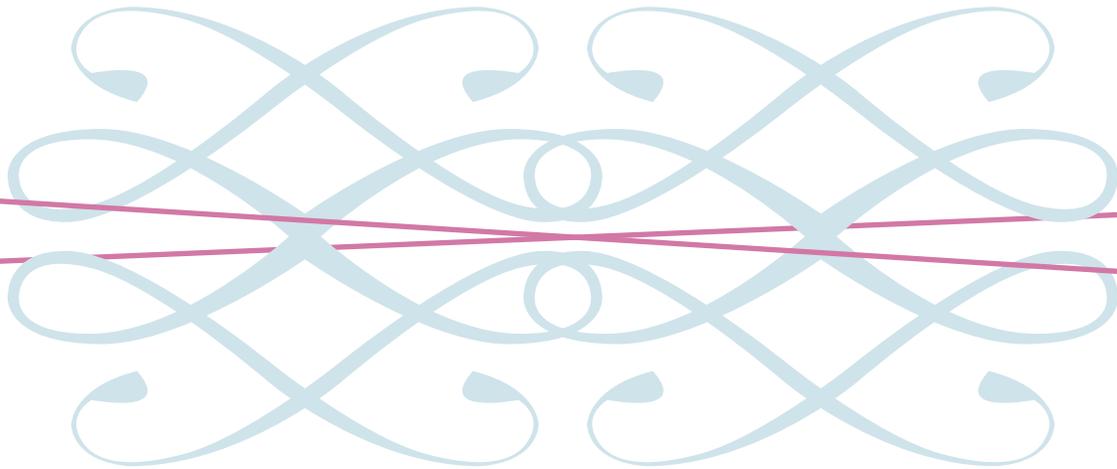# Context and Impact of Organizational Changes in State Corrections Agencies

A Study of Local Discourses and Practices in Kansas and Michigan

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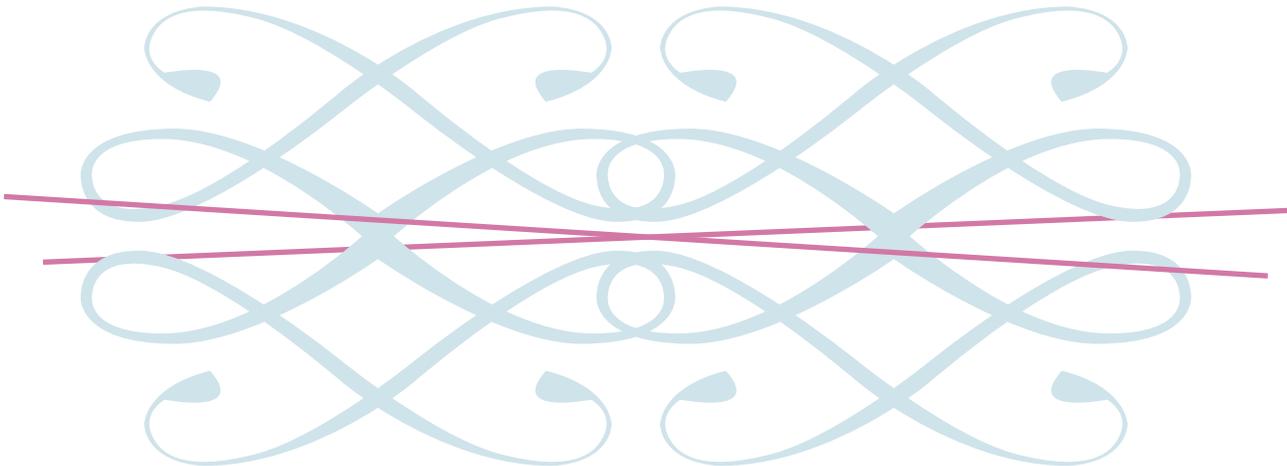
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Context and Impact of Organizational Changes in State Corrections Agencies

A Study of Local Discourses and Practices in Kansas and Michigan

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Introduction

Over the past five years, the states of Kansas and Michigan engaged in a comprehensive re-examination of their correctional systems, aiming for a better allocation of resources and more effective interventions to reintegrate offenders into the community. In Kansas, this process was largely known as the Kansas Offender Risk Reduction and Reentry Program (KOR3P); in Michigan, a similar set of reforms was developed as the Michigan Prisoner Reentry Initiative (MPRI).

While research has documented the nature of such large-scale institutional reorganizations in corrections (Austin & Fabelo, 2004; Jacobson, 2005), little is known about the specific contexts in which corrections reforms are planned and executed (for exceptions see Zimring, Hawkins & Kamin, 2001; Clarkson & Morgan, 1995). In some jurisdictions, initiatives have been primarily motivated by state-wide efforts to reduce public spending. In other jurisdictions, reforms have emerged from within corrections through more substantive collaborations between corrections managers, staff, and key external partners—governors' offices, legislatures, and agencies of technical assistance. The knowledge of "what works" in the process of planning, implementing, and executing of these system-wide reforms—as well as their challenges and pitfalls—has traditionally been limited to those directly involved in specific initiatives. From a broader perspective, it remains unclear to what extent the form and content of reform efforts are sensitive to the local social and institutional contexts in which corrections managers and staff operate. Such context may alter the structure of reforms, depending on levels of commitment and interest of key decision-makers. Local contexts can also alter the content of reforms via challenges in the implementation and execution of strategic programs. More generally, the sustainability and integrity of reforms depends on the relative availability of a wide range of internal and external resources – including leadership, technology, financial resources, and political and social support – that vary significantly across jurisdictions.

This project documents the dynamics and context of organizational change within the Departments of Corrections (DOCs) of Kansas and Michigan, focusing on how these internal and external factors shaped the recent reforms. We conceptualize these two jurisdictions as laboratories of corrections policy innovation in which measures to control prison populations and enhance service delivery were implemented despite challenging institutional and social environments. As such, our study seeks to provide an empirical foundation for the development of more general propositions regarding the relationship between effective processes of organizational change within corrections and the social context in which these changes are implemented. Documenting the source, content, rationale, and context of these changes is important for disseminating policy innovations and expanding the existing framework for understanding corrections reform.

The present report is divided into four chapters. Chapter 1 provides a brief history of corrections policy in Kansas and Michigan since the early 1980s. Chapter 2 examines the immediate context, and process of design and planning of the KOR3P and the MPRI in the early 2000s. Chapter 3 documents the process of implementation of these and other reforms guided by Evidence-Based Practices (EBP), including the realignment of internal processes as well as the overhauling of inter-institutional relations and community outreach. Chapter 4 then briefly examines the continuing internal and external challenges confronting KOR3P and MPRI. It discusses the impact of changing resource levels, staff resistance and fatigue, and evolving goals of other stakeholders on the sustainability of reforms. The last section of the report provides several recommendations for sustaining reform efforts in both Kansas and Michigan and other states.

The rest of this section provides an overview of the methods used in the current study and the selection of study sites.

Methodology

The research is structured as a comparative case study (Yin, 1994) based on the analysis of primary data (interviews, focus groups, and participant observation) and secondary data (policy directives, staff

manuals, legislation, and other relevant literature). Consistent with a number of prior studies (e.g., McNeill et al., 2009), the research is guided by qualitative methods for data collection and analysis thus identifying the nature and scope of changes in penal discourses and practices drawing on direct experiences of actors engaged in the process of corrections reform.

During the first round of data collection –December of 2007 through January of 2009 – we engaged 178 key informants in Kansas and Michigan through a series of focus groups and one-on-one semi-structured interviews. During the second round of data collection – April of 2010 through November of 2010 – we interviewed an additional 169 respondents[1]. Access to potential respondents and research sites was facilitated more effectively in Kansas thus most of the primary data was drawn from this jurisdiction (approximately 92% of research subjects). Respondents were primarily government employees of the DOCs in each state, some of which we interviewed more than once; other respondents included service providers, liaisons with other state and local agencies, and representatives from volunteer/outreach organizations that were mobilized in the process of reform in each state. Overall, we engaged 148 parole staff, 95 staff in DOC facilities, and 38 in DOC administration—the remaining 66 included local and state –level criminal justice stakeholders and providers.

To contextualize respondents' views on the process and substance of corrections reform, this study also drew on fieldwork notes from four multi-day visits to correctional facilities and parole offices in Michigan and nine multi-day visits to similar sites in Kansas. Researchers spent roughly fifteen fieldwork days in Michigan and thirty days in Kansas visiting the central offices of the DOCs and local correctional offices and facilities; these visits included three urban jurisdictions in Michigan and four urban and two rural jurisdictions in Kansas. Notes from interviews and observations were compiled and coded across a number of predetermined themes derived from prior studies on corrections reform (e.g., rationale of reforms, changes in protocols, departmental reporting practices, assessment/training instruments, formal and informal changes in practices). Fieldwork notes were subsequently merged with secondary data compiled through the systematic review of corrections policy directives, staff manuals, and legislative reports.

Site selection

The selection of Kansas and Michigan as study sites was initially defined by the participation of their DOCs in a number of long-term programs of technical assistance generally geared toward the agency-wide adoption of Evidence-Based Practices (EBP). As part of these efforts, for example, separate multi-million dollar grants were awarded by the JEHT Foundation to both DOCs between 2003 and 2007. Other private organizations and government partners also contributed decisively to the planning and implementation of these reforms—notably, the Council of State Governments (CSG) and National Institute of Corrections (NIC), among others.

State governments and agencies in Kansas and Michigan developed KOR3P and MPRI despite challenging political and institutional environments marked not only by tough- on-crime politics but also by increasing budget constraints. As such, these jurisdictions provide an opportunity to examine a broad process of organizational change and reform within corrections in an era dominated by the "new penology" (Feeley & Simon, 1992). They also provide an ideal opportunity to examine how the unique environments in which corrections reforms develop can alter the resulting content of reforms: on the one hand, these two states are similar to each other in a number of ways, including their tough approach to sentencing,[2] the prominence of public safety issues in the public discourse about corrections reform, the

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[1] The first round of data collection and analysis was funded by a grant by the JEHT Foundation. The second round of research was funded by NIC following the financial collapse of JEHT in 2008.

[2] For example, the length of stay for various violent offenses is significantly longer in Michigan than in other jurisdictions. According to the Council on State Governments (2009), prisoners in Michigan convicted of sexual assault spend 33 percent more time in custody. In Kansas, a study by the Vera Institute of Justice found that post implementation of guidelines the number of non person felonies with a presumptive prison sentence nearly tripled through 2004 (Stemen, 2004).

structuring of sentencing decisions (e.g., presence of presumptive guidelines since the early-mid nineties), the partially-decentralized nature of probation supervision, and the alternation between Republican and Democratic governors during the past twenty years (with Republican leadership through the nineties followed by growing Democratic control) (Citizens Research Council of Michigan, 2008; Jacobson, 2005; Rich, 2002). On the other hand, however, Kansas and Michigan are remarkably different across a number of additional domains that played an important role in the structuring of their penal reforms. Their corrections systems differ in terms of the nature of intermediate sanctions (in Kansas community corrections programs, for example, serve as intensive forms of probation supervision), the role of the parole board (with more authority and discretion in Michigan), and issues of infrastructure and operation associated with the size of the prison system (e.g., Michigan's prison population is about five times the size of Kansas' and nearly 13 percent of state employees in Michigan are currently in the corrections workforce compared to 8.5 percent in Kansas) (Pew Center on the States, 2008). Also, while in Kansas prison growth was largely fueled by condition violators returning to prison, in Michigan it was the result of longer imposed sentences and more strict time served requirements. Some of these differences have become increasingly significant over time. For example, corrections spending as a fraction of the state's general fund increased from 8.5 percent to 22 percent in Michigan between 1988 and 2008; in Kansas, corrections spending increased only slightly from 5 percent to 5.6 percent of the general fund during the same period (National Association of State Budget Officers, 1989, 2009).

To better understand the process and impacts of KOR3P and MPRI it is critical to consider how these similarities and differences in the social and institutional context of the reforms ultimately shaped their content and implementation.

I. The context and dynamics of corrections reform

By nearly every metric, the size of the nation's criminal justice system swelled in the past thirty years. Between 1980 and 2008, the number of adults under correctional supervision increased 298 percent, reaching an estimated 7.3 million individuals (Glaze & Bonczar, 2009; Snell, 1995). Such expansion was accompanied by a sustained increase in the bureaucracy required for the supervision of these offenders. Between 1982 and 2006, the number of judicial and corrections employees more than doubled, while the ratio of justice expenditures to the gross domestic product increased by 47 percent (Hughes, 2006; U.S. Department of Commerce, Bureau of Economic Analysis, 2008).

Kansas and Michigan were no different than the rest of the country in this regard. Between 1980 and 2008, the prison population increased 249 percent in Kansas and 221 percent in Michigan (Kansas Department of Corrections, 2008; Michigan Department of Corrections, 2008; for national figures see e.g. Harrison & Karberg, 2004). At the same time, the corrections budgets in each state expanded dramatically, rising 231 percent in Kansas and 197 percent in Michigan between 1985 and 2008 (National Association of State Budget Officers, 1986, 2009).[3] Community-based supervision also gained more prominence in each state as corrections administrators expanded the number and scope of intermediate sanctions and supervision models. In just five years, from 1980 to 1985, the probation population doubled in Kansas and tripled in Michigan and then grew another 50 percent in both states over the next five years (e.g., Glaze & Bonczar, 2009). By the late 1990s, the use of community-based sentences continued to increase; between 1999 and 2008, probation sentences increased 20 percent in Kansas and 47 percent in Michigan (Fabelo, 2004; Kansas Sentencing Commission, 2009; Michigan Department of Corrections 2000, 2009). In the 1990s, the sustained increase in the number of parolees returned to prison for violating their conditional release exerted a new form of pressure on custodial resources and modalities of supervision in each state. Between 1995 and 2001, the number of technical parole violators returned to prison increased 40 percent in Kansas and 69 percent in Michigan, exceeding the estimated rate of growth in other states (23 percent nationally) (Glaze & Bonczar, 2009; Harrison & Karberg, 2004; Kansas Department of Corrections, 2006a; Schrantz, 2008). Through the early 2000s this component of prison population growth continued to increase in Kansas, largely as the result of stricter parole supervision guidelines.

These trends presented continuous challenges to the DOCs in each state, particularly in the form of prison capacity restrictions and budget constraints. Over the course of the last thirty years, however, the DOCs addressed these challenges in different ways at different points in time. For much of the 1980s and early 1990s, both DOCs engaged in an unchallenged expansion of their prison systems to meet the growing demand for prison space. In the late 1990s and early 2000s, the states devoted increased attention to initiatives aimed at controlling the feeders of prison growth. Finally, since 2006-2007, both DOCs engaged in broader initiatives of reform—Kansas's KOR3P and Michigan's MRPI—shifting from relatively narrow policies inspired by the need to moderate prison growth to a system-wide realignment of correctional goals inspired by a new philosophy of correctional practice centered on prison reentry. The following subsections detail the evolution of these responses.

A. *Expanding capacity, 1980-early 1990s*

Although the prison populations in Kansas and Michigan have grown dramatically over the last thirty years, most of this expansion occurred in a relatively short period of time during the decade of the 1980s (Figure 1, below). Between 1980 and 1989, the prison population in Kansas grew 147 percent, according to figures by the Bureau of Justice Statistics. Over the course of just ten years, the state added over 3,600 inmates to the prison population, increasing the population from just 2,494 inmates to 6,172 inmates; it

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[3] Budget expenditures have been adjusted for inflation and comparisons were made in 2008 dollars.

took Kansas eighteen years to add another 3,000 inmates. Prison growth in Michigan followed a similar pattern, rising rapidly in the 1980s and moderately in the 1990s.

Figure 1. Prison population in Kansas and Michigan, 1980-2008
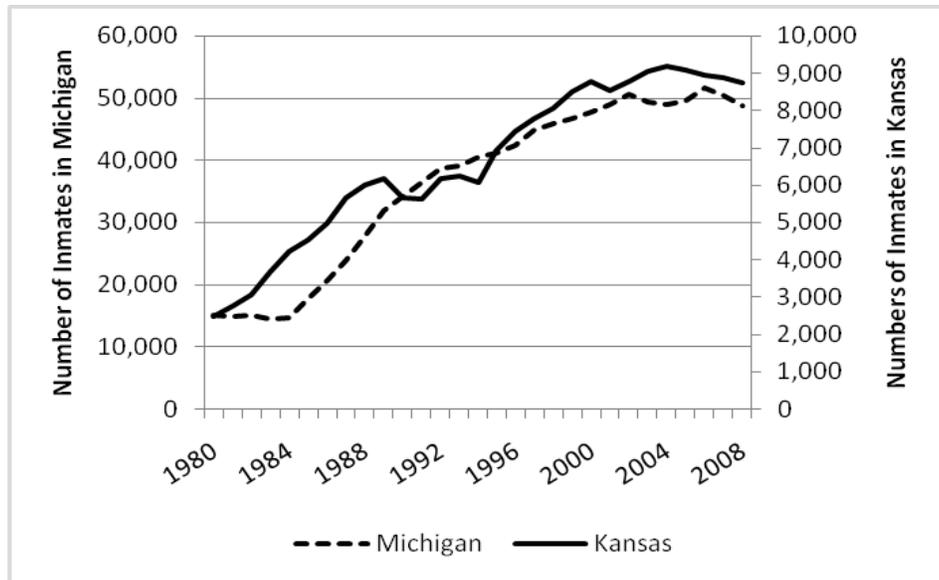
Several factors contributed to this rapid growth. In both states, tough on crime policies led to harsher statutory sentences, increases in the number of drug offenders entering prison, and decreased parole approval rates. In Michigan for example, this resulted in higher-than-average lengths of stay. In just four years, from 1985 to 1989, average prison stays nearly doubled, from roughly 25 months to 46 months; in contrast, during the same period, regional and national estimates remained relatively unchanged (Citizens Research Council of Michigan, 2008; see also Council of State Governments, 2009). Time served in Michigan changed very little over the subsequent years; by 2003, the average length of stay in Michigan remained 1.2 years longer than the national average (Citizens Research Council of Michigan, 2008).

This rapid growth in prison populations was reflected in equally rapid rises in corrections expenditures in each state. Between 1985 and 1989, corrections expenditures in both Kansas and Michigan doubled (National Association of State Budget Officers, 1986, 1990). In Michigan, this resulted in corrections accounting for a growing share of general fund expenditures, increasing from 5.5 percent of state general fund expenditures in 1985 to 9.4 percent in 1989 (National Association of State Budget Officers, 1986, 1990; see also Citizens Research Council of Michigan, 2008), a trend that would continue over the subsequent twenty years. While corrections expenditures in Kansas rose rapidly during the period as well, corrections expenditures as a percentage of state general funds remained near the national average in Kansas, increasing from 3.7 percent of general fund expenditures in 1985 to 5.5 percent in 1989 (National Association of State Budget Officers, 1986, 1990).

The rapid influx of inmates into the states' prison systems also quickly put strains on existing institutional capacities. Following five years of sustained growth, Kansas prisons were operating 34 percent above capacity by 1985 and continued to operate above capacity through 1990 (Kansas Department of Corrections, 2001). The experience in Michigan was similar. Between 1980 and 1985, Michigan prison populations were at or below capacity. However, beginning in 1986, Michigan prisons operated above capacity every year through 1990, at which time they were approximately 14 percent above capacity (Citizens Research Council of Michigan, 2008).

