

Evidence-Based Practice in Los Angeles County Corrections: A Top-5 List of Real-World Foes

One of my goals—and passions—is to bring evidence-based practice to the world of crime prevention and intervention. There is such great potential for changing the attitude, behavior, and circumstances of people headed for, or cycling through, the justice system. Research shows that we could rescue so many families and communities from the devastation of violence, drug abuse, unemployment, and hopelessness if we were just to do things right. We could save billions of taxpayer dollars in the process.

This is especially true in the world of reentry. It begs the question: Why are we as a society not following the research? Why do we continue to invest in efforts that have always failed and are guaranteed to fail in the future?

One answer is that the real world is messy. A recent scene in my office is an example. At around 8:00 p.m. on a Tuesday evening, a 27-year-old inmate who was about to be released from jail asked, for the first time, for help from the Community Transition Unit (CTU), a small unit in the Los Angeles County Sheriff's Department that provides transitional services for inmates. Within 2 hours, the inmate was in a taxicab headed to a small apartment that housed three other men. (There were no services attached to basic housing arranged by the CTU.) He was driven to an office the next day to sign up for General Relief benefits, including \$221 per month.

The CTU does not have the staff for any significant follow-up case management, and we are actually prohibited by law from providing it. I have no idea what happened to that former inmate, but we hope our support gave him the break he needed to start a new life.

Evidence-based practice? Clearly not. The best we could do given the real-world circumstances? Clearly yes.

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What Is Evidence-Based Practice?

A comprehensive explanation of evidence-based practice cannot be found in one, simple place. My understanding of evidence-based practice comes from many sources. For those who are just learning about it, a few of my favorite sources are the Washington State Institute for Public Policy (www.wsipp.wa.gov), the articles of Dr. Edward J. Latessa of the University of Cincinnati (www.uc.edu/criminaljustice), and the online library of the National Institute of Corrections (www.nicic.org).

Evidence-based programs are so exciting because they give us a guide to success. Their effectiveness is supported by the highest available form of empirical evidence—a large number of controlled studies. Simply stated, such studies show that successful programs have some common ingredients:

- The client is assessed properly;
- The case worker focuses on the client's traits that lead to criminal activity (known as criminogenic needs), such as attitude and impulse control;
- A cognitive-behavioral approach is used to help the client change, and efforts focus on high risk clients; and
- The program model is followed with fidelity.

Los Angeles County's CTU is attempting to shift its practice to match the research. Ideally, this means that upon an inmate's entry into jail, a highly trained person would assess the inmate and create a case plan to meet his/her criminogenic needs, and then the agency would provide a high-quality, cognitive-behavioral-based program and continuity of care after release. The challenge is a big one.

Ranking the Obstacles

The term "evidence-based" evokes an image of scientific sterility, and agency personnel often forget that mundane-sounding challenges can get in the way of implementation. My experience has shown me several of the real-world foes of evidence-based practice.

These are the "Top 5" challenges that keep me awake at night. I'll also share what we in Los Angeles County are doing to meet those challenges. My aim in sharing these strategies is to help guide those who are about to embark on the challenge of implementing this type of change in their own organizations.

Obstacle #5—Hierarchy of Needs

Running any city is a complex operation. The task of running a jail full of violent, dysfunctional, and unhealthy people going to and from court each day is mind-boggling. In other words, jails are constantly in survival mode. Also significant is that jails are run by law enforcement professionals, not social workers. Thus, reentry work often falls to the bottom of the priority list.

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Los Angeles County provides a perfect example. The Los Angeles County jail is the largest in the nation, with an average daily population of more than 19,000 inmates and over 200,000 inmates cycling through each year. About 10% of these inmates, or roughly 20,000, are homeless persons who present myriad challenges as they cycle through the jail each year. Our jail also is the largest mental health institution in the nation, with over 1,400 inmates each day receiving psychotropic medications. There also is a very large population of violent gang members. Under these pressures, it is easy to see why historically, reentry issues could get lost.

