age. The average age of the TASC client is approximately 21.7 years, with a range from 15 to 43 years. As indicated in Table 6, the majority of clients (79%) is 25 years of age or less.

An analysis of client marital status revealed that 71% of TASC clients were single, 12% were divorced, and the remaining 17% were still married. The average level of education among TASC clients is approximately 10.6 years, with a range from 4 to 17 years of formal education. Fifty-five percent of TASC

clients were unemployed at the time of their current arrest. The majority of those with jobs were employed in labor and other low-skilled positions.

Ninety-two percent of TASC clients reported using more than one type of drug. Thirty-eight percent reported using heroin/opiates, either alone or in addition to other drugs. The most significant finding with respect to the client's drug history is that 57% were receiving drug treatment for the first time.

Table 7 provides a breakdown of the TASC client population by number of previous arrests. To demonstrate the severity of their criminal history, only previous felony arrests are included. Table 7 indicates that 37% of the client population has 3 or more previous felony arrests. It is important to note that 77% of TASC clients were charged with a felony offense leading to TASC referral.

The analysis of client characteristics provides a clear picture of the "average" TASC client. Based upon the results of this analysis, one could expect the TASC client to be a young white male, single, with less than a high school education, working in an unskilled job, using a variety of different drugs, and having a history of criminal arrests.

Table 6. Client Population Breakdown By Age

Age Cohort	Number	Percent
Less than 19 years	70	33%
19-25 years	98	46%
26-30 years	27	13%
Over 30 years	18	8%
Total	213	100%

Table 7. Client Population Breakdown By Previous Felony Arrests

Previous Felony Arrests	Number	Percent
None	34	16%
1-2	100	47%
3-4	45	21%
5-6	28	13%
7 or more	6	3%
Total	213	100%

STUDY OBJECTIVE THREE

TO ANALYZE THE EXTENT TO WHICH TASC, WITHIN ITS JUDICIAL CONTEXT, IS ABLE TO FUNCTION AS AN EFFECTIVE ALTERNATIVE TO INCARCERATION FOR THOSE CHOOSING TO PARTICIPATE.

TASC provides both the potential client and judicial system with an alternative to incarceration. The overall success of TASC, with respect to enlisting clients and reducing drug-related crimes in Escambia County, is dependent upon the performance of the local judicial system. In short, the level at which the courts prosecute, convict, and sentence the potential TASC client will determine the extent to which TASC is used as an alternative to incarceration by other potential clients.

Of the 182 potential clients who were referred to intake but did not become TASC clients, approximately 44% declined the intake interview. The majority of these apparently lost interest in TASC upon release from jail, and thus declined the intake interview. By choosing not to participate, the potential client has chosen to risk a judicial outcome rather than become a TASC client.

The assumptions underlying this choice raises important questions for the continued operation of TASC in Escambia County. The immediate question raised is "Why would a potential client choose possible imprisonment over a return to society?" Is it possible that the risk of imprisonment is so remote that it is favored over the regulations and restrictions involved in drug treatment?" If this were the case, and if the probability of prosecution, conviction and sentencing to incarceration were

relatively low, then a TASC alternative to judicial processing would represent a more severe sanction. In the absence of high rates of prosecution, conviction, and incarceration, there cannot be said to exist the judicial leverage necessary to compel the potential TASC client to choose the treatment option or go to jail.¹ Without this leverage, the very basis and rationale for TASC is severely undermined.

In order to assess the judicial leverage exercised by the judicial system in Escambia County, a study was designed to examine the judicial outcomes of a similar group of potential clients who chose not to participate in TASC. The methodology, design, and findings of that study are presented below.

Design and Methodology

The methodology and design for the present study was developed by Robert Sternhell,² and utilized in his evaluation of the Atlanta TASC Project. This study requires the selection of a group of persons arrested during the period from November 1977 to July 1978, who met TASC eligibility criteria, were referred to intake and processed exactly as those who became TASC clients, but for some reason declined to participate in TASC. Their refusal to go through TASC intake was made with the knowledge that they had a good chance of being accepted by TASC, dependent upon intake evaluation results, and that they were risking possible imprisonment resulting from their judicial outcomes.