During this period of growth, policymakers and the DOCs in both Kansas and Michigan responded by expanding prison capacity. Kansas added 2,200 beds to the prison system between 1985 and 1990, yet still could not keep pace with prison populations (Kansas Department of Corrections, 2001). Largely as a result of capacity constraints and other related issues facing the Kansas Department of Corrections, a federal court order was issued in 1989 directing the state to develop a long-term plan to address capacity issues (Kansas Legislative Research Department, 2009). Although the order did not mandate new construction, the issue, nonetheless, resulted in the construction of the El Dorado Correctional Facility in 1991, adding over 1,000 beds to the system and expanding capacity beyond existing populations (Kansas Legislative Research Department, 2009).   While the scale is dramatically different, Michigan engaged in a similar expansion, adding roughly 10,000 beds to the state's prison system between 1986 and 1990. During this period, the state built 20 new facilities, but could not match the pace of prison expansion (Citizens Research Council of Michigan, 2008).

B. *Addressing prison growth, early 1990s-2005*

Following the rapid growth in prison populations in the 1980s, Kansas and Michigan experienced a slow-down in prison growth in the early 1990s. Between 1990 and 1994, the prison population in Kansas grew just 7 percent (compared to 36 percent growth in the previous five-year span); during the same period, the prison population in Michigan grew roughly 18 percent (compared to 79 percent growth in the previous five-year span) (Kansas Department of Corrections, 2001; Michigan Department of Corrections, 2001). This lull in growth, however, was not sustained for long. Beginning in 1995, Kansas's prison population grew at an annual rate of roughly 5 percent before peaking in 2004 (Kansas Department of Corrections, 2005); Michigan's prison population grew roughly 3 percent annually after 1994 before peaking in 2002 (Michigan Department of Corrections, 2007). During this period, the DOCs in both states continued to expand capacity to meet demand; however, by the early 2000s their strategy for dealing with increased demand shifted from a passive adaptation of expansion to a proactive strategy aimed at better controlling the feeders of prison growth.

As in many states, legislative changes enacted in Kansas and Michigan in the 1990s also sought to enhance the uniformity of key criminal justice processes while providing additional mechanisms to control long-term patterns of prison expansion. These concerns shaped a number of strategies seeking to modify the structure of sentencing and release decisions. In 1993, Kansas enacted determinate sentencing and presumptive sentencing guidelines with the explicit goal of moderating prison growth (K.S.A. §21-4701 to -4728). In addition, the enactment of sentencing guidelines marked the state's renewed interest in balancing an increase in the severity of sentences for violent crimes with a heightened use of probation for low-level offenses (Gottlieb, 1991; Rich, 2002). In the short-term, this structural reform mitigated the system's expansion and triggered a greater volume of community-based sentences (Fabelo, 2004). In the long-term, however, Kansas's guidelines could not counteract other drivers of prison expansion, notably increases in the number of persons admitted to prison for technical violations of probation or parole. Michigan similarly adopted presumptive sentencing guidelines in 1999 (MCL 777.1 et seq); some argue that any benefits of Michigan's guidelines on prison populations were undone, partially by subsequent legislative changes and by the rising incidence of probation and parole violators entering prison (Citizens Research Council of Michigan, 2008). Such phenomena, while also experienced by other jurisdictions (Glaze & Bonczar, 2008), had a greater impact in these two states.

In Kansas, the number of technical parole violations returned to prison increased 40 percent between 1995 and 2001, exceeding the estimated rate of change in other states (23 percent nationally) (Harrison & Karberg, 2004; Kansas Department of Corrections, 2006). During the same period, the number of probation violators increased by 25 percent (Fabelo, 2004; Kansas Department of Corrections, 2001) (Figure 2). By 2000, parole violators returned to prison accounted for more than 50 percent of all prison admissions (Kansas Department of Corrections, 2001). During this time, the percent of parolees returned to prison for a technical violation within one year of release increased dramatically (Figure 3). In 1992,

roughly 20 percent of parolees were returned to prison within one year for a technical violation; by 2002, this had increased to 48 percent (Kansas Department of Corrections, 2003).[4]

Figure 2. Admissions to prison in Kansas by selected type of admission, 1996-2008
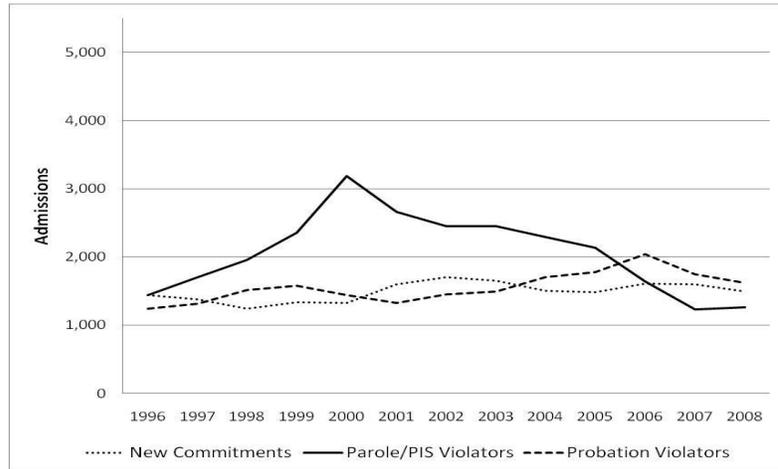
Figure 3. Parolees returned to prison in Kansas within one year of release, 1992-2008
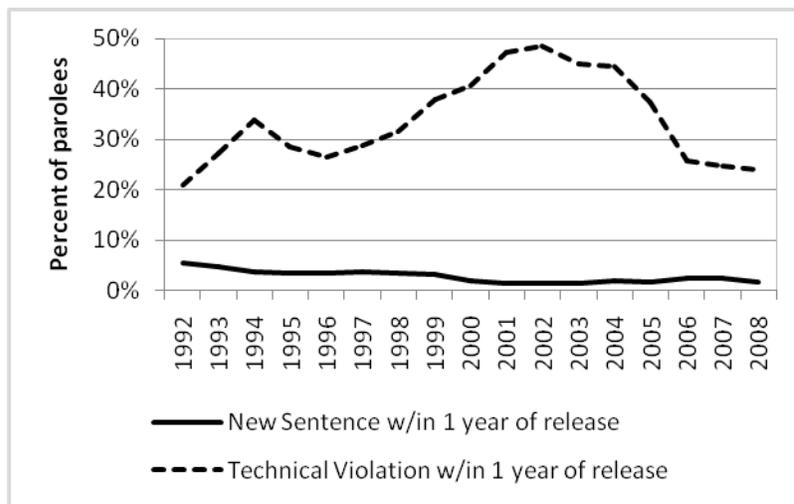
Beginning in 2000, however, the state of Kansas and the KDOC faced continued budget constraints. Between fiscal years 2000 and 2001, the state had the sixth smallest growth in general fund expenditures in the country (1.4 percent, well below the national average of 8.3 percent) (National Association of State Budget Officers, 2001:30). From 2001 to 2004, the state's expenditures exceeded revenues in every fiscal year (National Association of State Budget Officers, 2001, 2004). Moreover, during this period, the ratio of corrections expenditures to state general funds remained lower than the national average (6 percent in Kansas versus 7 percent nationally in 2003) (National Association of State Budget Officers, 2005: 60; see also Wool & Stemen, 2004). The KDOC also faced a growing divide between the size of budget requests

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[4] In contrast, the percent of parolees returned to prison for a new sentence decreased during the same period, from roughly 5 percent in 1992 to 1.5 percent in 2002.

and the amount of funds approved by the legislature, which provided some indication that budget restrictions would continue to increase over time.

Given the downturn in state revenues between 2000 and 2004, prison expansion was not considered during this period, despite a continued increase in prison populations. Several initiatives were mobilized within the KDOC to adapt to a new environment of reduced fiscal resources—for example, by limiting staff salary increases, reducing the number and scope of some programs and services, and renegotiating reimbursement agreements with county governments. More importantly, several corrections-initiated and legislative reforms were made to address both the expanding prison population and the primary feeder of prison growth – probation and parole violators. Consistent with an emerging framework centered on "Risk Reduction" and "prisoner reintegration" (Kansas Department of Corrections, 2003)—the substantive foundation of KOR3P—corrections administrators focused on reducing the number of technical violations and revocations of offenders. While this focus primarily targeted offenders on KDOC parole supervision, over time it also encompassed probationers monitored by local community corrections programs. This new approach was implemented through several policies: expanding the use of graduated sanctions for technical violations, encouraging officers to extend probation terms rather than send offenders to prison, and redesigning protocols to better allocate supervision and programming services based on new risk assessments. The KDOC also moved to enhance the treatment and supervision of individuals in prison and in the community through several programs, including, for example, the Community Offender Resource Pathways (COR-Pathways) program and the Shawnee County Reentry Program (SHRP).

The state also enacted two pieces of legislation directed at reducing the number of technical probation and parole violators entering prison: Senate Bill 323 (SB 323) and Senate Bill 123 (SB 123). Senate Bill 323, adopted in 2000, eliminated post-prison supervision for individuals admitted to prison for probation violations. SB 123, enacted in 2003, created a mandatory probation and treatment sentence in lieu of incarceration for individuals convicted of minor drug possession. These two initiatives effectively decreased the use of correctional resources by either preventing individuals from potentially returning to prison twice for condition violations (SB 323) or diverting them from prison at sentencing (SB 123). The support of policymakers in Kansas facilitated other initiatives aimed at increasing the level of inter-agency collaboration. For example, the KDOC and the Kansas Sentencing Commission began to examine jointly the impact of new pieces of legislation on prison growth. More critically, the creation in 2004 of the "3R Commission"—the Kansas Criminal Recodification, Rehabilitation, and Restoration Project—symbolized the renewed commitment of policymakers and corrections managers to the study of alternatives to prison construction and new strategies to better align sentencing guidelines and the criminal code.

The experience in Michigan was somewhat similar. Between 1995 and 2001, the number of technical parole violations returned to prison increased 69 percent, again, well above the 23 percent rate of growth nationally (Harrison & Karberg, 2004; Schrantz, 2008). By the late-nineties, prison population growth was due primarily to an escalating number of probation and parole violators returned to custody, accounting for nearly 60 percent of all admissions (Michigan Department of Corrections, 2000). Between 1996 and 2002, prison admissions due to probation violations increased 51 percent and admissions due to parole violations increased 26 percent; in contrast, new court commitments grew just 7 percent during the same period (Figure 4) (Michigan Department of Corrections, 2000, 2006a, 2009). By the end of 2002, Michigan's corrections system became significantly strained by the mounting demands for additional prison beds linked to these growing numbers of conditional-release violators. However, unlike Kansas, prison population growth was also influenced by higher-than average prison sentences and lengths of stay.

Figure 4. Admissions to prison in Michigan by selected type of admission, 1996-2008
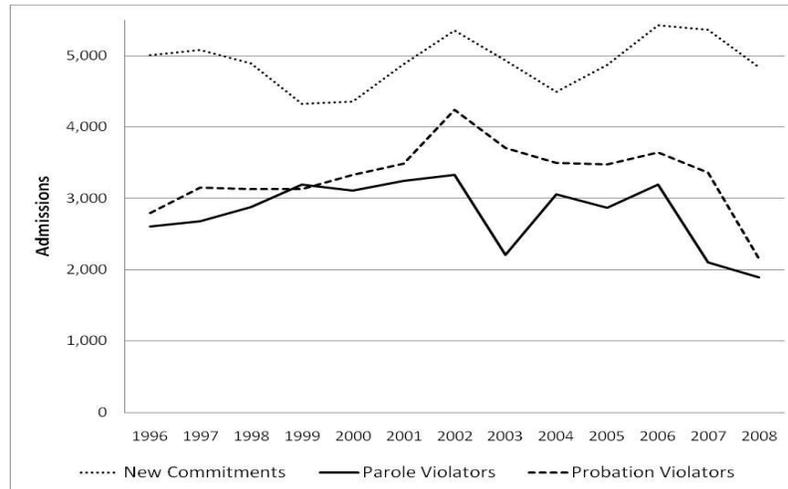

Like Kansas, the state of Michigan and the Michigan Department of Corrections (MDOC) also faced continued budget constraints. Between fiscal years 1990 and 2002, general fund expenditures in Michigan increased just 27 percent; however, general fund expenditures for corrections increased 133 percent (National Association of State Budget Officers, 1991:17; National Association of State Budget Officers, 2003a:32). By 2002, corrections expenditures consumed 19 percent of the state's general fund, the highest fraction in the United States and nearly double the fraction consumed in 1990 (National Association of State Budget Officers, 2003a:60). The state's general fund, however, began shrinking. From 2001 to 2007, Michigan's general revenue funds declined by $1.5 billion (15.4 percent) (Citizens Research Council of Michigan, 2008).

Due to the increasing weakness of Michigan's economy, policymakers and administrators were required to design new strategies aimed at reducing the feeders of prison population growth without incurring additional funding commitments. Construction plans were postponed temporarily with the implementation of a five-year plan designed in 2003 through a collaborative effort among a new cadre of recently appointed corrections officials and representatives from other agencies at the state and local levels (Caruso, 2004a; Michigan Task Force on Jail and Prison Overcrowding; 2005). The plan's positive impact on prison population control was attributed by the MDOC to the development of community-based alternatives for low-level offenders and other policies aimed at providing non-custodial responses to technical violators (Caruso, 2005). Along the same lines, the plan also included more ambitious goals inspired by evidence-based practices on prisoner reintegration—the substantive foundation of the MPRI. Legislative initiatives altering sentencing practices marked an emerging consensus among policymakers as well regarding the need to introduce structural changes to not only control prison expansion but reduce it in the long term (Schrantz, 2008). For example, in 2002, the legislature retroactively repealed several mandatory sentencing statutes and reformed parole guidelines for drug offenses (Citizens Research Council of Michigan, 2008).

These efforts were effective. Between 1998 and 2005 for example, the percentage of parolees returned to prison for a technical violation decreased significantly (Figure 5). In 1998, roughly 30 percent of parolees were returned to prison for a technical violation within three years of release; by 2005, just 20

percent were returned (Michigan Department of Corrections, 2008c).[5] Between 2002 and 2004, admissions to prison decreased by 1,300 persons per year and paroles increased by 900 persons per year (Michigan Department of Corrections, 2005; Citizens Research Council of Michigan, 2008). As a result, in 2003 Michigan experienced its first decline in both prison admissions and total prison population in over two decades. Over time, however, the gains from the Five-Year Plan began to erode as many of its initiatives were only temporary solutions to prison expansion (Michigan Task Force on Jail and Prison Overcrowding; 2005; Solomon et al., 2004).

Figure 5. Parolees Returned to prison in Michigan within three years of release, 1998-2005
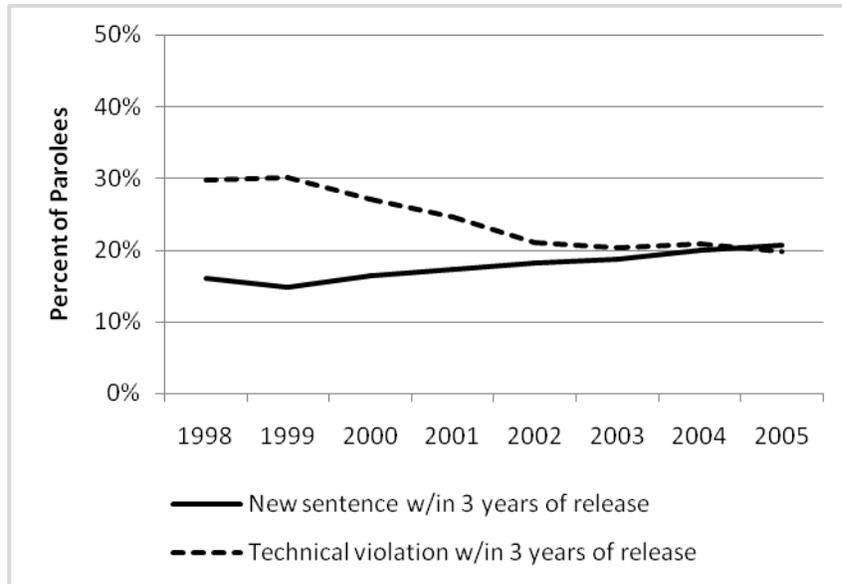
C. _Implementing broader correctional reforms, 2006-Present_

Despite efforts to address the feeders of prison growth in the early 2000s, prison populations in both states continued to increase over the following years. By 2005, official projections in Kansas estimated a 26 percent increase in prison populations by 2016; in order to meet these demands, the state would need $500 million in additional corrections spending (Kansas Sentencing Commission, 2006). In Michigan, projections estimated the prison population to increase 11 percent between 2007 and 2012, costing the state roughly $46 million additional dollars per year (Citizens Research Council of Michigan, 2008).

Such prospectus in Kansas and Michigan triggered a renewed search for alternatives to prison expansion. Both states settled on parallel strategies guided by an interest in the implementation of targeted, cost-effective interventions aimed at facilitating the reintegration of offenders while preserving public safety through more effective services and supervision. Over time, these initiatives became known as the Kansas Offender Risk Reduction and Reentry Program (KOR3P) and Michigan's Prisoner Reentry Initiative (MPRI). These reforms involved significant changes in the organizations and organizational culture of each department and the development of new tools and procedures for effectuating offender success in the community. The next section documents the nature, scope, and rationale of these changes.

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[5] At the same time, however, the percentage of parolees receiving a new sentence within three years of released increased, from roughly 16 percent to 21 percent (Michigan Department of Corrections, 2008c).

II.   Context and design of the KOR3P and the MPRI

By 2006, the DOCs of Kansas and Michigan confronted similar problems – a decade of efforts aimed at slowing prison growth and projections that put future prison populations at levels well above capacity. Both states focused on developing reforms with similar goals – improving the success of offenders reentering the community after release from prison. The planning, content, and implementation of those reforms, however, varied widely across the two states.

In Kansas, for example, the reform process that began in the early 2000s involved local stakeholders as well as a number of consultants and agencies of technical assistance, notably the Council of State Governments (Garland, 2007). Some of the newer entities that focused on the coordination of corrections policy (e.g. the "3R Commission") were also mobilized. Prison construction plans were dismissed in favor of a more ambitious attempt to curb the prevalence of revocations and to increase the likelihood of offender success through a wide array of evidence-based practices focused on risk principles (Latessa, 2004). These efforts were formally presented as an agency-wide strategy in 2006 as the Kansas Offender Risk Reduction and Reentry Plan (KOR3P), although a number of initiatives documented in the plan had been in the process of implementation since 2001-2002 (Kansas Department of Corrections, 2006b). These reforms directed the overhaul of the organizational culture within the KDOC to emphasize *risk containment* and *risk reduction* as the guiding principles of correctional practice. They also promoted increased staff discretion and responsivity over key decision points, such as referral activity, and a more targeted delivery of treatment and supervision services (Pelland & Phelps, 2007).

This renewed vision was accompanied by changes to protocols of offender management both in prison and in the community. Changes included new caseloads for high risk offenders featuring a unique division of labor between parole officers, who would focus on supervision and monitoring adherence to parole conditions, and "reentry specialists," who would focus on linking offenders to services. In some prisons, the work of unit team counselors was also strengthened via new reentry personnel in charge of providing additional programming and support for high-risk offenders. The content of the interactions with offenders was also retooled via the training of line staff in motivational interviewing and other communication techniques. Finally, the plan implemented new lines of communication within corrections through the creation of multi-discipline teams at the state level to address policy issues and at the local level to engage facilities and field staff in release planning and case management through "transition teams."