In 2000, Sheriff Lee Baca addressed this challenge by creating the Community Transition Unit, staffed by 18 custody assistants, four sergeants, and a unit commander. Operation of the unit is supported by the Inmate Welfare Fund—revenue earned when inmates make phone calls or purchase food, personal hygiene items, or over-the-counter medications. This funding protects the unit from the ups and downs of the county budget. The downside is that California penal code requires that inmate welfare funds be spent only for inmates inside the jail walls, which prohibits the CTU from providing direct services to ex-inmates after release. We successfully sponsored a bill that will allow us, beginning in 2008, to spend money for 14 days of post-release services. We hope this will provide a small increase in flexibility.

Sheriff Baca also brought in a civilian director, Karen Dalton, to oversee the CTU as well as to manage all jail programs. In July 2006, I became the first civilian head of the unit. Civilian personnel are important to the equation because they do not move around like sworn employees tend to do.

We have been able to create, from the basis of a stable CTU, a slow and steady drumbeat to raise awareness of reentry issues:

- At policy meetings around the county, the Sheriff's Department is there to make sure reentry issues are addressed.
- At weekly meetings with the Sheriff and his chiefs, success stories about inmates who changed their lives with the help of the CTU are added to the discussion along with "cop" stuff.
- A data systems upgrade and web-based case management system have been given top priority.
- There is political support for adding more CTU staff.
- The department's Training Division funded training on motivational interviewing, evidence-based practice, and case management.
- Through a strong partnership with the administrative office of our County Board of Supervisors, I received permission to hire our first social worker to bring in needed expertise.

In years past, these efforts would not have been on the radar screen. In other words, we now have buy-in, a crucial first step in making evidence-based work

possible. We have significantly raised reentry in the hierarchy of agency priorities by showing its payoff to the agency and community.

Obstacle #4—Funding

I list funding for doing high-quality work as Number 4, instead of Number 1, because the amount of money missing from the pie is not large. My unit has 25 employees and a \$2.1 million budget. A number of non-profits receive funding to do reentry work, and government agencies, like California State Parole, Los Angeles County Probation, and the Los Angeles County Department of Public Social Services (DPSS) spend hundreds of millions of dollars per year on ex-offenders.

The problem with funding is that very little money is being spent with a focus on shifting to evidence-based work. There is scattered money available for training and outcome measures, but that does not come close to helping organizations achieve real change. To really succeed with evidence-based practice, funders must understand the difficult steps needed to implement proven practices.

- Employees must be trained—by the right people—and trained again, and then trained again to reinforce changes in the way they work.
- Staffing models must be shifted to free people up to do more intensive work, which usually requires at least a small increase in staffing.
- Outcomes must be measured quickly and continuously so that there is an information feedback loop.
- Finally and perhaps most critically, someone who understands and believes in the process must be given the time to drive it.

In Los Angeles County, we have begun to increase funding to make these things happen. The Sheriff's Department hired a civilian with experience in these issues (me) to run the unit. We received the needed funding to hire a social worker and get training. We asked for and received \$1.5 million from elected officials—our Board of Supervisors—to fund a small pilot to demonstrate how inmates should be assessed and case-managed. We trained two staff members on a cognitive-behavioral program called Moral Reconciliation Therapy (MRT) and now plan to begin delivering MRT to inmates. Finally, we also have started a process to move a number of female inmates into a treatment dorm to give us greater flexibility in delivering inmate programs.

While we have a long way to go, these are examples of small steps to shift our day-to-day practice. The amount of money we are investing is relatively small, but it is all focused on our goal of change.

Obstacle #3—Logistical and Systemic Hurdles

There are plenty of hurdles in the general community to evidence-based correctional practice. In jail, hurdles can grow exponentially. For example, because



inmates may be released directly from court or at 2:00 a.m., and transportation from the jail is not fully funded, our ability to deliver smooth, continuous case management is hampered. Jail stays are often short, and they can be made shorter by an early release policy to ease overcrowding. Inmates are constantly moved around the facility based on their security status and crowding, making it difficult to sign them up for and keep them in programs. Some drug treatment programs require from 100 to 300 hours of classes to be effective, and often it is difficult to find jail inmates who are in one place long enough to participate in class for that many hours. The list goes on.