The following criteria were used to select those persons making up the comparison group:

1. Met TASC eligibility requirements;
2. Declined intake interview and evaluation;
3. Were interviewed prior to July 1, 1978;
4. Judicial outcome (disposition) reached prior to November 1, 1978, and;
5. Had arrest records that could be found and verified.

Since 77% of the clients admitted to TASC were arrested on a felony charge, all misdemeanor arrests were deleted from the comparison group. Those cases containing contradictions and/or missing information in their arrest histories, and those cases that are still pending final disposition were also deleted. Due to the rather large number of these cases, the final comparison group was reduced to 40 cases.

Given the relatively small sample size and the number of cases deleted from the sample, the evaluator decided to test the comparison group against the TASC adult client population along a number of dimensions thought to be relevant to defining both populations:³

1. Number of felony arrests (mean and median);
2. Number having previously served time in prison;
3. Number of years served in prison (mean and median); and
4. Percent with a present or past drug charge.

The TASC juvenile client population was deleted from this comparison for two reasons. First, the majority of juvenile

clients was screened and interviewed at the juvenile detention facility, and was thus screened in a different manner than adult clients. Second, many of the cases of juvenile clients will not be certified to adult court, and will thus be processed through the juvenile justice system.

The comparison between these two groups is summarized in Table 8. As indicated, the two groups are very similar with respect to the four dimensions tested, the only difference being a higher percentage of comparison group members with a past or present drug charge. Because of the close match of the two groups with respect to the other three dimensions, the evaluator is confident that any findings resulting from the analysis of the comparison group may be accurately inferred to the TASC adult client population.

In order to assess the actual extent of judicial leverage applied to potential TASC clients by the courts, the evaluator examined the judicial outcomes of those felony offenses leading to TASC referral that were committed by members of the comparison group. The results of this examination will answer the following important questions:

1. Is TASC perceived by the potential client as an alternative to incarceration? or
2. Is TASC perceived by the potential client as a sanction more severe than incarceration?

The evaluator collected criminal histories for each member of the comparison group from the Escambia Sheriff's Office and

Table 8. Comparison of TASC Adult Client Population with Comparison Group

Characteristic	TASC Adult Clients (n=140)	Comparison Group (n=40)
A. Total Felony arrests		
1. Mean (\bar{X})	2.72	2.27
2. Median	3.00	2.00
B. Number having served time	71 (50.7%)	18 (45%)
C. Total years served		
1. Mean (\bar{X})	1.70 yrs.	1.57 yrs.
2. Median	1.00 yr.	0.00 yrs.
D. Number with present or past drug charges	69 (49.3%)	23 (57.5%)

reduced these histories to individual court events so that, for each member of the comparison group, the following questions could be answered.⁴

1. Was the case prosecuted?
2. Was there a conviction (or plea)?
3. For those convicted, what was the sentence?
4. For those sentenced to incarceration, what length was the time to serve?

These questions were answered by looking up the judicial outcome of each individual court case in the records located at the Clerk of the Court's Office.

Findings

The results of the analysis of the judicial outcomes for each member of the comparison group are displayed in disposition tree form in Figure 2, and summarized in Table 9. These results indicate that, with respect to the judicial outcomes of members of the comparison group, the judicial system in Escambia County is not exercising the level of coercion necessary to compel the potential TASC client to choose the treatment option over the risk of possible incarceration.

This may be demonstrated by examining the percentage of comparison group members who, according to Sternhell, "made what might be termed the correct decision by rejecting TASC."⁵ If one groups together all cases that were either not prosecuted,

not convicted, convicted but received probation, suspended sentences, or incarcerated for less than one year, one finds that 65% of the comparison group made the "correct" choice by rejecting TASC.