Michigan, like Kansas, engaged in a process of broad organizational change when confronted with projections indicating the need for a costly, long-term expansion of prison capacity. With support from local and national stakeholders, corrections administrators drew on the lessons of the Five Year Plan to control prison growth (Michigan Task Force on Jail and Prison Overcrowding, 2005) and to focus on the design of more ambitious policies that would structurally avert the returns to prison triggered by offenders revoked from community supervision. The new strategy was formalized in 2005 as the Michigan Prisoner Reentry Initiative (MPRI).

MPRI constituted a new evidence-based approach to curb high levels of recidivism by enhancing the provision of services and supervision for high-risk offenders leaving prison (Caruso, 2005; Duran, 2007). The policy drew upon the department's previous work on national models of offender reintegration (e.g., SVORI and the National Institute of Correction's Transition from Prison to Community), lessons learned from prior attempts at enhancing the interactions between local and state authorities, and the renewed assistance of several external actors, including the Council of State Governments and the National Governors Association (Hollander, 2006; Schrantz, 2007). The implementation of MPRI symbolized a renewed attempt by the MDOC to foster more effective interactions between corrections, local providers, and community representatives. Equally important under the new plan was the role of inter-agency collaborations in creating a multidimensional response to reentry challenges, including housing, mental health, and workforce development. Like KOR3P in Kansas, MPRI also consisted of several internal and external changes in the MDOC's approach to supervising offenders. For example, this strategy was based on the creation of individualized reentry plans by offenders, prison-based counselors, parole officers, and

service providers. This new form of collaboration was aimed at developing a seamless transition of services for high-risk prisoners being released from prison. To facilitate their reentry process, offenders received specialized programming in newly configured pre-release facilities. Under MPRI, this strategy was not only guided by new assessment instruments and supervision tools but, perhaps more importantly, by the increasing role of local community-based agencies and providers. Like Kansas, this model also relied on a more general shift in the management of offenders by corrections staff and providers though new lines of communication and alternative ways of handling sanctions and referrals.

Early outcomes of both initiatives suggest that they have had a positive impact on key indicators of system performance. In Kansas, the KOR3P has coincided with a reduction in prison admissions, fueled in part by the decrease in technical violators returned to custody. Between 2006 and 2008, probation violations decreased 20 percent and parole violations decreased 23 percent (Kansas Sentencing Commission, 2008). In 2008, the percentage of parolees returned to prison for a technical violation within one year of release was down to 24 percent (from a high of 48 percent in 2002), the lowest level since 1992 (Kansas Department of Corrections, 2009).   By some measures, recidivism linked to new offending is also declining: the number of new felony convictions for active parolees averaged 546 per year between 2004 and 2007, down from an average of 835 per year between 1998 and 2000 (Werholtz, 2008); by 2008, just 1.6 percent of parolees were returned to prison for a new offense within one year of release (Kansas Department of Corrections, 2009). Overall, the state's prison population dropped by 6.8 percent since its peak in 2004 (Kansas Department of Corrections, 2009). Corrections figures in Michigan also suggest that MPRI may have moderated the impact of key drivers of prison population growth; new court commitments and returns to prison for probation and parole violators have decreased considerably between 2007 and 2008 and parole approval rates show an upward trend that, if maintained, would accelerate the decline in the absolute number of incarcerated individuals (Caruso, 2008; Citizens Research Council of Michigan, 2008).

While the full implementation of KOR3P and MPRI is likely to consolidate some of these trends, other factors may limit the impact of such efforts. For example, new pieces of legislation, such as Kansas' Jessica's Law (K.S.A. §21-4643) (which created a twenty-five-year mandatory prison sentence for a first-time child sex offender, among other provisions) and Kansas House Bill 2707 (K.S.A. §21-4668) (which created presumptive incarceration for those convicted of a third or subsequent felony theft, burglary or drug violation) will create renewed pressures on the prison population (Kansas Sentencing Commission, 2008). In fact, some of these forces have already impacted a number of system indicators including prison populations, which showed an upward trend in 2010. A similar set of issues remain to be addressed in Michigan, including the mounting costs associated with the containment of certain offender groups (e.g. sex offenders) and the lack of changes to some of the structural feeders of prison growth (e.g., sentencing guidelines) (Council of State Governments, 2009; Hollander, 2007).

This chapter details how the DOCs in Kansas and Michigan built a foundation for reform and ultimately implemented reforms within their departments. Subsequent chapters detail organization change in the DOCs and some of the challenges continuing to face each department in their reform efforts.

A. The SVORI sites

KOR3P and MPRI drew from a wide array of earlier initiatives of prisoner reintegration carried out by the states' DOCs, or articulated through other state institutions. The reforms particularly benefited from the lessons linked to the planning and implementation of local demonstration sites participating in the Serious and Violent Offender Reintegration Initiative (SVORI). This grant-based program coordinated by the U.S Department of Justice sought to reduce failure rates for high-risk offenders through improved coordination and delivery of services and follow-up (Lattimore et al, 2005). The general model was to be implemented in different ways by different local programs. It contemplated a *facility* phase, which included the use of risk-based protocols for intake and programming, a *transition* or *pre-release* phase

emphasizing reentry planning and coordination between facilities and parole, and a *community-based* phase, aimed at developing long-term support systems for returning offenders (see for ex. Winterfield et al, 2006). The DOCs in both Michigan and Kansas were among the sixty-nine agencies selected in 2002 to receive multi-year support to upgrade reentry services using this integrated framework.

The selection of the adult SVORI sites—Walk With Me in Wayne County, Michigan and the Shawnee County Reentry Program in Kansas—largely reflected the initiative's interest in developing interventions in areas with a large concentration of returning prisoners—usually urban centers—as well as areas with a greater potential for the realignment of services and interventions. The involvement of non-DOC actors in the implementation of SVORI was not limited to service delivery by local providers. In Kansas, for example, the planning of the program relied on feedback by the University of Kansas and input by KDOC staff on evidence-based practices on reentry and parole practices. It also benefited from more general agreements between the KDOC and other agencies such as the state parole board, the Department of Social and Rehabilitation Services (SRS) and the Workforce Network of Kansas (Severson, 2007). In Michigan, these collaborations were less structured at the state level, emphasizing more local arrangements between the MDOC and a single faith-based organization—Wings of Faith—in charge of brokering interactions between providers and corrections staff (Lindquist & Brumbaugh, 2005).

The SVORI demonstration sites informed the development of broader state-level reintegration programs in a number of ways. First, they promoted the consolidation of a baseline framework to understand reentry both in terms of the concrete needs and obstacles faced by returning offenders—e.g., heightened employment and housing needs, cognitive deficits, barriers to reentry linked to identification, entitlements, detainers—and a more general discourse of reentry as a cost-effective intervention with potential impacts on public safety. Second, they served as a vehicle to document structural inadequacies of the corrections system in terms of both facility-based and community-based processes, including gaps in programming, training, documentation of interventions, lack of transitional services and coordination within corrections and between corrections and providers. Finally, over time, they provided the DOCs with a natural laboratory to refine new tools for the classification of offenders and the coordination and delivery of services—e.g., LSI-R in Kansas, COMPAS in Michigan, the use of "boundary spanners" to broker services.

The local implementation of SVORI in Kansas and Michigan was also marked by differences in the actual structure of interventions (e.g. the length of exposure of offenders to each phase of the program, the nature and scope of programming) and the division of labor between the DOC and service providers—not only more pronounced in Michigan, but also more directed at developing community-based processes and interventions. Furthermore, there were significant differences in the institutional context surrounding the planning and operation of both SVORI sites. In Kansas, the Shawnee County Reentry Program was seen by KDOC managers and staff as one of the first initial steps in a more ambitious set of efforts to realign the agency along new reentry principles. Indeed, several years prior to the development of the SVORI grant application, the KDOC had already created an Office of Release Services (1999) and had engaged in the revision of the Department's strategic plan to implement a new philosophy of correctional practice aimed at supplementing the more traditional focus on "risk containment" with the notion of "risk reduction" (Kansas Department of Corrections, 2001). Further, by the time SVORI was implemented in the state, the KDOC had already explored a new framework for partnerships with other state agencies on domains such as mental health, substance abuse treatment and workforce development. These processes provided a robust infrastructure to address the problem of prisoner reentry from a multi-disciplinary, collaborative perspective (Kansas Department of Corrections, 2002).

In Michigan, the planning of Walk With Me was directly linked to the input of a MDOC-led reentry workgroup, although its scope of action was more limited to concrete interventions to reduce parole failure and was somewhat conditioned by less structured interactions between the MDOC and other state agencies. In fact, the program was not directly coordinated by a reentry/pre-release office within the MDOC; instead, it relied more heavily on the outreach and coordination of services through Wings of Faith, a local community-based provider (Michigan Department of Corrections, 2003). Unlike Kansas, the development of this SVORI site paralleled—rather than preceded—a broader MDOC-wide strategy on

prisoner reentry. The formulation of this strategy began after the 2002 election of a new governor and the appointment in 2003 of a new cadre of corrections managers. At that point, some of the key components of Walk With Me were reexamined and reconfigured along a series of new objectives and activities—e.g., the heightened use of individualized reentry plans and the enhancement of local interactions between the main SVORI community-based provider and the state's Department of Labor One-Stop Centers.

The implementation of SVORI provided the DOCs of Kansas and Michigan additional insight on the benefits and pitfalls associated with the implementation of large-scale prisoner reentry initiatives. These lessons were not only linked to the particular dynamics of planning and adjusting the operation of the SVORI sites in each jurisdiction or negotiating institutional arrangements with local stakeholders. More generally, these programs realigned the DOCs rhetoric and practice of reentry in a way that facilitated more fluid interactions with public and private entities interested in prisoner reintegration. For example, capitalizing on the SVORI experience, the JEHT Foundation and other national and local organizations began to sponsor deeper reentry planning and management capacity within both DOCs in 2003 (particularly in Kansas). Likewise, the Council on State Governments (CSG) facilitated direct technical assistance to these agencies along discrete projects linked to reentry, including the creation of maps representing the high concentration of prisoner releases and state resources in small geographical areas. Also, CSG facilitated the development of a more general framework to understand and market prisoner reentry and prisoner reentry policies (e.g., "justice reinvestment") as well as the tools to translate these substantive principles and research into practice, such as the brokerage with stakeholders on issues of corrections reform and the coordination of reentry initiatives through reentry councils. Similarly, through a number of specific projects and designated partners, NIC facilitated a broader deployment of reentry-inspired practices through the identification of service gaps and training deficiencies (see Weigandt, 2007) and the integration of new tools as a response to some of these deficits, such as workforce development, case management, and communication skills for DOC staff.

B. The mobilization of key actors and resources

The involvement of external actors such as NIC and JEHT was critical to reshape long-standing policy debates on prison growth control and corrections costs into more comprehensive examinations of the connections between public safety, corrections, and criminal justice reform. The reputation of these external actors as informed, non-partisan "outsiders" enhanced the credibility and marketing of the reforms among political leaders, community advocates, and DOC staff. This process was logically conditioned by a number of structural characteristics and political dynamics within each state:

In Michigan, the newly–elected Democratic governor, Jennifer Granholm (2003-2010), a former state Attorney General, placed emphasis on the urgent need to reform corrections to improve public safety and control costs. While this rhetoric was not new or particular to Michigan, it gained traction with some state administrators and policymakers who were increasingly aware of the mismatch between more severe statutory penalties and persistently high crime rates, the growing financial strain linked to the expansion of the prison system and the high rates of failure among those on community-based supervision. To some extent, stakeholders were beginning to reconsider the rationale and effectiveness of policies based solely on the incapacitation of offenders, an approach that had continued to drive key legislative initiatives through the early 2000s (e.g., the toughening of truth-in-sentencing statuses contributed significantly to the final dismantling of the MDOC's Community Residential Program). "Tough" sentencing and corrections policies were increasingly contested by a heterogeneous set of groups and organizations ranging from the Prisons and Corrections Section of the State Bar of Michigan to the Innocence Project, the Citizens Alliance on Prisons & Public Spending-CAPPS, and Michigan's Council on Crime and Delinquency, among others. Also, a number of state agencies were increasingly aware of the growing problems of the corrections system. A 1997 legislative report, for example, summarized the reasons behind the state's unabated prison expansion and charted several pathways of reform. According to the report, "The efforts to reduce prison population, outside of reducing judicial sentences, depend on

addressing probationers with new sentences and technical violations, parole technical violators, and the parole board's decisions" (Firestone, 1997). Further, the report suggested that future reforms would likely be triggered by budget considerations: "Up to this point public opinion has supported the measures that the State has taken, which have led to this prison population growth. However, as the portion of the General Fund/General Purpose (GF/GP) budget directed to prisons continues to increase, questions about these public policies also may be raised" (Firestone, 1997). The political platform and leadership style of the newly-elected Governor capitalized on the growing momentum for corrections reform and effectively channeled this attention into a concrete course of action.

Governor Granholm's mandate of reform was articulated by Patricia Caruso, the newly appointed MDOC Director. In 2003, prisoner reentry was explicitly included as part of MDOC's long-term strategies to control prison growth. More generally, however, the goals and policies included in the Department's new strategic plan were largely aimed at moderating prison intakes in the short-term—projections suggested that within a year the system was set to run out of prison beds. In consequence, the plan put more emphasis on the prompt implementation of more discrete, narrow initiatives such as the expansion of community sanctions for low level offenders and technical parole violators rather than broader, more complex, agency-wide reentry programs. Still, some of the foundations of the more ambitious reentry-related strategies were developed, including, for example, the enhancement of local programs such as Walk With Me and the MDOC's support for legislative reforms to sentencing and parole guidelines (Michigan Department of Corrections, 2003).

The MDOC's new focus on reentry was not only more comprehensive than prior initiatives, but also more clearly linked to cost savings and potential increases in public safety; according to one of Director Caruso's early descriptions of MPRI, "Michigan [has] a clearly articulated commitment to improve its system of prisoner preparation, parole decision making, and parole supervision. The overall goal is to reduce Michigan's costly recidivism rate" (Caruso, 2004b). Unlike prior MDOC reentry programs, the planning of MPRI also benefited from comprehensive, sustained technical and financial support by external actors. Specifically, grant support in the early stages of MPRI planning by the National Governors Association (NGA) and NIC aimed to enhance research activities, training, and design of intervention strategies based on lessons learned from ongoing multi-state reentry efforts and emerging national models of correctional service delivery. The frameworks developed by these two organizations were relatively similar: they both emphasized the need for targeted interventions based on actuarial measures of risk, the importance of designing models sensitive to local needs and resources, and the strategic role of inter-agency forums for coordination and policy-making to be staffed by top reentry stakeholders. Unlike the NGA's Prisoner Reentry State Policy Academy, however, the *Prison to Community* (TPC) model developed by NIC provided a more concrete set of recommendations to facilitate the implementation of risk principles and best practices. This model guided some of the early implementation of Walk With Me in Wayne County in terms of the program's focus on long-term offender self-sufficiency through community support and was then subsequently reconfigured to articulate broader reentry policies along some of TPC's key substantive domains such as the use of a transition accountability plans and key strategies for implementation.

In addition to the support of NIC and NGA to develop the managerial capacity of MDOC on reentry planning, their assistance also focused on the mapping of resources and partners for the implementation of a more general strategy on prisoner reentry. This effort was guided in part by the MDOC, but also by strong leadership in the Governor's office and the increasing involvement of two private organizations, Public Policy Associates and the Michigan Council on Crime and Delinquency. These two agencies were selected as "planning partners" to provide direct, on-site operational assistance to the MDOC and to broker relations between the Department and the various constituencies impacted by the emerging reentry strategy.

The development of the institutional infrastructure for the planning of the MDOC reentry strategy culminated with the public launching of the "design phase" of MPRI in October 2003. A key element of this initial effort was the creation of a statewide Advisory Council with participation by a broad group of state agencies, providers, and community representatives. The main objective of this group was to

galvanize support for MPRI and elicit feedback on the components of the initiative. Consistent with the NGA framework, the planning of MPRI also relied on the creation of a State Policy Team chaired by the Governor's Criminal Justice Policy Advisor with participation from cabinet members or their representatives across a number of departments (MDOC, Labor and Economic Growth, Community Health, Human Services, and Education). The implementation of the Policy Team symbolized the state's renewed commitment to make reentry not only a top policy priority but also a long term initiative that would transcend the exclusive domain of correctional practice. Their work was largely supported by a number of smaller resource and management teams and workgroups mostly staffed by the MDOC. Through mid-2004, these groups adapted the TPC model and blended it with the lessons learned from local reentry projects—e.g., in addition to Walk With Me in Wayne County, the Genesee County Parole Reentry Program and the Kent County Reentry Roundtable—and more structural recommendations on the planning of statewide reentry programs by CSG's Reentry Policy Council. A complete version of the MPRI model was approved by the Policy Team in June 2004.

In Kansas, the assistance of external actors also enhanced the nature and scope of reentry initiatives planned within the KDOC. Unlike Michigan, however, before this type of support trickled in, KDOC staff and managers were well on their way to develop a new reentry strategy: release planning and other transitional services were first consolidated as a stand-alone unit within parole services. More critically, with the feedback of KDOC staff and some state-level stakeholders, the 2002-2004 KDOC strategic plan defined offender reentry and reintegration as a major initiative of the Department. This initiative was set to include more systematic partnerships with local organizations and state agencies, more emphasis on employment services in facilities and parole, and internal and external campaigns to increase staff and public awareness of prisoner reintegration issues (Kansas Department of Corrections, 2002).

This mandate was significantly strengthened with the appointment of Roger Werholtz as the new KDOC Secretary in January 2003, and the ongoing work of an internal reentry management workgroup featuring facility counselors, parole representatives and staff from the new Office of Release Planning. Their work contributed to the development of several initiatives at the local level guided by the Department's strategic plan and emerging opportunities of inter-agency collaboration, such as the piloting in 2002-2003 of the LSI-R in Johnson County in partnership with the Kansas Sentencing Commission and local community-based supervision agencies, the implementation of several Day Reporting Centers in 2001-2002, and the parallel work to support broader coalitions on offender reentry such as the Wichita Offender Reentry Taskforce (Kansas Sentencing Commission, 2006; Cromwell, 2002; Kansas Department of Corrections, 2002, 2003). At the same time, KDOC staff began to develop the foundation of the KO3RP by examining evidence-based practices related to the creation of transitional plans, and strategies to better specify the linkages between risk reduction and public safety. The Shawnee County Reentry Program was planned and executed in this institutional context, providing a concrete environment to refine some of these ideas though the creation of reentry specialist positions and the targeted delivery of services (Kansas Department of Corrections, 2003).