In Los Angeles County, these hurdles often look like mountains given our massive population numbers and agency size. We book and release between 500 and 800 inmates daily. To chip away at the obstacles we face, we are again taking one step at a time.

- We are upgrading our data systems to help track the movement and release dates of inmates.
- We are building relationships with public defenders to coordinate the release and sentencing process.
- We are building relationships with community providers to start the case management process as soon as possible and create a smooth transition upon release.
- We are going through a planning process to shift the way we take on clients, with the goal of focusing on “frequent flyers” so we get more results for our efforts. I would feel better intervening with 100 high-risk people who cycle through the jail over and over again, using proven programs, rather than providing 2,000 random people with ineffective services, however sincerely intended.

Obstacle #2—Bureaucracy

In my prior lives as a lawyer and a staffer for an elected official, I complained about “bureaucracy,” but I never really knew its horrors until working at the front lines of government. The bottom line is that government processes have been set up with actually getting things done as the last priority.

Personnel rules are concerned, to an incredible extent, with making sure a person’s duties match a description of a specific position on the books. If it so happens that you want to hire someone to do, for example, high-quality assessments or cognitive-behavioral programming, but there is no position listed on the books for those duties (and of course there is not), it can take a year just to create the position on the books.

As another example, rules around contracting show extreme sensitivity about being fair and not showing bias toward or against any particular contractor. The fact that it is almost impossible to hire a competent company within a reasonable amount of time is just shrugged off as an accepted inconvenience.



No one can really take the blame for these obstacles. These layers of rules have been added over years and years. But somewhere along the way, the purpose of hiring and contracting—that is, to actually benefit the public—got lost.

Bureaucracy is one of the greatest affronts to doing evidence-based work. To defeat this foe takes persistence, patience, and the awareness not to underestimate the challenge. I have started to educate policy-makers that this boring and “technical” topic can pose the greatest threat to change. I did not completely understand the reality of the situation when I worked for an elected official. It is safe to bet that many other well-intentioned people do not understand it either.



Obstacle #1—Capability

The most important question to ask when implementing a plan to change the way an organization functions is, “Who is going to do the work?” This question is too often forgotten in high-level policy meetings about evidence-based practice. The answer, very often, is that almost no one in the organization has been trained in and understands how to do evidence-based work.

Evidence-based practice is relatively new, and much of it has been couched in mental-health lingo that can make the most interested person’s eyes glaze over. In Los Angeles County, for example, a tiny fraction of private sector or government case workers and social workers have been trained to assess clients using validated risk/needs tools or to deliver cognitive-behavioral interventions.

As a result, the best-intentioned elected official, department head, or nonprofit board can demand that staff improve the quality of work being done by their organizations, but seldom is anyone prepared and qualified to do it. To make matters worse, when you find someone who can do the work, it is difficult to hire them because of Reasons 1 through 4.

Where to Start?

Many of the strategies outlined here take significant time to implement. In the short term, the solution is to find a core group of advisors who can help you navigate the implementation of evidence-based practice. When I knew nothing about evidence-based practice, it took me over a year to find people I trusted to guide me on how to find training, how to measure quality, and how to talk about this topic in a manner that would engage and motivate organizations to change. As I work through the challenges of Reasons 1 through 4 and prepare to implement proven programs, the relationships I’ve built with my advisory team will be crucial to my success.

Jn the long term, we corrections and justice system professionals must create partnerships with universities to train our young case workers, social workers, and criminologists differently. It is becoming more and more important that they leave school with practical skills—not just theoretical knowledge—for helping offenders change their lives. Otherwise, we can have all of the funding, coordination, and political will in the world, and we still will be left without the ability to implement effective programs. ■

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