These findings raise an important question with respect to the continued operation of TASC in Escambia County: "Why are people choosing to participate in TASC?" Is their choice based upon their self-motivation to overcome their involvement in the drug-crime cycle and improve their way of life? Or is it that by choosing to participate in TASC these people simply made the "incorrect" choice, based upon the comparison group outcomes?

This question cannot be answered at this time. However, examining the rates of recidivism among TASC clients during the one-year period immediately following their termination from treatment will not only provide important information regarding the quality and effectiveness of treatment, but will also provide information regarding the TASC clients' motivation, interest and capacity for treatment. This information should allow the evaluator to make valid inferences as to why a person chooses to participate in TASC.

The recidivism study suggested above will be conducted at the end of the second year of TASC. The design and methodology for this study are attached in the Appendix of the present study.

Figure 2. Judicial Outcomes of Comparison Group Members
(With Decision Point Percentages)

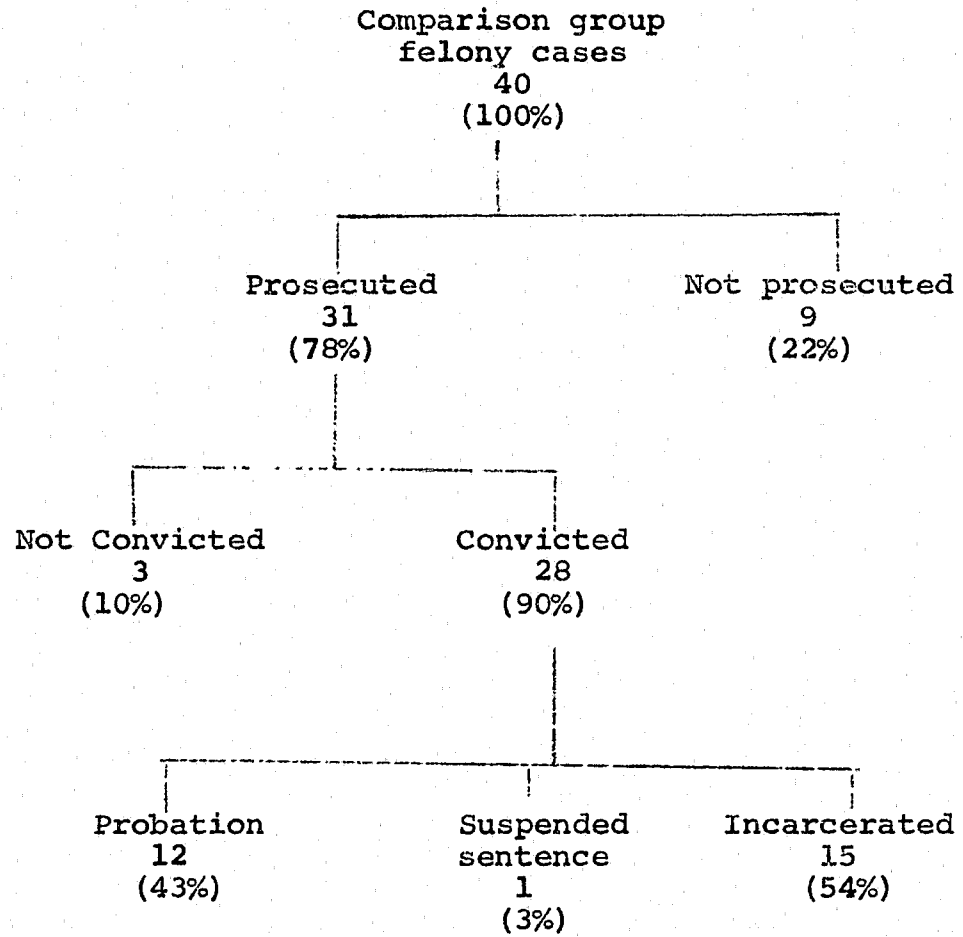


Table 9. Judicial Outcomes - Comparison Group

A.	Number of cases (n)	40
B.	Number prosecuted	31 (78%)
C.	Number convicted	28
	1. As a percentage of those arrested	70%
	2. As a percentage of those prosecuted	90%
D.	Sentencing	
	1. Probation	12 (43%)
	2. Suspended sentence	1 (3%)
	3. Incarcerated	<u>15 (54%)</u>
	Total	28
E.	Those choosing "correctly"	
	1. Not prosecuted	9
	2. Not convicted	3
	3. Convicted, received probation	12
	4. Convicted, received suspended sentence	1
	5. Incarcerated, sentenced to	<u>1</u>
	serve less than one year	
	Total	26 (65%)

* * * * *

Footnotes

1. Robert Sternhell, "A One Year Evaluation of the Atlanta Treatment Alternatives to Street Crime Program (TASC)". October, 1976. p. 47.

2. Ibid. p. 50.

3. Ibid. p. 52.

4. Ibid. p. 56.

5. Ibid. p. 59.

STUDY OBJECTIVE FOUR

TO EXAMINE THE COSTS OF TASC AND TREATMENT IN COMPARISON WITH THE COSTS OF INCARCERATION.

No evaluation of TASC would be complete without some analysis of the costs associated with the project. This section of the present study will analyze the functional and unit costs of TASC, and attempt to demonstrate TASC's cost effectiveness by comparing the costs of TASC plus treatment with the costs of incarceration.