The new direction of KDOC also provided a coherent framework for enhanced collaboration between corrections, other state agencies, and the Kansas Legislature. Like in Michigan, this process was partially triggered by a growing interest in controlling prison expansion; for example, as mentioned in Section I of this report, the enactment of Senate Bill 123 in 2003 was inspired by the need to divert low level drug offenders from prison and into community-based supervision (Stemen & Rengifo, 2009). Other initiatives such as Senate Bill 67 (2001) sought to generate more synergies across agencies, realigning addiction treatment services among the KDOC and the Department of Social and Rehabilitation Services (SRS). The growing visibility of the Legislature with regards to corrections reform was more clearly reflected in the creation of new instances of policy coordination and interaction between corrections administrators and elected officials. In 2003, the Legislature created the "Kansas Criminal Justice Recodification, Rehabilitation, and Restoration project", a temporary committee charged with the comprehensive review of strategies to curb recidivism ranging from substance abuse programming to the structure and rationale of the sentencing guidelines. Such review aimed to identify "how to best deal with the economic and social burden of crime and recidivism in a fiscally responsible manner, while maintaining (…) public

safety" (The Criminal Justice Recodification, Rehabilitation, and Restoration Committee, 2005:2). This entity, known as the 3R Committee, was composed of legislators, members of the judicial branch, and representatives of various state and local agencies (law enforcement, corrections, social services). To assist the review of the corrections system, the committee relied on consultants of the Council on State Governments, who initially proposed direct strategies to better control prison growth, and subsequently contextualized the committee's interest in recidivism within a broader conversation on the benefits of building a long-term reentry strategy based on community engagement and more inter-agency collaboration. Like in Michigan, this work was guided in part by the report of CSG's Reentry Policy Council (Council of State Governments, 2003) although in Kansas it relied more on the local process of planning and implementation of reentry strategies lead by the KDOC.

The planning of a statewide reentry strategy benefited from CSG's prospective work with the 3R Committee and the KDOC. Similarly, it drew from the technical support by NIC on several projects— parole revocation practices, workforce development— as well as KDOC's proactive engagement of other state agencies such as SRS —for example, through the joint support for a grant writer position for services and programs (Kansas Department of Corrections, 2006a).

The Wichita summit on offender reentry in April 2005 symbolized the emerging consensus on the form, content and anticipated outcomes of a statewide reentry plan. This forum was organized by the 3R Committee, KDOC, and CSG to disseminate the principles of the new strategy and to mobilize additional support among key constituencies (legislators, media outlets, KDOC staff). The participation of Democratic Governor Kathleen Sebelius and Republican United States Senator Sam Brownback reflected the bipartisan approach that had characterized the planning process of the reforms in the Legislature and highlighted the status of reentry as a high priority for policy makers at the state and national levels. At this summit, the work of the KDOC on discrete reentry policies and programs—e.g., the ongoing operation of the Shawnee County Reentry Program, and the implementation of the LSI-R in Johnson County—were blended with the more general set of policy recommendations from CSG consultants and other state stakeholders. One week after the summit, the Legislature approved direct state support of the reentry program in Shawnee County (the federal support was due to expire by the end of the fiscal year) and authorized additional funding for similar programs in Sedgwick and Wyandotte Counties. Further, the summit fostered the creation in late-2005 of a new interagency council derived from the 3R Committee— the Kansas Reentry Policy Council—charged with designing and implementing a statewide reentry plan. With support from KDOC, the JEHT Foundation and other organizations, this plan was finally presented in November 2006 as the KOR3P.

C. Structure and implementation of the MPRI and the KOR3P

Both the MPRI and the KOR3P promoted an ambitious project of reorganization of the states' DOCs and their immediate institutional and social environment. Both initiatives consistently marketed reentry as "more than just a program or set of programs", with the ultimate objective of transforming correctional institutions into organizations where the practice of reentry principles would be "seamless" or "invisible" to staff and external constituencies. According to Dennis Schrantz, former Deputy Director of the MDOC, this initiative represented "a complete system change" (Schrantz, 2009) reflecting a "shift from a philosophy of simply protecting the public during incarceration to a longer-term view of protecting the public by preparing prisoners for life after incarceration" (Michigan Department of Corrections, 2008a). In Kansas a similar overhaul in the philosophy of corrections was presented in terms of supplementing the Department's traditional emphasis on "risk containment" with a more dynamic, comprehensive approach to "risk reduction" seeking to "reduce the probability that an offender will harm a member of the public regardless of the environment in which the offender is found" (Wherholtz, 2009). In this sense, both MPRI and KOR3P were inspired by an interest in enhancing the long-term performance of offenders and linking their success (or failure) to overall levels of public safety.

The MPRI model of service delivery was based on the targeted, individualized deployment of services and interventions at seven decision points distributed throughout three distinct phases of

correctional practice: an institutional phase ("getting ready"), a reentry or pre-release phase ("going home") and a community and discharge phase ("staying home"). The seven decision points ranged from initial assessment of prisoners and allocation of facility-based programming to the creation of individualized parole supervision and discharge plans. Interventions at every point were to be guided by two inter-related tools, the actuarial assessment of risk and needs based on the COMPAS instrument and the Transition Accountability Plan (TAP). The TAP was supposed to articulate the expectations of the various actors involved in the reentry process—offenders, supervising staff, and community/providers. These expectations were structured in the form of goals, tasks and activities to be revised and/or modified at four transitions: at prison intake, at the point of the parole decision, upon release from prison, and upon discharge from community supervision. Similarly, programming and pre-release preparation were supposed to be guided by individualized assessments. These interventions were to be provided across all three phases of MPRI creating a "seamless plan of services, support and supervision" (Michigan Department of Corrections, 2003). At the local level, the MPRI model specified a highly decentralized network of providers reporting to community based "fiscal agents" and independent "community coordinators" in charge of developing comprehensive reentry plans for each MPRI site. This infrastructure of community support was linked to the MDOC through the funding of these plans and associated reporting requirements, the training of key personnel, and the participation of wardens and parole supervisors in local "steering teams." Under the new model, parole agents retained control of supervision and referrals but received additional support from providers and community coordinators for the planning of service interventions.

This model relied on a number of actors within the MDOC and across community-based providers. During the institutional phase – "getting ready" – prison staff were tasked with the assessment and identification of MPRI offenders based on COMPAS scores. They are also responsible for creating the initial TAP and related interventions and activities. During the second phase — "going home" — MPRI offenders approaching their parole eligibility date were to be transferred to "in-reach" facilities closer to their communities of release. At this point the TAP moved from being a "case management plan" to becoming a "reentry plan." Critically, the creation of these plans relied on the input by parole agents, providers, and facility-based staff—the "transition team" of each offender. During the third phase of MPRI — "staying home"— the TAP was to be updated once again and realigned as a "parole supervision plan" with greater input from providers and other community organizations.

The implementation of this model was coordinated within the MDOC by the Office of Strategic Planning and Administration. This unit was created in 2004 with the idea of centralizing information on evidence-based practices and policies aimed at containing prison growth at the state and local levels. In 2005, it expanded to include the also newly-configured Office of Offender Reentry. Through 2004 this office had coordinated input from the various committees and workgroups linked to the to the "design phase" of MPRI and continued to play a major role in its implementation. The institutional integration of reentry with MDOC's strategic planning division symbolized the Department's new commitment to not only make reentry a top priority but also to systematically link this strategy to the long-standing issue of prison capacity and prison growth.

The implementation of MPRI was influenced by the Department's need to reduce the size of its prison population through short-term, community-based interventions. Such logic was first articulated in the MDOC's 2003 strategic plan and reflected the impossibility of further expansions of prison capacity through new construction. Thus, some of the measures included in the plan were aimed at moderating the growth of the system in other ways—for example, by expanding community sanctions for low-level offenders and parole technical violators. In this context the MPRI was seen by administrators as a potential tool to further alleviate the structural pressures on prison beds (Michigan Department of Corrections, 2008b). However, in order to facilitate this process, administrators believed that the original MPRI needed some structural modifications. Consistent with this strategy the MPRI model was reshaped to accommodate, first, the implementation of elements of the plan that could be deployed more rapidly and those that could have the greatest impact on prison populations. As a result, the revised implementation sequence of the MPRI focused first on phases II and III of the original layout (e.g.,

"going home" or the re-entry phase and "staying home" or the community and discharge phase). This departure from the consensus model created with feedback from local stakeholders and external actors was cemented in growing concerns by the MDOC leadership regarding the logistics and timing of the reform; MDOC saw the need to implement elements of the initiative that would not generate additional expenses in the short term, which would have been likely with the enhancement of core programming anticipated in Phase I of MPRI or "getting ready". Another benefit of the revised sequence was that short-term impacts in prison population and recidivism arguably linked to the new focus on parole and community-based processes could be used to gain additional support for broader reforms, including facility-based programming. The need for a short time frame for the delivery of "good news" regarding the MPRI was also critical for the MDOC leadership and the Governor's Office, as the outcomes of the new strategy were under intense scrutiny by legislators and other stakeholders.

The overall implementation plan of the MPRI was guided by the objective of implementing the initiative "state-wide" by September 2007 (meaning that every county would have the capacity to operate the initiative's Phases II and III) and "up-to-scale" by October 2009 (meaning that every MDOC prisoner would be assessed at prison reception). These objectives have been largely met through the successive development of a number of "demonstration sites" throughout the state, each aimed at testing different sets of the model's "decision points" and the subsequent transformation of these sites into "pilot sites" and MPRI "regions". The first cohort of eight demonstration sites (covering several counties) began operations in June 2005 and drew from ongoing local reentry programs such as the SVORI-Wayne County Walk with Me program and the Kent County Reentry Roundtable. The selection of these jurisdictions was based on relative levels of stakeholder support for reentry, availability of community resources, and weight on the state's total population of parole releases – according to MDOC, seven of the fourteen counties covered in the first round of MPRI sites accounted for about 75 percent of this population. An additional cohort of seven sites was added in 2006 bringing the total of MPRI sites to fifteen. By 2007, these fifteen sites were expanded to cover the entire state, resulting in a total of eighteen MPRI regions distributed across all eighty-three counties in Michigan. The systematic expansion of MPRI across sites and counties paralleled the realignment of other MDOC programs during the early stages of the initiative. For example, in January 2005, the Department transformed its Parole Violator Diversion Program into "Intensive Reentry Units" with the idea of testing several elements of the MPRI plan, particularly the creation of reentry TAPs and the overall in-reach process.

The logic of planning and implementation of Kansas' KOR3P was somewhat similar to Michigan's. In both jurisdictions prisoner reentry was envisioned by the DOCs as the domain of a number of long-term policies aimed to realign the vision and practice of corrections and its institutional and social environment. Early-on, the KDOC defined prisoner reentry as one of the strategic domains of action of the agency. Like the MDOC, the KDOC relied heavily on principles of evidence-based practices to define the form and content of this new strategy. Unlike Michigan, however, this initiative of reform had a longer trajectory of planning and dissemination within the Department prior to broader planning and marketing and relied on more substantive feedback from a core of managers with greater exposure to the local implementation of reentry programs. Partially because of this process, the planning of KOR3P also benefited from a set of implementation lessons derived from local initiatives such as the Shawnee County and Sedgwick County Reentry Programs and the implementation of the LSI-R in Johnson County. The support of the initiative from Governor Sebelius was less explicit than the support given to MPRI by Michigan's Governor Granholm, although it effectively facilitated key legislative debates and contributed to the mobilization of public support for reentry. More substantively, the KOR3P placed a greater emphasis on the development of reentry as a DOC-centered policy, requiring a less complex setting of community engagement and decentralized delivery of services.

The philosophical foundation of the KOR3P was the notion of risk reduction. Risk reduction redefined penal practice to encompass a more comprehensive set of interventions aimed at improving the odds of long-term success for offenders. This general objective was justified in terms of both public safety (lowering recidivism and reducing crimes by parolees) and cost-effectiveness (reserving costly prison space for dangerous offenders). According to KDOC Secretary Werholtz, the traditional model of

KDOC practice focused exclusively on risk containment linked to "maintaining order, security and surveillance" (Kansas Department of Corrections, 2005). The new emphasis on risk reduction sought to complement this approach with a more comprehensive strategy that would not only preserve order in facilities but also address the immediate issue of conditional-release violators—a growing concern of administrators and policy makers—as well as the broader institutional and social context of prisoner reintegration. The core elements of this strategy included a reconceptualization of supervision and service interventions along principles of case management, the targeted provision of key services for high risk offenders, and the enhancement of inter-agency collaborations within corrections (probation, community corrections, field services and facilities) and across other state systems (social services, housing) and levels of government (county/local, state). Prior to KOR3P, the KDOC had completed a long-term process of organizational change—the Kansas Quality Management—largely focused on staff development (training, compensation) and the realignment of internal protocols along traditional areas of corrections practice—e.g., information processing, inmate work and program assignments. While the planning and dissemination of KOR3P benefited from some elements of this process—workgroups, training infrastructure—it also created some uncertainty among staff regarding the sustainability of KOR3P and the likelihood that over time it would be replaced by another model.

A substantial fraction of the reentry reforms in Kansas took place prior to the final configuration of KOR3P. Before November 2006, the KDOC had already structured the basic operation of three site-specific reentry programs in Shawnee, Sedgwick and Wyandotte Counties (although Wyandotte actually started operations in 2008) and had begun to expand the core of new reentry specialists in several facilities. The training of staff on LSI-R was well underway and the Department was already collaborating with several social service agencies on risk reduction strategies. Also, some of the institutional infrastructure for the development of a broader reentry strategy was in place—e.g., 3R Committee, the Reentry Policy Council, the Kansas Sentencing Commission. Like in Michigan, this general mobilization of the DOC and non-DOC actors was not originally aimed at advancing a reentry agenda—instead, it was mostly focused on the exploration of policy alternatives to better control and adapt to prison population growth. However, with the assistance of external actors such as CSG and the leadership of key KDOC managers and staff, this debate moved away from short-term protocols to curb revocations to broader initiatives aimed at reshaping penal discourses and practices in the context of prisoner success and community safety. At critical junctures, CSG consultants and KDOC managers and staff were able to galvanize support for broader correctional reforms capitalizing on issues of prison space. For example, in 2004, data from the Kansas Sentencing Commission was used as the basis to communicate to legislators and other stakeholders that prisons were being mostly used as an intermediate sanction for violations of conditional release (i.e. parole). This information was contextualized in terms of the appropriate uses for costly prison beds and the need to address the root causes of supervision failures—short term prison stays were not seen as a particularly effective method to address this problem. Along the same lines, at the Wichita Summit in April 2005, reentry advocates were able to show public bipartisan support for the initiative capitalizing on the work of the 3R Committee and the backing of top officials including Governor Sebelius and U.S. Senator Sam Brownback. At this meeting, Senator Brownback and other stakeholders challenged the KDOC to continue to enhance public safety by reducing the state's recidivism rate by 50 percent in three years.

These processes fostered the development of a more comprehensive plan to integrate the lessons from the ongoing KDOC effort on reentry with broader changes in the vision and practice of corrections. The formalization of such strategy was developed in late 2005 and early 2006 with technical assistance provided by NIC and CSG, and the support of the 3R Committee and the Governor's Office. The first version of this plan was called the "Kansas Plan for Reentry and Justice Reinvestment" and included a greater focus on local community development, drawing more heavily on the concept of "justice reinvestment" advocated by CSG. However, the plan did not receive enough support from the legislature and lacked the necessary funding levels to deepen the managerial and operational capacity of the KDOC at the central and local levels. A revised version of the plan benefited from a more favorable political climate marked by the reelection of Governor Sebelius in the Fall of 2006, and the increasing attention of

national agencies and foundations to the Kansas process of corrections reform. A revised version of KOR3P was finally structured in late 2006 with financial support from the JEHT Foundation.

The model of service delivery of KOR3P was largely based on the KDOC experience with the SVORI-sponsored Shawnee County Reentry Program. In particular, the program's three-phase model—facility-based work, pre-release preparation, and community-based support—was strengthened along key domains such as the increasing use of inter-agency partnerships trough "boundary spanners" and the heightened attention to facility-based programming based on cognitive tools and content (Severson, 2007). A central component of the plan was the skill development of the KDOC workforce on risk reduction interventions and protocols, including, for example, motivational interviewing and purposeful communication (Pellant & Phelps, 2007). It also involved creation of new service-oriented positions within the Office of Offender Reentry, and new policies that crystallized the new orientation of the Department towards case management and assistance in pre-release planning along key domains such as housing, employment, and cognitive skills. The target population of KOR3P was largely limited to the pool of high-risk offenders defined using LSI-R scores; prisoners in this pool would be given access to some specialized services throughout their prison stay but particularly when approaching their parole release date. Like Michigan, an important component of the pre-release phase was the transfer of KOR3P offenders to facilities close to their community of reentry. Unlike Michigan, however, the Kansas plan did not contemplate the creation of specialized reentry units within facilities. Instead, it specified a greater level of case management by "reentry specialists". This facility-based work was to be coordinated across actors and settings through enhanced reentry plans, which featured feedback from parole officers and some community-based providers on an individualized basis. Once in the community, KOR3P offenders were to be monitored by parole officers and community-based reentry specialists. However, unlike Michigan, these reentry specialists were given greater responsibilities and visibility regarding referral activity and the provision of direct services.

Since 2007, some of the strategies implemented by KOR3P have paralleled the MPRI's process of state-wide implementation. However, unlike Michigan, these initiatives have not taken the form of new local reentry programs. Instead, they have largely focused on the consolidation of existing programs and the expansion of risk reduction protocols to locally-run community corrections programs throughout the state. For example, in 2007 the legislature passed Senate Bill 14, a "risk reduction" initiative developed in part by the collaborative efforts of the 3R Committee and CSG. Among the number of measures supported by this piece of legislation, Senate Bill 14 provided grant incentives to community correction agencies to reduce their revocation rates by 20 percent by Fiscal Year 2008. The bill also increased the number of available good time credits and introduced a credit of up to sixty days for offenders completing risk reduction programming.

The funding of both MPRI and KOR3P relied on a combination of substantial grant support and state appropriations. In both jurisdictions grant support was critical to increase the planning capacity of the DOC, the communications strategy for the dissemination and marketing of the reforms, and key elements of the operation of local reentry programs. Over time, this support has been partially substituted by increasing commitments from the states' general funds. In Michigan, the MPRI was launched in Fiscal Year 2005 with a three-year $2 million planning grant from the JEHT Foundation. The budget for MPRI has increased every year since then from $6 million in Fiscal Year 2007 to $34 million in Fiscal Year 2008 to $57 million in Fiscal Year 2009. These increases reflect the growing needs associated with the statewide implementation of MPRI including, for example, the training of MDOC personnel, the development of Phase I of the model, and the enhancement of referrals along key areas (housing, mental health, and substance abuse). The mobilization of legislative support for the funding of MPRI reflects the effectiveness of the public education campaign of the initiative, including, for example, the marketing of MPRI as a long-term cost-saving strategy, as well as the strong backing of elected officials, particularly Governor Granholm. In Kansas, many of the key reentry initiatives that now constitute KOR3P were funded early-on by the KDOC's operating budget. Grant funding for specific programs such as SVORI and support from other state agencies also facilitated the implementation of discrete components of the plan. However, unlike Michigan, the state legislature was more hesitant to provide broader support for

KOR3P. A series of multi-year grants from the JEHT Foundation provided the funds for the implementation of several elements of the plan. With the sudden demise of the JEHT Foundation, some elements of this process have been preserved through a greater infusion of state funding. However, such support has been significantly weakened over the last fiscal year due to the great impact of the economic recession on the state's budgets.

III.   Documenting organizational change

This section focuses on documenting the key domains of change within the DOCs associated with the implementation of KOr3P and MPRI. The specification of these domains in the current study is set to largely reflect changes in penal *practices*—rather than merely penal *discourses*—and correspond to the main themes summarized by reviews of other processes of reorganization within corrections (Austin & Fabelo, 2004; Jacobson, 2005).

A.   Domains of change within the DOCs and beyond

As reforms gained traction in Michigan and Kansas through the mid 2000s, DOC staff and managers began to make a distinction between the "new" DOC—that is, the model of corrections organization emerging from the reorganizations elicited by KOR3P and MPRI—and the "old" DOC—a more blurred reference to an earlier, more traditional framework of correctional practice associated with heightened reliance on the enforcement of bureaucratic discipline. DOC employees consistently summarized the goals of this "old" model as limited to the processing and daily control of offenders and the general maintenance of order in prisons. Its ethos was often described via a series of mottos. One of these, "*trail them, nail them and jail them*", was frequently employed by DOC managers to describe the pre-reform orientation of their organizations. Another, "*lock them up and throw away the key*", was used to reflect both the "tough" nature of the pre-reform organization as well as the prevailing skepticism regarding offender change or rehabilitation.

The "old" model of correctional practice was further described by DOC line staff as solely aimed at verifying a set of rigid protocols. Their work was depicted as being highly "*compartmentalized*" or divided into isolated "*silos*" organized around opposing domains of "*safety/accountability*" and "*programs/assistance*". According to facility-based staff in Kansas, their work performance was often measured in terms of narrowly-defined objectives such as cleanliness of buildings and inventory control. In this context, substantive interactions between offenders and KDOC staff were clearly demarcated by the notion of "*undue familiarity*" and an overarching set of guidelines encouraging staff to be "*firm, fair and consistent*". The orientation of the KDOC was described as clearly favoring the notion of safety or offender accountability over programs; according to some KDOC staff, counselors in correctional facilities were seen as "*a mere extension of the custodial staff*" with little guidance, training, and status within the organization. For the broader correctional bureaucracy, the work of these counselors was ineffective because "*offenders fail their way into prison*" and "*offender change is just a nice ideal*". A few accounts indicated that counselors in some facilities were often pulled to perform duties unrelated to their official functions, such as sorting the mail and filling-in for administrative staff.

The "new" model was seen as markedly different. According to DOC staff, the new strategy aimed to break down the rigid protocols that once existed, creating a more "*integrated*" work environment. In their view, the single, most visible change associated with the MPRI and the KOR3P, was the more fluid interaction between the different functional areas of corrections, particularly "*safety and programs*". In the opinion of many corrections staff, the realignment of the DOC no longer favored one function over the other; rather, it saw them as mutually reinforcing. Moreover, this sense of integration extended beyond the internal reorganizing of the DOC; it was seen as better articulating the work of parole and facilities, but it was also seen as reflecting the relationship between the DOC and providers, the DOC and the community, and the DOC and other government agencies. This enhanced integration was greatly

emphasized through the systematic dissemination of a new vision of penal practice; the ethos of "*trail them, nail them and jail them*" was replaced with a more over-encompassing discourse focused on "*risk reduction*" and "*prisoner success*". Also, it was implemented via new tools and protocols such as the in-reach process by which parole officers participate in transition meetings for soon to be released prisoners and contribute to the design of reentry plans.

The "new" model was reflected in five key domains: 1) new tools and protocols guiding key decision points in facilities and parole 2) new approaches to service delivery (case management and programming) 3) new approaches to human resource management (training, turnover, and quality assurance) 4) new interactions with government agencies and community-based organizations, and 5) local process of reform (dynamics, marketing of initiatives, funding).

1. *New tools and protocols in facilities and field operations*

Facility-based processes

MPRI and KOR3P conceptualized prisoner reentry as a dynamic process involving not only the enhancement of prerelease services and the strengthening of community-based monitoring and programming but also a more general, comprehensive realignment of interventions beginning at prison admission and continuing through parole supervision. The gradual implementation of this model was largely consistent with a new vision for correctional practice guided by the overarching goal of improving the odds of long-term success for prisoners.

The accounts of KDOC counselors, reentry staff and uniformed personnel interviewed for this project indicated that this change in vision effectively altered the nature of facility-based interactions among staff and between staff and prisoners. According to a counselor in a high-security facility, "*Now we communicate better. There is no more a huge divide between safety and programs. We realized that as an organization we can do both.*" Another staff identified the increasing relevance of shared—not just "common"—goals across roles and functions guided by a general focus on offender success: "*Now we all care about preparing prisoners for reentry, that's what drives what we do, every day, at every moment. You can monitor the activities of prisoners in their cells and at the same time, be aware that every interaction can make a difference*". When talking about the handling of prisoner infractions and violations in facilities, a counselor in a minimum security facility clarified one of the core principles proposed by the new approach: "*It's not more 'this is your problem' or 'that's your problem'. We all try to react to non-compliance in a constructive manner because we all have something to contribute and we can all get something out of it*". Staff also described new practices aimed at taking advantage of interactions with offenders to not only enforce specific rules and behaviors but also to contribute to more ambitious prisoner-centered goals such as the fostering of more systematic cognitive thinking. One KDOC uniformed employee, for example, commented that under the new vision of correctional practice "*it's ok to ask an inmate 'how is your family?', 'how are you doing?'. Sometimes we call them by name. Before, that was not done because of we didn't want to be accused of 'undue familiarity'*".

The translation of this new vision into new practices was facilitated by the greater availability of resources within the KDOC. The implementation of new instruments such as the LSI-R allowed KDOC counselors and uniformed personnel to better identify shared problems and solutions—e.g., LSI-R scores were not only been used for security classification purposes but also to match offenders to programs. In some facilities, disciplinary infractions were increasingly seen by staff as an opportunity to engage inmates on "thinking reports"—traditionally, the reaction to these violations involved the automatic issuance of a ticket or disciplinary write-ups. These changes symbolized the more general transformation of correctional practice from a set of narrow, short-term objectives aimed solely at preserving order and coercive control of offenders to a broader set of interests directed at shaping offender change in prison settings and beyond.

The development of a number of these new practices was facilitated by new tools (LSI-R, cognitive-based programming), new actors (new hires, particularly for programs and reentry, new leadership), and a

more favorable institutional environment. For example, as a result of a series of policy reforms implemented in the mid 2000s aimed at slowing prison growth, correctional facilities in Kansas observed a sustained reduction in crowding levels from a high of 99.3 percent of rated capacity in 2004 to 91.8 percent in 2009 (Kansas Department of Corrections, 2009). According to some KDOC employees, the increased availability of prison space facilitated the reconfiguration of traditional programming with more individualized attention by counselors and the testing of new interventions and protocols. In one facility, local managers referenced the implementation of a new peer mentoring program that was facilitated by emerging collaborations between counselors and correctional officers and enhanced access to infrastructure resources: "*Now we can actually do peer mentoring, even in areas of high security. We can do it because we got a room ready for it, because we got a counselor that can be in there, facilitating the meeting, someone who feels comfortable enough to close the door behind them. This is now ok with our correctional officers because after a while, we all understood that it was still safe to have two high risk prisoners talking to each other in a controlled environment, that participants in peer mentoring were ok, and that having the program around would be good for everybody*". Staff articulated the long term returns of this particular initiative in terms of the use of peer mentoring to minimize the need for forced cell extractions and the potential synergies between this type of intervention and broader facility-based programming on mental health or substance abuse.

In another KDOC facility, staff also referenced a process of collaboration between counselors and correctional officers whereby counselors reconfigured some of their interactions with inmates to accommodate security concerns over excessive congregation of prisoners in certain public areas: "*Instead of walking around and talking to inmates in the floor, we all agreed that it was better if counselors engaged inmates in a more structured way, such as in an office, or in some other enclosed location. Counselors understood that we* [security staff] *were not seeking to limit their work but rather, to make it safer for everyone*". Overall, despite the fact that some components of KOR3P may have led to increased interactions between staff members and inmates—thus increasing the likelihood of violence—KDOC reports that there has been a decrease in assaults (inmate-on-staff), a decrease in the issuances of disciplinary reports, and 34 percent decrease in inmate grievances since 2004 (Werholtz, 2009). However, some recent media reports suggest that the incident of sexual assaults by staff may continue to be relatively high and under-reported by official statistics.

The realignment of interactions between staff members was also fostered by the creation of new positions and the restructuring of job responsibilities for some of the existing positions. Even prior to KOR3P, the KDOC had begun to reinvigorate prerelease planning through the addition of new facility-based reentry specialists in some institutions to focus on housing, cognitive interventions, and job skills for high-risk prisoners. Some of these positions were originally linked to the operation of the Shawnee County Reentry Program and were subsequently expanded with KDOC support and additional grant funding. In addition to these facility-based positions, additional capacity was developed at the central level to facilitate the coordination of services across agencies and areas of operation within corrections. Some of the existing KDOC positions were also modified; for example, unit managers were exposed to new tools for more effective communication with inmates and trained to better interact with new reentry specialists deployed in specific facilities.

KOR3P also impacted the interaction between staff in facilities and staff in field services. Historically, prison staff and parole staff had few interactions, with parole officers rarely visiting facilities or taking part in pre-release planning. Under the new reforms, parole officers were encouraged to visit facilities more regularly and tasked with staffing transition teams for soon to be released high-risk prisoners. This process paralleled the reconfiguration of activities of institutional (facility-based) parole officers, alleviating their workload as the main broker of interactions between facility-based processes and parole. As a result of these changes, we observed a greater level of integration between different subareas of facility operations and between broader KDOC activities.

In Michigan, the most significant facility-based transformation linked to MPRI was the creation of in-reach facilities and the realignment of prerelease programming along evidence-based practices. Even though the new reforms sought to modify job responsibilities and the institutional environment for some

positions (e.g. requiring security staff in facilities to complete TAPs and strengthening the role of institutional parole officers), the MDOC did not rely heavily on the creation of new positions to foster organizational change. Some positions were nevertheless created, especially after MPRI moved in 2008-2009 from an exclusive focus on community-based processes to a broader process that included facility-based processes as well. For example, the operation of the new in-reach facilities was strengthened with the creation of "facility coordinators" in charge of articulating various aspects of the in-reach process, including interactions with parole officers and community coordinators and the planning and documentation of pre-release programming. Because the in-reach units are part of MDOC prisons, their operation facilitated a broader assessment of job responsibilities for all custodial staff—not just those working in in-reach units—and of integrating safety with programs designed to assist inmates.

Facility-based changes in penal practices linked to MPRI were harder to observe than those triggered by KOR3P because of the timeline of implementation of the reforms (phases II and III, which were community-based, were the primary focus or reform through 2009).[6] Yet, several of the MDOC managers noted that during the early stages of reform implementation there was some skepticism regarding the operation of in-reach facilities (e.g., staffing levels, training, ability to widely deploy the use of TAP). This skepticism was amplified when the in-reach process was shortened from four months to two months to accommodate additional MPRI offenders. In particular, mid-level MDOC managers felt left-out in the process of planning and decision-making associated with structural modifications to MPRI. At the ground level, these adjustments to the model were also seen as a sign of improvisation and lack of familiarity of MPRI planners vis-à-vis the operation and logistics of facility-based interventions and programs. For some, the fact that exposure to prelease programming was being limited to accommodate more prisoners also raised doubts regarding the ultimate objectives of reform. According to some MDOC staff, "*When it comes down to what really is going on, the MPRI is really about pushing people [*prisoners*] out the door, not so much about helping prisoners succeed*". Despite the difficulties involved with gauging facility-based changes in Michigan, the MDOC reports that progress is being made both in terms of new operations and interventions as well as intermediate results. Consistent with the original targets of reform, as of 2008 about 60 percent of returning prisoners were processed through in-reach facilities; in these facilities, MDOC reports, these prisoners are able to work with institutional parole agents and local transition teams to develop their individualized TAPs.

Despite the importance of success stories related to the effective realignment of key facility-based practices in Kansas and Michigan, a number of issues remain to be addressed by reformers in both states. For example, DOC staff in these two jurisdictions reported lingering concerns over the "*undue familiarity*" that arises from the more fluid interactions between inmates and "*security*" and "*programs*" staff fostered directly or indirectly by MPRI and KOR3P. More specifically, staff remains confused about the specific rules governing these interactions across traditional roles (surveillance vs. assistance), and how these interactions are related to the new culture developing within the departments of corrections. In both DOCs, some line staff stated that "*security staff are not counselors. They are not trained for that, they can only refer inmates to other staff*" while others saw a more nuanced set of job duties and responsibilities—"*we can all contribute to offender success*". In a related vein, parole staff from both states also expressed their frustration over the lack of appropriate documentation of transition or reentry plans. As late as 2008, staff still indicated that many of these plans, which are supposed to be generated at the facility-level, were still blank or did not include a specific breakdown of goals and activities. In their view, these issues resulted from a lack of appropriate training and the lack of appropriate technology for data storage and retrieval.

Assessment and Classification

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[6] Also, our fieldwork in Michigan was not as extensive as it was in Kansas, limiting our ability to describe the process of organizational change at the facility-level (see Methodology).

One of the most significant areas of reform in the DOCs of Kansas and Michigan was the assessment and classification of offenders. In contrast with more traditional practices, offenders were to be assessed earlier in their incarceration (at intake) but also more often (at key transitions, such as when transferred from general programming to prerelease or at parole intake) and across a more comprehensive set of domains (dynamic risks and needs). Further, agencies sought to better integrate the outcomes of these assessments into a wider range of facility operations, namely, risk-based classification for safety and housing purposes, referrals to programming, and identification of "high-risk" offenders to be part of more targeted reentry interventions.

In Kansas, the KDOC Office of Offender Reentry, the Kansas Sentencing Commission (KSC), and stakeholders in Johnson County began the pilot of the LSI-R in the fall of 2002 across local agencies (probation, community corrections) and settings (parole, prisons). Prior to the implementation of the LSI-R, supervision levels were largely determined based on severity of the current offense. After examining the efficacy of the LSI-R in Johnson County, the KDOC developed new policies to foster the statewide implementation of this instrument for parole classification in January 2004. Through 2004-2005 the LSI-R was progressively administered in the main state reception center (as well as field intake centers), and was also used more systematically for participant screening in a variety of substance abuse programs. In 2005, facility unit teams were trained in LSI-R and the KDOC began the process of engaging providers for training and planning of services using this instrument. This set of substantial changes to protocols for interventions and assessments were well under way by the time KOR3P was finalized in the fall of 2006.

In Michigan, the COMPAS instrument was selected in December 2005 to facilitate the assessment and classification of MDOC offenders and to articulate supervision interventions and activities. As in Kansas, the proper assessment of inmates' risk and needs was seen by staff and managers as critical elements to define the proper levels of supervision and the implementation of treatment plans designed to address criminogenic risk factors. However, unlike Kansas, the implementation of new assessments and interventions was not sequential (i.e. implementation of LSI-R followed by development of new case plans) but rather executed in parallel with other key reforms contemplated by the MPRI. This is an important consideration because MDOC managers had to balance increasing demands for COMPAS training, as well as other ancillary tools linked to other evidence based practices. According to MDOC reports, through 2006, all institutional parole agents were trained on the implementation and interpretation of COMPAS and TAPs; by 2008, the use of COMPAS and TAPs expanded to include reception and guidance centers.

Despite significant progress in the statewide implementation of risk/needs instruments in Kansas and Michigan, reformers confront a number of important challenges. In Kansas, for example, the statewide rollout of the model was set to be completed by 2010; it may be delayed until 2011 (or even longer) due to increasing budget constraints associated with the current economic recession. More critically, KDOC line staff and managers described emerging concerns about the ability of the current data infrastructure to fully capture the new set of information derived from assessment instruments and case management. In particular, there is increasing frustration regarding the aging information systems that have not been updated to support the vision of the corrections organization put forward by KOR3P. For example, to implement collaborative case management there is a need for greater sharing of information across an expanded set of actors (parole officers, providers, counselors in facilities). According to one KDOC manager, "*the current system can hardly meet the basic demands of the new environment and cannot fully provide timely, secure, relevant information in a systematic way*". For some, this problem was related to a broader issue related to the development of skills and technology under KO3RP: "*People can be trained in how to enter information, how to enter codes, but they may not know what to say or how to say it. Now that there are so many eyes reading our case notes, our instinctive reaction is to limit the documentation of things because we are concerned about privacy, about offenders playing use against each other. This is bad because what we all want is the opposite, better notes, more data, more sharing. We need to mentor better those in charge of entering data, to use the right language, to feel comfortable entering information.*" Finally, the use of different thresholds to classify offenders as "high risk" by facilities and field services presents another problem. This is a critical point because, consistent with evidence based

practices, the high-risk designation triggers enhanced services and supervision and constitutes a central component of KOR3P.

In Michigan, the increasing use of COMPAS has also triggered a number of operational challenges for reformers. For example, some of the components of MPRI were originally developed in connection with other risk assessments—notably the LSI-R—as opposed to COMPAS. In a staff training session, both trainers and staff expressed some frustration when trying to connect specific supervision activities linked to COMPAS scores because such scores did not fully match the original LSI-R criteria used for their development.

Parole revocations

As noted above, technical parole violators remained the most significant driver of prison expansion in Kansas and Michigan through the late 1990s-early 2000s, exerting a new form of pressure on custodial resources and modalities of supervision. In response, DOC managers implemented a number of policies to address this driver of admissions with various degrees of success. In Michigan for example, the First Technical Rule Violation Center was created in 1991 as an intermediate sanction for parolees who violated conditions of supervision (Firestone, 1997; Hollander 2006). The MDOC also implemented a Parole Violation Diversion Program in the mid 1990s that focused on facility-based, short-term interventions for eligible parole violators and instituted a "parole violation response guideline" to better guide the sanctioning process of parole agents (Waterbury, 2005). Similar efforts took place in Kansas. Between 2001 and 2002, for example, KDOC's Parole Services participated in a study conducted by NIC on Responding to Parole and Probation Violations, which subsequently led to the revision of the department's revocation guidelines in FY 2003. Along the same lines, the implementation of Senate Bill 323 in 2000 adjusted (often times shortened) post-release supervision terms for offenders in several offense severity levels leading to a reduction in state parole caseloads (KDOC, 2002).

These initiatives were not guided by a general prisoner reentry framework focused on offender success but, rather, by a more "systemic" interest in reducing the costs of prison expansion. With MPRI and KOR3P these initiatives were strengthened and realigned within the context of reentry.

The implementation of MPRI changed the context of community-based supervision via new tools and new interactions between the MDOC and providers (see next subsection on case management). It also changed the process of parole revocations. MPRI conceptualized these events as critical decision points marked by the confluence of different actors and sources of information (judges, parole officers, assessments, reports, etc.). Aligned with earlier efforts, the new initiative emphasized the need for more graduated sanctions and the support of programs in the community. The approach called for swift and consistent responses to violations, with sanctions graded according to the persistence and seriousness of the violations. Under the new model, low level responses from parole agents could take the form of either reprimands or warnings and responses to serious violations involved the swift revocation of parole status and the re-incarceration of the high risk offenders (including the use of "intensive detention jail beds").