Functional Costs

The term "functional cost" may be defined for the purpose of the present analysis as a cost allocation or expenditure for a given function. The major TASC functions include screening, intake and diagnosis, tracking and monitoring, and project administration. The total annual expenditures for each functional category are summarized in Table 10.

As indicated, the majority (71.8%) of project funds were spent in the category of personnel services. In their evaluation of the national TASC program, System Sciences Incorporated researchers found that for all projects tested (n=12), personnel costs accounted for the lion's share of expenditures, ranging from 61 percent to 89 percent of total with a median of 79 percent.¹ Thus, with respect to other TASC projects, the Escambia TASC personnel costs are within acceptable limits.

Table 10. Total TASC Expenditures by Functional Categories
(Fifteen month budget)

Functional Category	Amount	% of Total
PERSONNEL SERVICES (wages, salaries, fringe benefits)	\$114,850	71.8%
<u>Administrative Unit</u> Project Administrator	20,842	
Secretary	8,625	
<u>Screening Unit</u> Interviewers, 2 @ \$11,403	22,806	
Escort Unit	14,490	
<u>Intake Unit</u> Counsellor	14,490	
<u>Court Liaison Unit</u> Court Liaison	11,403	
<u>Tracking/Monitoring Unit</u> Coordinator	12,420	
Community Services Coordinator	9,774	
CONTRACTUAL SERVICES	\$18,000	11.3%
Evaluation	15,000	
Urinalysis	3,000	
TRAVEL EXPENSES	\$ 2,400	1.4%
EQUIPMENT	\$ 8,400	5.3%
OTHER OPERATING EXPENSES	\$16,250	10.2%
TOTAL EXPENDITURES	\$159,900	100%

In addition, administrative costs account for only 18.4% of total project expenditures. The SSI evaluation reported that a range of administrative costs from 20 to 30 percent, dependent on project size, would appear reasonable.² In view of this finding, the lower percentage of administrative costs evidenced at the Escambia TASC project may indicate the need for an increase in administrative and management support.

Unit Costs

In order to compute unit costs, one must use both the functional costs derived above and the client flow data collected earlier. The methodology used to compute unit costs is the same one used in the SSI evaluation.³ The methodology and results are both summarized in Table 11.