In Kansas, parole revocations were targeted by the 3R Committee and the technical assistance work provided by CSG. At the Wichita Summit on offender reentry in 2005, U.S. Senator Brownback issued a challenge for the KDOC to reduce revocations from parole supervision within three years. After the summit, the theme of how to achieve sustained reductions in parole revocations played a major role in shaping the goals behind the KOR3P. In fact, when referring to the mission of KOR3P, KDOC Secretary Werholtz linked the positive systemic outcomes associated with fewer prison returns (e.g., less crowding, safer prisons, lower costs) to the more general notion of "justice reinvestment". According to Wherholtz, the KOR3P reforms aimed *"To reduce returns or entries to prison by persons convicted of felonies, and to use funds saved by these reductions to build the capacity of communities to work with, restore, and reintegrate offenders or returning offenders."* New initiatives inspired directly by KOR3P or more general evidence based practices effectively changed the substance and context of the revocation process. For example, the KDOC developed the Behavior Response Adjustment Gauge (BRAG), a tool designed to provide graduated responses to violations, which, like in Michigan, included not only sanctions but

also positive reinforcements. More generally, under KOR3P, field staff were given more flexibility to determine interventions with fewer violations requiring mandatory revocation. At the same time, the revocation process was recentralized to enhance uniformity in decision-making across jurisdictions.

Another impact linked to evidence based practices and the new reforms in both states pertains to the way field staff viewed the purpose behind the use of the revocation process. Before the new reforms, parole revocations were mainly seen as a means of punishing offenders for violating the conditions of their parole. After the implementation of the new reforms, these processes were perceived by many as an additional opportunity to reassess levels of programming and supervision. The scope of these changes was not limited to discourses and attitudes regarding the objective of the revocation process. For example, the revised parole guidelines linked to MRPI and KOR3P were expanded to not only include protocols for sanctions, but also to include significant positive accomplishments including official or public recognition and the realization of conditions.

Reports by the DOCs of Kansas and Michigan suggest that parole revocation patterns are indeed changing, despite the fact that accounts on the process and context surrounding these changes are not fully-documented. According to the KDOC for example, the number of revocations per month has decreased significantly from an average high of 260 in 2000 to 102 in 2009, a 60 percent reduction. Revocations in Michigan are also declining.

While DOC managers continue to focus on parole, they have increasingly target the revocation process in the context of probation supervision. Like trends for parole returns to prison, figures for prison admissions linked to probation violators increased in Kansas and Michigan through the early 2000s, yet such expansion was been relatively smaller, with Michigan reporting a 51 percent increase and Kansas reporting a 25 percent increase in this subpopulation between 1996 and 2002. The realignment of probation services under KOR3P and MPRI was not straightforward for a number of reasons—e.g., unlike parole, probation services in both states were largely decentralized and dependant on local actors. Despite this and other challenges, both states have developed new strategies to engage probation agencies in the broader process of reorganization of corrections. In Kansas for example, Senate Bill 123 provided funding to community corrections to supervise prison-bound drug possessors that involve the use of the LSI-R and cognitive-based tools and interventions. More critically, the passage of Senate Bill 14 in 2007 provided grant incentives to community corrections agencies to reduce their revocation rates by 20 percent by Fiscal Year 2008. In Michigan, MDOC reformers have sought to modify the Community Corrections Act to better integrate local jurisdictions to system-wide changes in tools, protocols, and reporting mechanisms.

   2. *New approaches to service delivery (case management and programming)*

Since both MPRI and KOR3P stressed the need to create a seamless continuum of care designed to follow offenders from their entrance into prison through their release into the community, reformers in both states adopted the general framework of collaborative case management (CCM) to structure the planning and delivery of services (Burke, 2008).[7] The particular models of CCM implemented in Kansas and Michigan shared similar characteristics, with both relying on the NIC framework and stressing the integration of case management with risk assessment; each also incorporated a set of unique features, such as links to different ancillary tools such as the LSI-R in Kansas and COMPAS in Michigan.

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[7] In essence, the strategy behind CCM involves the use of EBP to determine the most efficient method for stakeholders to orchestrate their efforts together to provide offenders with the tools necessary for them to be successful in the community. Since reentry programs rely on in-facility and community based interventions, leaders in both states recognized the need to bring internal and external stakeholders together to make sure that in-facility programming was seamlessly being coupled with programs offered by providers in the community. Overall, CCM focuses the efforts of a number of stakeholders in order to make local communities safe by reducing the barriers that hamper the successful reintegration of offenders into the community.

The process of implementation of CCM was also different. The KDOC, for example, began to develop the model in parole and in institutions more or less at the same time. However, such process was fairly limited to a few jurisdictions and specific programs. In contrast, the MDOC sought to fully develop and implement CCM statewide (although a pilot version of this initiative was first implemented in Kent County) and focused largely on the revamping of parole services. Case management in MDOC facilities begin to change at a later date, first to reflect the new set of prerelease interventions in in-reach facilities and then to encompass core programming and implementation of the first TAP (Transition Accountability Plan). The range of interventions to be better articulated through CCM has also varied over time and across jurisdictions, from housing and transportation, to employment assistance, health care and treatment (substance use, anger management, and sex offender therapy). Consistent with the new vision of penal practice, these interventions were realigned to promote cognitive thinking and facilitate tools and skills for long-term offender success in the community. At the same time, this new framework encouraged DOC staff to focus on discrete barriers that offenders encounter when reentering society, including entitlements such as Medicaid eligibility, obtaining identification cards, and gaining access to welfare services.

In Michigan, TAPs were defined as the cornerstone of the MPRI's reentry process. Prior to the realignment of interventions using CCM, MDOC line staff referred to the prevailing parole model as one merely based on "reporting and documenting" activities: "*You were told to just enter information according to very detailed rules, contact sheets, reports, drug tests…a lot of information. We just recorded this information and then we extracted it, the same information! There was no value added, not much thinking. Some things you could use to print reports, summaries, but not much else*". Parole staff suggested that under the "*old model*" there was no articulated framework or rationale behind the documentation of interventions and there was no systematic sharing of information across parole agents or providers. According to another MDOC staff, "*We each had our own caseloads. Sometimes from intake we would get some information on specific cases when people were first assigned to us, but after that the work was done in silos*". Under the MPRI, TAPs are supposed to address many of the these deficiencies by adding the inputs from a broader number of actors (providers, counselors, and MDOC staff) and consolidating this information into individualized case management plans. Unlike the previous model, this plan is to be updated at critical junctures in the transition process, such as prison intake, the time prior to parole decision, and the time surrounding final discharge to the community. More generally, TAPs were designed to provide a set of dynamic guidelines and goals concerning offender behavior and the planning of supportive interventions across the entire transition process. Within facilities, the use of both plans has assisted in creating increased coordination between parole staff, providers, and community coordinators. In addition to the changes within facilities from the use of the two plans, once offenders enter their communities, the "integrated case supervision" version used by MPRI has led to the decentralization of community-based referrals for MPRI services. With these changes, referrals for service can now come from parole agents, MPRI contractors, MPRI staff, transition teams, and by one-stop centers.

The MDOC facility-based programs have also changed with the implementation of the MPRI. Consistent with the recent implementation of phase I of the reforms, for example, the MDOC engaged in the reassessment of programs delivered across the system's prisons and correctional facilities. While these programs traditionally received some attention from the MDOC central office, their form and content varied significantly across facilities and depended largely on input by local administrators and mid-level managers. In 2008-2009 the MDOC sought to realign these programs to make them "reentry ready" or more consistent with evidence based practices (e.g., cognitive behavioral content, targeted interventions, attention to assessed levels of risk and needs) (Patel, 2009). With technical assistance from a number of partners—CEEP and Orbis Partners among others—the MDOC developed a Program Evaluation Tool aimed at identifying gaps in programming with the overarching goal of making in-facility core programming not only evidenced-based, but also more consistent across facilities, more gender-responsive, and more to the characteristics of local inmate populations. This initiative shows how the risk element of evidence based practices can be used not only to inform classification decisions and better

evaluate offender-level outcomes, but also as a framework to assess intermediate outcomes and interventions that are supposed to materialize the spirit of the reforms (core programming in the case of MPRI).

A number of similar initiatives were developed in Kansas. For example, a number of community-based programs were assessed in 2005 by KDOC using a "Corrections Program Assessment Inventory, CPAI" (Therapeutic Community, Substance Abuse, Sex Offender Treatment). This examination of the content and infrastructure of services led the KDOC to advocate for the strengthening of the cognitive content of some of these programs. Along the same lines, in the context of Senate Bill 123, the KDOC not only certifies providers as "SB 123 providers", but also assessed the consistency of treatment plans with the cognitive focus of KDOCs overall reforms.

In this context, CCM strengthened the referral process in Michigan and Kansas and has rendered more effective follow-up activities at critical transitions—from core programming to in-reach, from in-reach to parole. This is a critical component of MPRI and KOR3P as high-risk offenders are supposed to be exposed to different types of programs as they approach parole release. For example, in many of the in-reach facilities of the MDOC, soon-to-be-released offenders are expected to receive information on how to search for jobs and how to keep these jobs and are supposed to receive assistance with obtaining personal documentation. Further, MPRI offenders returning to the community can interact with job specialists linked to local providers. Like with other parole referrals, these interactions are expected to be guided by a current TAP and the feedback of individualized transition teams. This process is supported by an infrastructure of institutional relations geared toward facilitating the job-search process of returning offenders. For example, out of the eighteen sites where the MPRI is housed, fourteen are directly associated with Michigan Works, an employment agency supported by a federal initiative aimed at developing a network of one-stop career centers (Padden, 2009). MPRI is also supported by the Department of Labor and Economic Growth and other agencies participating in an "employability council" aimed at better understanding the needs and concerns of potential employers. Some of these interactions have been successfully replicated at the local level. For example, in Kent County, the MDOC has recruited businesses willing to train and hire local prisoners.

Despite these efforts, however, the current economic downturn has significantly strained this multi-agency infrastructure with returning offenders having to compete for fewer jobs in a wider pool of applicants. To address this situation MPRI planners have contemplated the idea of sponsoring "supportive work" for offenders who have successfully gone through all of the motions, but still cannot find jobs (Padden, 2009). For example, in the Lansing area, local MPRI providers have been developing new ways to place offenders with local industries to help them to build a stable work history (MDOC, 2008).

Like in Michigan, corrections interventions in Kansas prior to KOR3P were also governed by a disproportionate emphasis on sanctioning protocols and the use of swift and often severe measures to address condition violations. The following statement of KDOC Secretary Simmons in 2000 summarizes the range of interventions specified by this model: "*I expect the parole officers to meet supervision standards. I expect them to make required notifications; to sanction offenders if they violate a condition of supervision; to revoke and return offenders to prison for repeat, serious, or public safety violations*" (Simmons, 2000:2). This model emphasized surveillance interventions over other forms of interaction and was often described by line staff as the "*law enforcement model*". With the inception of KOR3P in the mid-2000s, the KDOC supplemented this vision of "risk containment" with a broader set of evidence based practices aimed at doing "risk reduction". Case management was defined as a key component of this strategy. As such, it led to the reconfiguration of interventions by supervising officers and facilities staff, from the strong, almost exclusive focus on control and monitoring of offender compliance to a more general set of processes and outcomes aimed at better preparing and accompanying the transition of offenders to the community. With KOR3P, the KDOC provided case managers and parole officers with a new framework and instruments to better guide a variety of decision points, from sanctions and referrals to the staffing of cases and modalities of supervision. At the same time, the new model increased staff discretion over some areas such as substance abuse programming and replaced narrowly structured sanctioning grids with more general guidelines. With the movement away from predetermined sanctions

involved with specific offenses, the KDOC changed the perception that "the work in corrections is often dominated by inflexible policy, black and white strategies, and rigid structure and lines of authority" to the perception that the goal should be to "achiev[e] the right measure of guidelines and discretion to target interventions" (Pellant & Phelps, 2007:29).

One of the reasons for the change in the philosophy governing case management in Kansas was that under the prior supervision model, KDOC managers believed that the discretion of staff had been excessively legislated and that a change in the mindset, credentials, and resources available to line staff would strengthen their decision-making processes. The CCM framework that accompanied the new reforms shifted the way staff viewed supervising offenders by focusing more on a macro view of the organization, leadership, and prospective planning rather than on a micro view of managing the day to day activities of line officers (Burke, 2008; see also KDOC Annual Report 2006). Under the new model, discretion is defined as applying reasonable and professional judgment to form "individualized" decisions (Pellant & Phelps, 2007)[8].

Extensive staff training was required to implement practices associated with the new philosophy governing case management. KDOC staff were first trained on the use of assessment tools, particularly the LSI-R, followed by training on communication techniques (advanced communication, cognitive reflective, etc.). Training on case management constituted the third round of agency-wide training. A KDOC staff member reflected on the substance of this process in the following way:

> *"Before we only filled a checkbox after asking the offender if he could stay with his family upon discharge. Now we talk about family matters, try to engage the family, make sure the environment is right. Sometimes offenders think they can go home, and family members tell them it's ok, but sometimes it's not ok because of domestic violence or burnt bridges. Because now we ask better questions we can get at these issues. Before the prerelease review was just a checklist with a single overarching question: 'Do you need anything?' Now it's different, more proactive, we know how to probe, how to ask the right questions and how to react better."*

While there was some early resistance to the CCM vision fostered by KOR3P, these tensions have largely faded over time. The work of the reentry specialists is increasingly seen by other KDOC staff as "*valuable*" and "*helpful*". Several parole officers mentioned how they finally realized that high-risk offenders receiving reentry services benefited from such enhanced attention, and that the real challenge was to make these services available to other offenders. Before the implementation of the reforms, many of these officers were highly skeptical about the new model and were hesitant to refer offenders to these caseloads or to collaborate in the process. Staff felt unsure about the new division of labor between parole and reentry, reporting requirements and conflicts over the ultimate goal of correctional supervision (see section below on human resources management).

The implementation of KOR3P fostered a number of additional changes to supervision standards based on risk principles and evidence based practices. For example, reformers increasingly focused on how to use the new CCM practices to reduce violations/revocations. Under the new model, contacts with offenders are driven by case plans, not just by mandatory field contacts. Like in Michigan, responses to violations in Kansas are also graduated—although still conditioned by available resources—and require supervising officers to base their decisions on individualized assessments of risk and social and environmental factors. Like Michigan, Kansas has also placed special emphasis on assisting offenders with obtaining housing. For example, the KOR3P has devoted significant attention to building partnerships with local landlords because access to housing is viewed as a critical statewide issue that requires local solutions. In order to strengthen these partnerships, reentry staff reported ongoing efforts to

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[8] Even though the new model does account for increased discretion from line staff, the new reforms do not allow for unrestrained discretion. For example, voucher funds used in Kansas reentry programs has to be approved by the reentry director and the parole director.

build trust between landlords and the KDOC—e.g., by providing them with the cell phone numbers of the offenders' counselors and parole officer. A local reentry staff member commented that

> "*Landlords feel that the DOC is reaching out to them, that they follow-up on things, that they care and are willing to share any risks. At the beginning, when trying to recruit landlords it's all about passion, it's more like an informal process full of faith. Next it's about building credibility, credibility on the DOC, on the new initiative. In the process you find out about some CBOs that are not interested, some CBOs that cannot commit because of lack of continuity in their own leadership, time, lack of resources. In Kansas the process is one-on-one, very slow. We are starting to gain credibility but it takes time and patience. Outreach has been done everywhere: to schools, churches, employers, neighborhood associations. We have also done lots of targeted interventions, trying to get the credibility from peer-saying (chamber of commerce, CPA association)".*

In addition to the positive changes that have occurred in both states with the implementation of CCM, there are also a number of problems that have arisen as a result of these changes. For instance, some parole officers in both states expressed concern about the dangers associated with innovative work at the ground level. According to one parole office, "*We can do a lot, we are asked to do a lot, and that's fine. The problem is at the end of the day, we are the ones who must take full responsibility if something happens, if an offender kills someone. We talk a lot about collaboration, about case management and new resources. That's all good but then again, at the end of the day, is on us if something bad happens.*" Thus, some parole officers see CCM as an instrument that can help guide key decision points and serve as a vehicle to mobilize more resources. At the same time, however, the same instrument can generate confusion over professional responsibilities and functions. According to some staff, this situation is also fueled by the fact that changes to supervision standards linked to the new CCM model have not been translated into changes in "legal standards" used to assess professional liability.

Another issue associated with the new reforms in Kansas concerned a lack of expenditures on programming that is considered to be crucial to the success of the KOR3P. Despite the renewed focus on offender reentry and improving offender success in the community, the funds supporting offender programs, parole, and community corrections decreased significantly in the past decade. Between 2001 and 2005 for example, expenditures on offender programs decreased 38 percent, from $10.8 million to $7.3 million (Kansas Department of Corrections, 2001, 2006). Between 2001 and 2004, expenditures on parole decreased 21 percent and expenditures on community corrections dropped by 10 percent (Kansas Department of Corrections, 2001, 2006). The weakening of support services through these budget cuts was used to build a stronger case for KOR3P (Fabelo, 2004; Werholtz, 2008). However, now that this set of reforms is well under way, the overhaul of funding for these programs has been less ambitious than originally stated. To a certain extent this has been the result of a more challenging institutional environment marked by the current economic recession, although some of these cuts preceded the economic meltdown of 2008-2009.

In Michigan, a number of specific problems have also surfaced. For instance, with the development of CCM, the message for top MDOC managers was that supervision in the community was to be "*less about checklists and close-ended forms and more about offender success and community safety*". However, CCM still involves many tasks and intermediate steps in the planning of interventions and the identification of dynamic and static needs and risks. Observations of training seminars in CCM revealed that MDOC staff were tempted to prejudge, skip, or simplify steps involved with creating the plan. For example, when staff were entering information into a "mapping worksheet", they acted as though they already knew the answers to the questions without going through the actual process. Another problem that arose with the implementation of the new reforms in Michigan was that there was still a weak infrastructure. More specifically, staff for facility coordination is very limited, no new counselors or case managers are present in facilities, some key processes are still handled in the context of traditional roles, and caseloads are still high in facilities.

3. Human resource management

While the reforms in Kansas and Michigan relied on a number of new tools and instruments to enhance corrections interventions, one of the greatest areas of organizational change associated with the new initiatives pertained to the management of human resources. More specifically, both KOR3P and MPRI emphasized that prisoner reentry would signify a "*new way of doing business*" and that the daily routines and activities of both offenders and staff would be reconfigured according to a new philosophy of correctional practice centered on offender success. The dissemination of this new vision was based on policy forums and "road shows" involving line staff, central managers and reform planners. This effort was further supplemented by new reentry-focused DOC newsletters, brochures and memos, most of which were largely funded by grants and input by external actors, particularly in Michigan. The dissemination of the new vision within the DOCs benefited significantly from the planning process associated with the reforms because a number of staff members and managers that participated in such process became, to a certain extent, agents of change within their own workplace—that is, they also facilitated the disseminated of new vision, participated in informal coaching of peers and sometimes supervisors, and provided feedback on implementation process. This internal education campaign paralleled a broader initiative of marketing of the reforms among corrections stakeholders, elected officials and representatives from other state and local agencies.

The organizational transformation of the DOCs under KOR3P and MPRI was cemented on the realignment of their human resources across a number of activities—e.g., retraining of current staff, modification of job descriptions, creation of new positions. While the reforms relied on all of these strategies at different points, they primarily focused on skills development to reconfigure penal practices according to the new institutional vision. In Kansas, this process paralleled the creation of new staff program positions in facilities and field services (reentry specialists). In Michigan, reformers supplemented changes to job descriptions with an overhaul of quality assurance for staff and provider-based interventions.