Given the ranges of each unit cost identified in the SSI evaluation,⁴ the unit costs of the Escambia TASC project are within acceptable limits. It should be noted, further, that the TASC process 'outcome' measure, cost per successful TASC client, is affected by the maturity of the project. The longer a project is in operation, the more likely the numbers of active clients and successful completions will increase. Other unit costs may be similarly affected, as the project matures, by cost containment, streamlining operations and improved administration.⁵

Table 11. Unit Costs

Process Indicator	Unit of Measure	Measurement	Unit Cost
Total cost per TASC client	Active clients at end of year plus clients discharged during year	$\frac{\$159,900}{213}$	\$ 751.00
Total cost per successful TASC client	Active clients at end of year plus successful terminations during year	$\frac{\$159,900}{108}$	\$1481.00
Screening and identification costs per potential client interviewed	Potential clients interviewed	$\frac{\$ 22,806}{1357}$	\$ 16.80
Diagnosis and referral costs per client admitted	Clients admitted	$\frac{\$ 28,980}{213}$	\$ 136.00
Monitoring costs per TASC client	Active clients at end of year plus clients discharged during year	$\frac{\$ 22,194}{213}$	\$ 104.00
Treatment costs per incarcerated client in treatment (TASC incremental costs, only)	Active clients in treatment at end of year plus clients discharged from treatment during year	$\frac{\$ 0}{213}$	\$ 0

Cost Comparison

In the previous section, the ability of TASC to function as an effective alternative to incarceration was examined within the judicial context. This section of the present study examines TASC's cost effectiveness as an alternative to incarceration by comparing the costs of TASC and treatment with the costs of incarceration. As indicated in Table 11, there were no incremental costs of treating in-jail TASC clients. Therefore, only residential and outpatient treatment costs will be considered for the purpose of comparison.

A request was made to the budget office of the Department of Corrections for information concerning the client per diem costs in Florida correctional facilities. Their response indicated that the client per diem cost in state prisons was \$14.06, and that client per diem cost in road prisons was \$13.53.⁶

A similar request was made to the County Comptroller's Office for information concerning client per diem costs in the County jail. However, this information was not available, but was estimated to be approximately \$11.37 per day.⁷

The Community Mental Health Center's annual evaluation report indicated that the average client per diem cost in residential treatment is \$25.37.⁸ This cost, however, includes the operating and administrative costs of both the adult and adolescent residential components. Since the overwhelming majority of TASC residential clients are in the adult treatment component, the inclusion of adolescent treatment costs would

preclude an accurate cost estimate. Based upon adult residential costs only, the client per diem cost for residential treatment is estimated to be \$23.52.⁹ TASC residential clients spent a total of 7,959 client-days in treatment during the study year, representing a cost of \$187,196.

The client per diem cost in outpatient treatment was not readily available, but was estimated to be \$3.79.¹⁰ TASC outpatient clients spent a total of 7,487 client-days in treatment during the study year, representing a cost of \$28,376.

By dividing the total treatment costs (\$215,571) by the total number of client-days spent in treatment (15,446), one may then estimate the average client per diem treatment cost to be \$13.95.

The client per diem costs of TASC and treatment versus those of traditional incarceration are summarized in Table 12. As indicated, the average cost of placing a client into treatment through the TASC system is slightly higher than the cost of incarceration in state prison (+13%) and road prison (+18%), and much higher than the cost of incarceration in the county jail (+40%).

One should remember, however, that this cost analysis provides a comparison of the daily costs of TASC and treatment versus the daily costs of traditional incarceration. As such, it does not address the critical issue of cost savings to the criminal justice system as a result of TASC. The overall cost savings to the criminal justice system will be examined in the

Table 12. Costs of TASC and Treatment Versus Costs of Incarceration

Service Component	Client per diem cost
TASC and Residential Treatment	\$25.88*
TASC and Outpatient Treatment	5.85*
Mean TASC and Treatment (\bar{X})	16.01*
State Prison	\$14.06
Road Prison	13.53
County Jail	11.37
Mean Incarceration (\bar{X})	12.99

*Represents treatment cost plus \$2.06 average TASC client per diem cost.