Both jurisdictions focused on skills development through cross and vertical training of uniformed and non-uniformed staff in facilities and community-based settings. Workshops and training sessions revolved around CCM and its ancillary tools, notably the new risk assessment instruments, and communication strategies for staff-offender interactions. DOC managers interviewed for this project highlighted some of the difficulties associated with the implementation of a process of organizational change supported primarily on training of current staff. They observed that minimizing staff resistance was a "*difficult*", "*tiring*" task especially when considering alternatives such as the creation of new units, or new positions. These alternatives were not fully developed due to varying institutional and financial considerations (insufficient funds to sustain change long-term, need to preserve collaboration with unions, long delays with formalization of new structure or units).

In Kansas, the implementation of the new skills development program contrasted with the form and content of the training infrastructure of the KDOC under the traditional paradigm of correctional practice. Under the supervision model that preceded KOR3P, the message conveyed to facility-based security staff was that their job was to enforce rules and to focus on safety issues. With KOR3P, the department stressed the importance of having security staff contributing to changing the way offenders think and behave, in addition to maintaining safety. Consistent with this strategy, training moved away from emphasizing communication tools such as verbal judo and more into cognitive-based tools such as motivational interviewing. Unlike Michigan, the development of these programs was largely made in-house, although delays in the hiring of lead skill developers and funding altered the original timeline and scope of the training component of KOR3P.

Also, unlike Michigan, the KDOC sought to change the profile of the department's workforce through the strengthening of programs staff and the recruitment of employees with a more solid case management background. According to KDOC managers, "*We [the KDOC] hired cops, ex-cops or wanna-be cops for the longest time. This was the law enforcement model that was prevalent in the 1980 and 1990s…nail them, trail them and jail them. That was fine but we now have to deal with its aftermath: many of the staff resisting risk reduction say that they didn't 'sign up for it', that corrections is really about 'enforcement', not 'hug a thug'*".

Staff resistance was also difficult to overcome because of the substantive nature of the changes associated with KOR3P. Given the new focus on CCM, the actual changes in staff work routines and protocols linked to the reforms were defined by a set of general principles and broad messages rather than narrowly-defined standards for contacts, drug tests, etc (Burke, 2008). Thus KOR3P reconfigured a training model that was traditionally-based on the dissemination of specific guidelines with a more flexible CCM-based framework aimed at transforming the logic and orientation of staff-staff and staff-offender interactions. According to managers, "*it would have been easier if all we had to do to implement KOR3P was to replace one set of guidelines with another. That's what staff wanted and demanded all along because that's what they were used to. With KOR3P is different because yes, we want practices to change, but need to work on the rationale, the vision, the big picture too. We don't need to micro-manage our staff if they get what the department is about, if they are professional and know what they are doing.*" More critically, managers were confident that the long-term integrity of the reforms would not be based on formal standards but rather, on the ownership of the CCM paradigm by staff and leadership: "*Risk reduction will stick but not because we have it written down in codes or staff manuals. We are doing a lot of that already. It will survive because the reforms have proven to be effective and because people see that this model of corrections works better than one where you try to formalize every decision, every contact. That cannot be done, and even if it could be done, it would not be good because we know that 'one size doesn't fit all'.*" The general principles of CCM allowed for this ownership process to unfold as local managers and staff translated general risk reduction principles according to their own environments.

In Michigan, the reorganization of human resources of the MDOC also required changes to the infrastructure in place for skills development of corrections personnel. According to reformers, this unit within the DOC was well-suited to sustain the model of penal practice that preceded MPRI—one based on control and surveillance, narrowly-defined standards for supervision and micro-management of staff. According to central MDOC managers, "*The training division was ok, but could only do so much. They were great at training people on important things, but nothing too big, like firearms, evacuation routes, first aid, as so forth. We just didn't have time to wait for them to acquire the skills necessary to disseminate the tools and vision of MPRI.*" This approach justified the heightened use of external actors such as ORBIS partners and other NIC consultants to disseminate the new model. For example, given the MPRI's focus on community development, key program staff was expected to learn how to identify reentry assets and stakeholders in communities and institutions, how to identify barriers for parolee success, and how to identify funding gaps in services. These skills were necessary to develop reentry plans in each of the MPRI sites throughout the state.

Over time, the capacity building associated with MPRI tasks and objectives have increasingly drawn on DOC resources and staff—train-the-trainers on CCM, COMPAS refreshers. In Kent County for example, line staff reported receiving significant training and exposure to EBP and CCM. However, by some accounts, there is still a mismatch between the staff's ability to summarize and communicate the basic of this agenda for change, and the actual translation of these principles into practice (Bynum, 2008). Overall, MDOC line staff reported that the most important "training" received from central office was the strong message of support and encouragement that they received from the top MDOC leadership regarding MPRI: According to one of them, "*It was a big deal for us to hear the Deputy Director [of MDOC] say to us 'I've got your back'. We never heard anything like that from the top players.*" This support was critical because like Kansas, the actual content of the reforms was still under development or required further adjustments. The idea of trying a different model for supervision made many agents anxious about liability issues, media exposes and performance reviews.

In addition to structured workshops with external trainers, the dissemination of MPRI within the MDOC relied heavily on ongoing motivational sessions with staff. Some staff indicated that their first exposure to MPRI was through "*mountain top experiences*" featuring the top leadership of the Department presenting the vision and rhetoric of the reforms. In one of the meetings we were able to observe, a key MDOC manager told a number of line staff about how MPRI compared to other corrections models: "*We went to other places [to look for good programs] and came empty-handed. We looked for good ideas but didn't find too many. Here things are different, here things are changing. We are the vanguard of change, you are the vanguard of change.*" In the same session, senior managers defended the substantive core of the reforms by stating that "*MPRI is not hug-a-thug. You are crime fighters, your work protects the public, makes people safer.*" The message conveyed by reformers was not only that MPRI made sense on practical or normative grounds, but also, that it made sense at a personal level because the adoption and dissemination of the new model would raise the professional profile of those electing to do so within the organization. In essence, leaders communicated that the "*MPRI is the new way of doing business. MPRI is staying and if you become the new face of this transformation, this will also be good for you…you can be the new leadership of the department*". The label of "agents of change" was one of the many signals employed by MDOC to convey the sense that participating in MPRI could foster professional success—other signals included rumors about the promotion of young local leaders to more prominent positions, and/or the removal of others that did not fully engage in the reforms.

In both Kansas and Michigan the restructuring of human resources induced feelings of anxiety among line staff in prisons and parole. The context and motivation behind this sense of "uneasiness" took various forms: For some, the changes introduced by the DOCs were contrary to the underlying mission of corrections ("*we are about law enforcement, not programs*"). Others discounted the value of the reforms on an "empirical" ground –"*it just doesn't work*"—or practical considerations –"*we cannot afford it*" or "*this is just the flavor of the month*". Another group of staff resisting the reforms denied its substantive focus by either simplifying the nature of the proposed changes –"*it is just another early release program*"—or altering its content to suggest that the reforms did not bring any innovations—"*we are already doing good prelease programming*". Resisters mobilized these discursive strategies depending on their relative position within the DOC: managers for example, were more concerned about funding and sustainability, whereas line staff expressed concerns about privatization of corrections (Michigan) or massive layoffs (Kansas). According to a local MDOC manager who has played an important role on MPRI, negotiating strategies to address there different forms of resistance is particularly difficult because "*As a manager you may be able to isolate resisters, but when they are entrenched in safe positions, and even positions of leadership, this is almost impossible to do.*" According to this person, the paradox posed by resisters is very clear when examining their relative presence across the three basic shifts of MDOC facilities: "*Because resisters have tenure and experience, they have been able to get the best shift, the morning shift. They also get the afternoon shifts. The newbies and the awkward work the graveyard shift, in facilities away from urban centers. So, the problem is that resisters to the reforms are disproportionately represented among those who have the maximum exposure to inmates. The good shits have the least turnover and hence the most entrenched culture, one that not always works on our favor.*"

The concerns and motivations raised by staff to justify the resistance or skepticism vis-à-vis the reforms were amplified during the early stages of implementation of KOR3P/MPRI because both initiatives first concentrated in developing the new vision of corrections rather than new practices and procedures. The lack of a clear blueprint for change led staff to feel anxious about job security, duties and responsibilities, how to handle the new division of labor between reentry and supervision services, and potential increases in workloads associated with the heightened attention to high-risk prisoners. These fears were also reinforced by the strength and consistency of one of the messages delivered by DOC leaders in both states: "*This is the new DOC. This is staying. You better adjust and succeed, or resist and have a hard time*". Since the change in vision preceded changes in practices, staff in both states reported concerns about the new work flow, and whether the reconfiguration on tasks only involved the addition of new routines, the replacement of old routines by new ones and/or the elimination of old routines: For some staff "*Still today it feels like reentry is really about doing your regular job and then adding a bunch*

of good, important things on top of that. You need to be good at both things, the legal staff, what's on the books, and the other staff, the new vision." This situation has fueled the perception that "*we did not forget or change the old way of doing things. We are just adding the 'flavor of the month' to what we have always done as an organization.*" While this does not appear to be a widespread opinion, it does highlight that DOC staff sought to refer back to formal standards when hesitating about the direction and content of the reforms. For some this strategy remained the modal category of adaptation to the reforms, even when the model of reform was specified by planners and stakeholders. Others were able to identify in a timely fashion emerging new practices and effectively made these their own.

We were able to observe in Michigan the dynamics of personnel attitudes regarding the demands triggered by the new model. Parole agents participating in a key training module of the MPRI indicated to us that they felt unsure about their ability to successfully meet all their *"original"* or *"legal"* job requirements *and* the new obligations linked to their emerging role as trainers and proponents of a new supervision and case management model: "*I want to do well. That's why I am here. But it's hard to do everything ok at once because I got a boss back home that is not really happy about me coming here and me spending all this time training to be a new leader. When I go home I am no leader anymore. When I go home I will have to find my way through to a pile of paperwork that has been accumulating in my desk for weeks*". This narrative points out to a number of critical elements in the transformation of the MDOC: First, as mentioned by staff participating in this particular training program, there seems to be a disconnect between the rhetoric of "we support you, we've got your back" and the fact that the workloads appear to be in the rise, especially for those that need to be trained. Second, it suggests a complex dynamics at play between mid-level managers and central managers. The former have not been the focus of the reforms and some have felt left out of the strategic planning of new programs and interventions. Suddenly, because line staff received the bulk of the attention from MPRI planners, some reported that "*Now my subordinates know more than me. I need to ask them about what's going on in Lansing because they are on a personal basis with some of the top brass.*" We heard similar accounts from line staff—both in Kansas and Michigan—describing how agents of change at the local level need to navigate difficult environments marked by formal and informal professional boundaries. Outside consultants linked to the particular training session we observed in Michigan also said that MDOC staff felt generally undervalued and unsupported, and disconnected from leadership. The fact that new lines of communications were opening up was critical, they said, but MDOC needs to follow-up appropriately: "*This is new for everyone*".

Staff resistance was also fueled during the early stages of reform implementation by the inherent nature of the changes proposed by KOR3P and MPRI. Unlike the development of other models of corrections management (e.g., the Kansas Quality Management), the reforms were implemented rather quickly, comprehensively, and above all, they relied more on informal changes to policies and procedures (some of these changes have been progressively incorporated more formally). To address these concerns, reform planners in both Kansas and Michigan should consider new ways to highlight differences in practices between the new and the old models of correctional supervision, communicating discrete elements of each model that are to be eliminated or reconfigures. In Kansas for example, while the majority of line staff had a hard time articulating the specific elements of the old model that were dismissed or replaced by KOR3P, some did point out to some concrete discrete policies such as the elimination of the mandatory 120 review days used as template for release planning.

Middle level managers of both DOCs also expressed concerns arising from the implementation of the reforms. For instance, as mentioned above, some of the MDOC managers at the local level reported feeling "left out" of key decision points regarding the training of line staff. This was portrayed as an important issue because weakened their ability to *"broker change"*. This type of reaction was linked to a number of discrete events beyond the staffing of training groups—for example, the form and content of core programming in facilities, staffing of in-reach facilities, relationships between parole area managers and local providers. In all of these instances, MPRI has been seen by a number of middle and local leaders of the DOC as an attempt to recentralize decision-making and increase oversight over interventions and protocols. While MDOC has sought to address these issues through the operation of

local implementation teams, some of these issues continue to be raised several years into the implementation of the reforms.

Like Michigan, staff reactions to the reforms varied across local context and position within the organization. However, KDOC line staff, particularly uniformed personnel, expressed heightened concerns about layoffs, and potential reduction of the "*law enforcement part of corrections*". This worry was also communicated by some parole officers. More generally, parole officers and uniformed staff felt that KOR3P had paid disproportionate attention to the staffing and consolidation of programs, without comparable attention and resources to supervision and custodial staff ("attention" in this context was often times articulated by staff in terms of ("(lower) *wages*", "(lower) *status*", and "(lower) *resources*"). Most of their anxiety was nevertheless directed at the new reporting requirements associated with the emerging structure of reentry services for high-risk parolees: for some field officers, it was unclear whether they maintained control over all aspects of the cases or whether elements such as referrals and support services were now the purview on reentry specialists. Some staff further suggested that reentry was ultimately duplicating traditional assignments due to lack of a more robust specification of the new division of labor. Some of these issues were also raised by local managers—representatives of the supervision side, traditionally more autonomous, had a hard time figuring out the coordination of activities with local reentry directors and statewide leadership positions associated with KOR3P. Finally, line staff also perceived that KDOC reformers were not being effective at addressing some of the more structural issues surrounding correctional practices. For example, staff expressed concerns that the new reforms did not pay enough attention to issues such as: how to fund programs designed to assist offenders with reentering society, increases in caseload size, how staff were to be evaluated under the new reforms, and how to involve key personnel in the new reentry process (wardens and managers). Also, staff reported that the aging data and logistical infrastructure of the KDOC was limiting the potential impact of the reforms—e.g. the case management system employed by the KDOC was perceived as needing substantial upgrades along key domains emphasized by the reforms (more and better ways to describe interventions, sharing of data elements, documentation of processes by providers).

Like in Michigan, middle level managers of the KDOC also felt "left out" of the process of organizational change. According to some facility-based managers we interviewed, "*Managers from Topeka presented their new strategy to us, saying, 'here is the new order. Many of us didn't see it coming*". Because KOR3P originated partially as a bottom-up strategy and the reaction of central managers to these concerns was quick and consistent, the resistance of facility managers has been decreasing over time. However, early on in the implementation of KO3P, the relative lack of attention to concerns of wardens and deputy wardens resulted in the weakening of local implementation of the reforms, particularly in terms of the integration of routines between the new reentry specialists and the unit teams. Due to these initial problems, a number of staff members and managers of KDOC facilities said they felt as though they lacked of control of their subordinates because the "*central office was running facilities*" and not themselves. Some mid and central level managers also raised some issues that were not reported in Michigan. Specifically, a small number of interviewees talked about "*change agent fatigue*" as one of the current challenges of KOR3P. This concern was described as "natural" for the most part, given a broad, multi-year program of organizational change—and particularly one that relied on feedback from different staff workgroups. According to one staff, "it's hard to keep up a script all the time, to be always on the look out for resisters, for challenges to the model, to always feel the need to address every single challenge. You feel sometimes that some people will never change their work ethic or attitude no matter what you throw at them." For local staff also describing "change agent fatigue", the main issue was the lack of a clearer plan for the reforms: "*We are the leaders, we are supposed to know what's going on, what coming up in the horizon. People came to us for answers and many times we didn't know what to say because the plan was still in the works.*"

Structural issues may have altered the ultimate impact of these concerns in the process of realignment of functions of the DOCs of Kansas and Michigan.

Critically, rates of staff turnover in the KDOC remain among the highest in the nation. According to the Corrections Compendium for example, the 2007 turnover rate across KDOC facilities was 25%

(ranging from 16% to 34%), well above the national estimate of 16.2%. According to a 2008 report, the high turnover rates experienced by the KDOC are equivalent to having 105 uniformed positions open year round due solely to turnover (Kansas Legislative Research Department, 2008). KDOC figures for FY 2009 show that variations across facilities in turnover rates have increased significantly—the highest reported turnover rate was 41.5% at El Dorado. High turnover rates can facilitate organizational change because staff can be replaced through attrition. However, it can also challenge the ability to generate sustainable change in an organization that is in fact changing continuously due to turnover. Turnover translates into higher direct costs (replacement, recruitment and selection of new staff, managers' time) and indirect costs (morale, organizational memory).It can also force the DOC to rely on staff overtime to fill vacant shifts, and weaken the balance between junior and senior personnel during specific shifts. More critically, high turnover rates can hamper the implementation and utilization of new practices because they threaten the identity and cohesion of the DOC.

As mentioned above, the only other crucial element of the KDOC infrastructure that has likely limited the implementation of the reforms is the mismatch between the type of organization captured by the current data systems and the kind of organization depicted by KOR3P. In Michigan, issues of data infrastructure were also mentioned by staff and managers as areas that required urgent attention by MPRI planners and reformers. With regards to turnover, however, the similarities between the KDOC and the MDOC were less obvious. Unlike Kansas, the MODC has traditionally reported low staff turnover rates (Corrections Compendium May/June 2007) reflecting perhaps the role of more vigorous unions and a more robust civil service framework . However, MPRI is not completely protected from instability in the workforce because of its great deal of exposure to changes in the profile of community-based providers. Turnover rates among service providers have been documented in a number of studies, but there is little information about this particular issue in Michigan. If this is indeed the case, turnover can ultimately threaten the fidelity of the model and the consistent delivery of services for MPRI offenders.

4. _Interactions with government agencies and community-based organizations_

One of the main objectives of the reforms in Kansas and Michigan was to create a more "permeable" corrections policy to allow greater input from a broader set of institutional actors (state and community-based agencies) across a wider range of substantive areas (housing, health and mental health, substance abuse). This mandate was consistent with the overarching logic behind CCM and the more general objective of MPRI and KOR3P in terms of developing a seamless continuum of care for high-risk offenders. As such, the overall success of both initiatives of reform relied heavily on the ability of the DOCs to create or realign partnerships with local providers, community stakeholders, state officials and administrators.

A number of inter-agency collaborations on reentry topics predated KOR3P and MPRI and in many cases, contributed to the development of these initiatives. However, often times these interactions were limited to discrete programs, facilities, or subpopulations. For example, a 2002 partnership between the KDOC and the Department of Social and Rehabilitation Services (SRS) structured services for some of the soon-to-be released prisoners at the El Dorado correctional facility. Specifically, this program provided funding for an onsite discharge planner/case manager tasked addressing issues of self sufficiency of inmates and transitional planning (Kansas Department of Corrections, 2002). More generally, the KDOC sought to use "boundary spanners" to broker relationships between the nascent reentry staff in facilities and on parole and a variety of community and state agencies (Pettus & Severson, 2006).

As the vision for broader reforms began to develop within the DOCs, this micro model of agency collaboration was reconfigured for a broader implementation across setting and domains—e.g., from attention to specific barriers to reentry to addressing more ambitious issues such as child support and local detainers. Like in Kansas, the early use of boundary spanners in Michigan was described by the local SVORI site as one of the strategies in place to better coordinate the delivery of services. However, this

particular experience was not transferred to the more general set of protocols for agency collaboration included in the MPRI.