Phase Two evaluation of TASC (see Appendix for evaluation design), and are dependent upon the following factors:

1. Number of clients admitted;
2. Treatment modalities utilized (where clients are placed);
3. Treatment costs;
4. Average length of treatment; and
5. Client recidivism rates.

* * * * *

Footnotes

1. System Sciences Incorporated, "Final Report: Evaluation of the Treatment Alternatives to Street Crime Program, Phase II", June 30, 1978. p. 90.

2. Ibid, p. 92.

3. Ibid, p. 94.

4. Ibid, p. 95.

5. Ibid, p. 96.

6. This information was received through a telephone conversation with Mr. John Newman, Office of Budget and Management, Department of Corrections.

7. To estimate this cost, the total operating and administrative expenditures for the jail during the last fiscal year (\$834,187) were divided by 365 days. This figure was then divided by the average daily inmate population. A four-month sample of inmate census counts, selected at random, yielded an average daily inmate population of 201. This procedure yields an average client per diem cost of \$11.37.

8. Community Mental Health Center, "Annual Evaluation Report", 1978. p. 27.

9. The 50 residential slots are allocated according to the following matrix: 28 adult (56%)/22 adolescent (44%). Assuming that 56% of the residential treatment components expenditure of \$436,997 during the last fiscal year were incurred by the

adult component, and given an average daily population of 28.5 adult clients, this represents an adult residential client per diem cost of \$23.52.

¹⁰Client per diem costs in outpatient treatment were not readily available, but were estimated by dividing total outpatient expenditures (\$177,029) by the number of clients (128 est.). This figure was divided by 365 days to yield a client per diem cost of \$3.79.

CONCLUDING REMARKS AND RECOMMENDATIONS

Concluding Remarks

During the first year TASC was evaluated on a quarterly basis. The process orientation of the evaluation design allowed the evaluator to focus not only on program performance and activities, but also on implementation problems regarding project procedures and operations. The quarterly evaluation reports were diagnostic in this respect.

The quarterly evaluation reports identified several major problem areas during the first year. This is not unusual, however, given the magnitude and complexity of TASC. One should expect to see implementation and operational problems in any new program, regardless of size.

The first problem encountered was that a significant number of potential clients were being released on bond before they could be screened and interviewed by TASC. The evaluator recommended that TASC staff examine periods of peak arrest and bonding activity, and concentrate screening activity during these periods. This recommendation was implemented by TASC, and screening activity has been rescheduled accordingly. As a result, the number of potential clients lost in this manner has been reduced.

The evaluator identified the need for a systematic procedure to detect TASC clients that are rearrested. It was recommended that TASC screening interviewers cross-check the list of active TASC clients with the arrest/booking log daily to ensure that

clients who are rearrested do not go undetected.

A bottleneck was identified at the intake component of the TASC system during the first quarter. Potential clients were being screened and interviewed, but due to delays in deputizing the TASC Escort and modifying the transport van, they could not be transported from the jail to TASC intake (located at the Drug Abuse Program). With the correction of these implementation problems, the bottleneck has been eliminated, and clients are flowing smoothly through the TASC system.

The urine screening procedures implemented by TASC were not in compliance with those procedures specified in the subgrant application. Urine screening was not random, nor was it done on a weekly basis as specified. It was then possible for a TASC client to engage in drug usage and go undetected. The evaluator and TASC staff worked together to revise urine screening procedures to ensure compliance with the procedures specified in the subgrant application. As a result of this effort, urine screening is currently done on a random weekly basis. The possibility of a TASC client using drugs and going undetected has been greatly reduced.

A comparison of TASC case files and treatment case files revealed numerous inconsistencies, contradictions, and gaps in information. TASC's documentation of client progress did not accurately reflect actual treatment progress. The evaluator has worked with TASC staff to close the existing information gaps in client files and to ensure that TASC client treatment progress is accurately documented.

It is important to note that the above problems are not unique to the Escambia TASC program, but that these and similar problems are common to all TASC programs. By focusing evaluation efforts on improving the on-going program, these problems have been identified and corrected in the early stages of the project.

To ensure valid conclusions regarding the operation of TASC during its initial year, it is important to examine TASC in terms of both the objectives and goals of the project.

The objectives of any project represent a specific program of activities, stated in time-limited and measurable terms. In this respect, the Escambia TASC project has performed at an acceptable level during its first year of operation. The TASC screening component exceeded all of its stated objectives during the study year. When one considers that these results were achieved by only one screening interviewer, the performance of the TASC screening component is even more impressive.

The fact that the intake component achieved only 95% of the stated objective regarding client placement is not without qualification. The performance level of TASC intake has been hampered by problems ranging from delays in deputizing the TASC escort and modifying the escort van to the resignation and replacement of the TASC intake counselor. The 95% figure is, in itself, an adequate level of intake performance. However, given the problems encountered by intake during the study year, this figure too seems even more impressive. In addition, the fact that only 5.6% of TASC clients were rearrested while in

treatment and over 96% of urinalysis reports indicated no drug usage among TASC clients, coupled with a client success rate greater than 68% speak highly of the performance of the tracking and monitoring component during the study year.

It has been demonstrated that the judicial system in Escambia County is not exercising the leverage necessary to direct a potential client into TASC. Given the judicial outcomes of those potential clients choosing not to participate, TASC represents a sanction more severe than the risk of possible incarceration.

An analysis of the costs associated with TASC has indicated that the cost of processing a client through the TASC system, from screening to treatment is approximately \$2.06 per day. When compared to the costs of traditional incarceration, the costs of TASC and treatment are significantly less (approximately one-half) for outpatient treatment, and approximately twice as expensive for residential treatment. On the average, the per diem costs of TASC and treatment are approximately 23% higher than the mean per diem costs of incarceration.

One should not make invalid inferences regarding the overall cost-effectiveness of TASC from the results of this comparison. Although treatment costs are slightly higher than the costs of incarceration, it is anticipated that the TASC client will spend less time in treatment than had he/she been incarcerated. In addition, TASC is assumed to reduce the rate of client recidivism, thereby reducing the probability that clients will come

into contact with the criminal justice system in the future. These and other factors imply cost savings to the criminal justice system as a result of TASC. These savings, as well as the overall cost-effectiveness of TASC, will be examined in the Phase Two evaluation of TASC.

One should not forget that objectives are quantifiable measures of effectiveness, and as such, project staff often become too concerned with meeting the requirements for the number of clients, referrals, intake summaries, etc. Project objectives too often focus on the quantity and not quality of the project. This is where the second point of view, goals, becomes important.

The goals, or long-range outcomes, of a project are dependent upon the quality of services provided to clients. In the case of TASC, the immediate and long-range goals of the project are dependent upon the quality of treatment received by clients.

During its second year, the Escambia TASC project will expand to include alcohol abusers as well as drug abusers. The Phase Two evaluation, to be conducted at the end of the second year, will not only monitor the objectives of TASC, but will examine the effects of TASC on client recidivism, client treatment outcomes, and cost savings to the criminal justice system as a result of TASC.

Recommendations

It is impossible to pass absolute judgement on the Escambia TASC Project after its first year of operation. For this reason, any recommendations regarding the institutionalization of TASC and the assumption of project expenditures by local government after Federal funding expires will be contained in the Phase Two evaluation of TASC. The recommendations contained in the present study will address issues that relate to the improved performance and efficiency of TASC during year two.

In addition to those recommendations suggested by the evaluator in the quarterly evaluation reports and implemented by TASC during the study year, the following recommendations are in order:

1. TASC should work to improve its documentation of all events that affect the client's legal and treatment status.
2. Delays in completing the TASC monthly statistical reports have caused incomplete and inaccurate reporting of TASC performance. It is recommended that all necessary statistical information be accumulated and verified during the first week of each new month.
3. Given the client profile characteristics identified in the present study, TASC should improve its documentation of those admitted to TASC, those rejected at intake, those interviewed and referred to TASC but reject TASC, and the reasons for rejection (either by TASC or by the individual).

A P P E N D I X

Phase Two Evaluation Design and Workplan

TASC Year 2 Process Outcome Evaluation Workplan

KEY PROJECT EVENTS TO BE MEASURED			
	Screening Activity	Intake Activity	Tracking & Monitoring Activity
Measures of effectiveness	#Screened #Referred #Interviewed %potential clients screened	Screening efficiency Referral efficiency	#Intake evaluations conducted #Referred to each treatment modality Point of entry of TASC clients
Information available?	Yes-screening disposition forms and monthly statistical summaries, as well as Master summary log book	Client success rate Treatment progress Level of client drug usage Level of client criminal activity #Treatment violations	Yes-arrest records, urinalysis records, client files (TASC), treatment files, TASC monthly statistical summaries
How will information be obtained?	Obtained from above data sources	Obtained from above data sources	Obtained from above data sources
Who will obtain?	Evaluator and TASC staff	Evaluator and TASC staff	Evaluator and TASC staff
When is information needed?	End of 6th month End of 12th month	End of 6th month End of 12th month	End of 6th month End of 12th month
Can data be verified, and how?	Verified by comparing TASC monthly statistical summaries with screening disposition form and arrest/booking log	Verified by comparing monthly statistical summaries with separate intake log book	Verified by comparing TASC records against arrest records, urinalysis results, DAP treatment files
How will information be analyzed?	Compare actual screening activity to planned activity; compare year 1 activity and year 2 screening activity	Compare actual intake activity to planned activity; compare year 1 intake activity with year 2 activity	Compare actual tracking/monitoring activity with planned activity; compare year 1 activity with year 2 activity
How will information be used? (assumptions)	To test the assumption that TASC screening component is an effective mechanism for the identification and referral of drug-abusing criminal offenders	To test the assumption that TASC intake component is an effective mechanism for evaluating the treatment needs of potential clients and placing client in appropriate treatment	To test the assumption that tracking and monitoring of client progress will have a positive effect on client treatment progress

TASC Year 2 Impact Assessment Workplan

KEY PROJECT EVENTS TO BE MEASURED				
	Recidivism		Treatment Outcomes	Costs
Measures of effectiveness	#Arrests Felony arrest? Prosecution? Conviction?	Incarceration? How long incarcerated?	#Successfully terminated #Terminated due to rearrest #Terminated due to poor performance #Terminated due to absconding #Terminated neutrally	Functional costs Unit costs Costs of treatment Costs of incarceration
Information available?	Yes-monthly statistical summaries, TASC client files, Sheriff/Court records		Yes-monthly statistical summaries, TASC client files	Yes-CMHC and County Comptroller's financial records
How will information be obtained?	Obtained from above data sources		Obtained from above data sources	Obtained from above data sources
Who will obtain?	Evaluator and TASC staff		Evaluator and TASC staff	Evaluator
When is information needed?	End of 6th month End of 12th month		End of 6th month End of 12th month	End of 6th month End of 12th month
Can data be verified, and how?	Cross-check client files with arrest/court records		Cross-check treatment files and client files	Cross-check individual vouchers, purchases, etc.
How will information be analyzed?	Comparison of recidivism measures for TASC graduates and 3 comparison groups		Client success rate	Compare costs of treatment and incarceration: Examine total cost savings to CJS as a result of TASC
How will information be used? (assumptions)	To test the assumption that TASC will reduce recidivism rates for graduated clients		To test the assumption that TASC will reduce levels of drug use and criminal activity among clients	To test the assumption that TASC represents a cost-effective alternative to traditional incarceration

END