KOR3P and MPRI advocated for sustainable partnerships between the DOCs and other state agencies, providers and stakeholders, and reform planners. In Michigan, reentry was seen by top managers as a way to promote community development through a more decentralized system of service delivery based on a network of providers, fiduciary agents and institutional supports from the MDOC. In this sense, MPRI sought to better engage state agencies via new forums such as the state policy team, but also, and more importantly, as an effort to make reentry a grassroots-level issue—although over time this focus was redirected toward more legislative action and engagement of key stakeholders at the state level. While community development was also a driving concern of planners of KOR3P, efforts centered more heavily on changes within the KDOC rather than at the community level. Further, reformers in Kansas sought to more systematically reinforce the institutional infrastructure surrounding reentry and correction policy through new legislation and new bodies for policy coordination. In this context the KDOC developed local agendas for change like the MDOC on issues such as detainers, county-reimbursement programs for jail utilization, and the creation of a grant-based program to incentivize risk reduction work by community corrections agencies. Kansas has also developed new interactions with providers, but unlike Michigan, community-based organizations were not in charge of defining local reentry plans or administer reentry funds. In fact, for specific policy initiatives such as Senate Bill 123, KDOC increased levels of monitoring and oversight of providers. In contrast, the MDOC favored the strengthening of community providers in different ways, limiting the ability of the department to control the delivery of services—these services are to be monitored directly by local fiduciary agents. To enhance quality control in service delivery MPRI reformers have also designed a new system of "performance based" procurement to strengthen the EBP of providers.

The reforms bolstered a number of local partnerships in both states. In Kansas, local partners contributed to the planning and operation of the KDOC reentry program in different ways, from their involvement in reentry steering teams for specific offenders, to the broader mobilization of social and institutional support for KOR3P. These discrete collaborations were sometimes expanded and disseminated throughout the state through the creation of statewide or regional oversight and coordination positions often nested within the KDOC. For example, some of the county-level agreements between the KDOC and other partners (SRS, Housing) were expanded to cover other counties as well. The use of boundary spanners facilitated the work of liaisons between corrections and other key agencies such as local police departments. For example, in Shawnee County, police officers are reportedly meeting with high-risk prisoners returning to this jurisdiction in order to share with them what is expected from parolees from a law enforcement standpoint. As described by a police officer in this area, "*now we give our business cards to parolees, we talk to them, we re-assure them that we all want the same thing. We tell them: 'call me, even if there is a problem, it's ok'*". In Michigan, the MPRI empowered communities to develop their own reentry plans with local resources and local arrangements. In some of these communities such as Kalamazoo County and Kent County, MPRI facilitated new systems of service delivery along domains such as employment and housing.

These local initiatives have also been able to capitalize on more general policies that have facilitated more fluid interactions between residents and government agencies. In Shawnee County Kansas, for example, the physical location of the KDOC reentry program—in the same building as the local work investment board—facilitated interactions between reentry and employment-based resources. The MPRI relied heavily on these one-stop centers (i.e., "Michigan Works") to structure most of the fiduciary services that support the operation of program sites. In Kansas, the 3R committee provided a foundation to facilitate more narrow inter-institutional collaborations (e.g., a new batterers' intervention program in partnership with the District Attorney's office, Senate Bill 67 in partnership with SRS). The Kansas Reentry policy council has also enhanced the interactions between the KDOC and the Legislature, although these contacts have not been effective at securing adequate levels of funding for the full implementation of KOR3P. In Michigan, some of these tasks of coordination were developed by the MPRI's state policy team, although for a number of managers, these recommendations generated by

MRPI partners remained too general and hardly reached the line staff of these non-DOC agencies at the local level.

Even though interactions with the community have been instrumental in expanding the scope of KOR3P and MPRI, a number of issues surrounding these interactions have surfaced during the process of implementation of the reforms. According to local DOC managers, the marketing of the reorganization of corrections has been challenging in a number of jurisdictions. Community representatives, like some DOC staff, resist the underlying logic of the reforms on normative or practical grounds—e.g.., "*Why do you need to focus on high-risk offenders*?"The idea of focusing on the "low-hanging fruit" is also pervasive among local providers, potential employers and other stakeholders, making the process of recruitment of community partners more difficult. Further, the skills and tools available through these providers may not be consistent with the emerging attention that the DOCs are paying to EBP. Further, some may have a different framework for addressing issues such as substance abuse or mental health that may collide with the framework associated with the new reentry reforms. Despite these challenges, it was reported that some potential employers and other key partners of KOR3P and MPRI have been effectively integrated to the reforms via memoranda of understanding crafted to provide them with "safe exposure" to the initiatives.

Over time, each state has also faced a number of issues in connection with the community/partner interface of the reforms. In Kansas for example, securing buy-in from local agencies was a significant barrier to the initial implementation of KOR3P. According to DOC staff, their support was sporadic, with reactions to the initiative ranging from "*incredulity to active resistance*", particularly with regards to the connection between offender success and public safety (e.g., "*this is soft on crime and is not acceptable*", "*the only sanction available to people who fail parole should be revocation*", and "*you're going to get people killed*". This resistance made the local integration and coordination of initiatives exceptionally difficult in some jurisdictions. Issues of licensing requirements for community providers were also problematic because they created tensions between KOR3P partners at various levels: Traditionally, SRS had been in charge of regulating the operation of substance abuse treatment throughout the state and across programs. But with Senate Bill 123 this function was supplemented with another layer of oversight by the KDOC and a new framework to define and understand treatment interventions. As such, providers are licensed by SRS but "SB 123 certified" by the KDOC.

Tensions surrounding the operation of SB 123 point to a broader set of challenges associated with the alignment of the new KDOC vision with the vision and practices of other criminal justice agencies at the state and local levels. In some jurisdictions for example Police departments have been particularly critical of the DOC approach and have resisted partnerships on key topics (e.g., detainers). More generally, while there has been increasing agreement between the KDOC and the Legislature regarding corrections policy, some of the core initiatives triggered by KOR3P continue to lack state funding. There appears to be an inconsistent between the reentry focus of the KDOC—inspired partially in the paradigm of rehabilitation—and the rationale guiding the toughening of the state's sentencing guidelines—based on just deserts and incapacitation.

In Michigan, a number of inter-institutional challenges also arose as a result of the implementation of MPRI. Service providers for example, expressed concerned about the "*mixed messages*" they were receiving from MDOC leadership: "*On the one hand, we heard all about collaboration and support from the top players, how this new program is going to make things different, how this is a big priority. But on the other, when we go talk to line officers, to community coordinators, people are not aware of the big changes, of the more general conversations we are having with the DOC. They reply is often 'we're not the DOC, we don't know what you're talking about'. It's very frustrating*". This issue is likely the byproduct of the highly decentralized structure of the MPRI, based on local control by community-based fiduciary agencies and MPRI coordinators of reentry resources, programs, and priorities. Faith-based provider in particular felt they had not been taken "*very seriously*" by the MDOC suggesting that they are seen as "*unsophisticated*", "*lacking training*" and not interested in "*accountability*". At the same time, MDOC leaders expressed worry about some community-based providers (including some of the faith-based agencies) approaching MPRI as "*another revenue stream*" as opposed to a more ambitious call to

redefine community development. Also, MRPI planners sought to increase the accountability of providers by implementing mechanisms to monitor model fidelity and effective delivery of services. They expressed the need to expand MPRI in a way that would facilitate a "performance based contracting" system, which fosters among providers better processes of documentation, quality assurance, a reward-based performance. However, this is a challenging process because fiscal agents, not the MDOC, are in charge of the procurement of MRPI services across the state. As such, these fiscal agents may select providers according to their own rules and regulations and not necessarily on the basis of EBP and other key principles of MPRI. With the apparent failure to use EBP to select providers, some have claimed that the implementation of the new reforms has been "*inconsistent and incomplete*".

5. Negotiating local processes

The implementation of KOR3P and MPRI benefited substantially from pre-existing local, often county-level reentry initiatives and other institutional partnerships focused on corrections programs and supervision. Some of these initiatives were strengthened by SVORI funding but others predated this effort. For example, communities in Shawnee county Kansas were engaged since 2000 in partnerships with government agencies via a local site of the federally-funded Weed and Seed program. Similar efforts were also reproduced in Wichita: In collaboration with the KDOC, local stakeholders facilitated the creation and operation of a new Day Reporting Center (2002) and mobilized support from the city, the county and other actors (universities, providers) to create a partnership on reentry issues that ultimately resulted in the Wichita-Sedgwick County Offender Reentry Taskforce (2003). In Shawnee and Sedgwick counties the sustained commitment of local stakeholders to reentry work shaped the form and content of KOR3P and contributed to its implementation. In other communities such as Wyandotte County, this process was more difficult due to local resistance to the initiative.

In Michigan, a number of local reentry programs also facilitated the planning and implementation of MPRI. While some of these programs focused exclusively on the development of alternatives to incarceration, most did emphasize prisoner reentry using different strategies and funding models. For example, the Genesee County Parole Reentry Program implemented in 2003 attempted to tackle both substance abuse and recidivism by placing parolees in residential treatment before moving them to home treatment. Also, in Kent County, a reentry roundtable was created in 2000 to assist local offenders obtain employment and education. In Kalamazoo, a highly institutionalized criminal justice committee with representation from the sheriff's office, police department, the county attorney's office, and other stakeholders was created to encourage collaboration on public safety issues including the reintegration of local offenders. After the initial implementation of the MPRI in 2005, some of these programs modified their protocols to make them more compatible with the framework used by the MPRI. For example, the work in Kent County were redirected to emphasize the employment component of MPRI while in Kalamazoo County the initiative was to directed to implement release preparation.

Overall, the operation of local reentry programs in Kansas and Michigan facilitated the development of broader, more ambitious strategies like MPRI and KOR3P. This was possible because these programs created a forum for debate on reentry policy, they exhibited a certain level of documentation of key processes and relevant outcomes, and more critically, they had engaged local media and stakeholders on a public education campaign regarding the problem of returning prisoners to local communities and the need to mobilize governments and residents on this particular issue.

The alignment of local initiatives with the new state level reforms differed somewhat across states: In Michigan, unlike Kansas, the planning of MPRI was less dependent on the programs implemented by local sites. Rather, their feedback was used to plan the new initiative and over time, these local plans were largely incorporated into the MPRI. In Kansas, these local programs effectively became KOR3P, although they were reconfigured to enhance service delivery and coordination. For example, early evaluations of the Shawnee and Sedgwick reentry programs suggested that targeted offenders stayed in prison longer than anticipated and that they needed more specialized services (not just a reentry case manager, but also more support in specific areas such as vocational skills and housing).

The reforms implemented in connection to KOR3P and MPRI also caused the displacement of some of these local programs (from local focus to state focus) and triggered new concerns and issues across a number of domains including for example the funding of the new DOC reforms (e.g., resistance to local matching requirements for the operation of the Wyandotte Co. Reentry Program), complaints about the weakening of revocation proceedings and its linkage to higher crowding of jails (e.g., "*now jails are used to handle revocations*", we were told in by a few local stakeholders in Kansas), and the questioning of the new vision embraced by the DOC on normative grounds by local law enforcement and city governments. Overall, the new reforms faced the significant challenge of establishing community support even though individuals and agencies in local communities were skeptical of the new direction of the DOC and/or its associated benefits at the local level (e.g., "*this is a state thing, funded with state money, for state prisoners*".)

While the reforms were indeed conceptualized as statewide initiatives in terms of funding and planning, they critically depended on the feedback and process associated with the operation of local reentry programs. DOC managers in Kansas and Michigan indicated to us that some of the most significant challenges to the effective implementation of the reforms were inherently local issues (housing, law enforcement, municipal courts, assessments, attitudes of residents). They also told us that while some of these problems had been long standing obstacles associated with any local or state reentry initiatives, others emerged as distinct byproducts of the reforms (for example, because both reforms relied heavily on the local mobilization of resources and planning, they had the potential to amplify rather than mitigate county-level variation in reentry efforts). To mitigate these problems, local DOC reentry staff sought to "customize" the vision and rationale of the reforms when recruiting new partners:

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> *We always need to be on the offensive, trying to make people think differently about reentry (internally and externally) sometimes it's too much. This is how we proceed: when we walk in to a new place/organization, reentry staff need to perceive themselves as being on a one-down position. So the reentry talk needs to be adapted so it fits the given target organization- make it look that is their idea, say that we are "learning" from them, that it's not about them doing things wrong but that things can have a different spin. We say things such as "can we do things this other way?", "what are the challenges of doing it this way in terms of safety?". This is a very stressful role because on the one hand you need to show respect for how things have been handled but at the same time foster long-term changes. Overall, we need to have different rules of engagement depending on the facility or the organization.*

At the ground level, key actors that were involved with the implementation of the new reforms effectively made public their support for the initiatives, which in turn helped mobilize other organizations. In Kent County for example, a couple of police officers that participated in meetings with prisoners and in-reach coordinators reported positive experiences and stated that in connection with MPRI" *we have invested a lot on relationship-building*". In another instance, police officers that visited an MPRI cohort in an in-reach facility told offenders that "*we welcome you back, but you got to behave*". According to the officers, this conversation triggered a "*very good exchange*" on how to handle harassment complaints, how to act vs. react, and how to file a complaint. At the end of this meeting, one of the MPRI offender reportedly told one of the officers "*I have never talked to a police officer I was not running away from*". These positive experiences have also benefited from prior initiatives, such as Grand Rapids police officers going to see prisoners at Bellamy Creek correctional Facility.

B. Contrasts in design and implementation of the reforms

The recent process of corrections reform in Kansas and Michigan provides a unique opportunity to examine how the institutional and social environments in which corrections reforms develop can impact the form and content of such reform. Both states are similar in a remarkable number of relevant domains

for reentry policy, ranging from the overall structure of their criminal justice apparatus to the dynamics of their electoral processes. But both states are also different regarding the origins of reentry initiatives, the infrastructure mobilized for the implementation of such reforms, and the substantive orientation of their reentry strategies. Below is a summary of key similarities and differences as they relate to both the context in which the reforms took place as well as the substantive content and dissemination of those reforms:

1. _Key similarities_

- _The pervasiveness of a "tough on crime" approach to sentencing and corrections policy_. Both Kansas and Michigan are "tough on crime" states. This approach is partially reflected in the heightened severity of punishments structured by sentencing guidelines and parole practices. For example, the restructuring of Michigan's Parole Board in 1992 lead to a more rigorous review of parole eligibility (Firestone, 1997). Also, in 1998 the Michigan legislature enacted a modified version of Truth-in- Sentencing that went beyond the Federal Violent Offender/Truth-in-Sentencing provisions, eliminating disciplinary credits and requiring offenders to serve 100 percent of their minimum sentence in secure facilities (see Citizens Alliance on Prisons & Public Spending, 2008). More generally, in both Kansas and Michigan, a number of statutory sentences for violent offenses are significantly longer than the nation's average. While in recent years, some of these provisions have been moderated or eliminated largely due to concerns about unabated prison expansion (for example, Michigan's 2002 repealing of mandatory minimums for drug offenders and enactment of retroactive parole eligibility) (Affholter & Wicksall, 2002; see also Alexander, 2009) there are prevailing initiatives that continue to adhere to a "get tough" approach (for example, passage of Jessica's Law in Kansas).

- _Decreasing _ideological_ conservatism and increasing _fiscal_ conservatism in corrections policy_. The traditional ideological conservatism of Kansas and Michigan with regards to corrections policy (se e.g. the "tough on crime" policies described above) has been moderated by recent changes to sentencing and parole guidelines. Corrections policy has also changed by mounting strains on state budgets. Early on, elected officials in both states largely considered prisoner reentry on the grounds of cost effectiveness. Consistent with this approach, initiatives of reform in Kansas and Michigan—including those articulated in the MPRI and the KOR3P—took aim at reducing revocations levels and increasing community-based sanctions as a way to reduce the rate of expansion of very costly prison systems. Over time, this narrow view on the impacts of reentry has expanded to include for example, offender success (this was a key driver in the models by MPRI and KOR3P). Overall, both prisoner reentry initiatives have effectively linked reentry policy to cost-savings and public safety: Using similar discourses, they both suggest that the traditional emphasis on incapacitation as the cornerstone of correctional practice is financially expensive and ineffective. They both advocate for a more comprehensive paradigm for penal intervention geared toward creating public safety though interventions in facilities and in the community.

- _Sustained legislative support_. Both initiatives of reform have largely succeeded at sustaining legislative support, even in the midst of a serious recession. According to former MDOC Deputy Director Dennis Schrantz, such support in Michigan is ultimately based on the overall objective of MPRI: "Everyone wants a reduction in crime" (Michigan Department of Corrections, 2006b). In Kansas, early corrections reform efforts created an institutional infrastructure (e.g., 3R Committee, House Corrections & Juvenile Justice Committee) that has been instrumental in mobilizing support for more ambitious initiatives on prisoner reentry with substantial bipartisan support—for example, the republican sponsorship of Kansas Senate Bill 14 on risk reduction for community corrections. The emerging bipartisanship on reentry policy has been acknowledged by some of the external funders and actors—Pew, CSG—and used as a point for greater engagement.

This marketing of reentry is critical to generate additional support for the reforms, especially when such reforms require additional funding commitments from the state. Given that the legislators' overarching interest in recent years has been to generate savings in corrections, without a public education campaign on the benefits and process of reentry for DOCs they may hesitate to fund these programs beyond more short-term, inexpensive measures to reduce prison population. A public education campaign is even more essential in times of fiscal crisis, as argued by Schrantz: "One of the political difficulties we face each year is that elected officials do not have much context to consider the importance of inmate education and vocational training and are relatively unprepared to provide rational arguments as to why we should fund programs for convicts when we are cutting programs for kids. The MPRI provides the framework for that rationale: We have to fund programs for inmates to reduce crime, reduce the number of victims, to help restore communities, neighborhoods and families" (State Bar of Michigan, 2005:2). In both Kansas and Michigan, the development of these campaigns was a fundamental piece of the reforms. The KOR3P blueprint for example, articulates a first round of efforts to be implemented including a "rather immediate campaign of public relations and education." The MPRI relied on two private partners, Public Policy Associates (PPA) and the Michigan Council on Crime and Delinquency (MCCD), to develop a communications strategy that has contributed to enhance the scope of the program—a smaller effort also took place in Kansas. Despite the short-term benefits of linking reentry to public safety, the long-term return of this strategy is unclear. In Michigan there is growing dissatisfaction among legislative supporters of MPRI largely because they fail to see how and when the cost savings from the initiative would translate into a smaller MDOC budget. The same pitfalls apply to expectations by media and state residents.

- *A focus on communicating the rationale for change to staff*. The reentry models in Kansas and Michigan also shared a similar message vis-à-vis their own corrections constituencies: Both reforms emphasized a change in philosophy and vision, more than a discrete program or set of programs, protocols, or guidelines. This was consistent with some of the national models used to develop the reforms (NIC's Transitions from Prison to Community, Collaborative Case Management). Rather than promoting more traditional, inflexible, micro-level frameworks to define correctional practice, KOR3P and MPRI specify more dynamic scenarios with greater levels of discretion and adaptation by managers and staff (see for example, Burke, 2008, also Pellant & Phelps, 2007). Both initiatives were described by DOC as managers as "*building a house*"; in Michigan, MPRI was summarized as "*driving a car with many moving, interchangeable parts*" or, even more often, as "*building a plane while in flight*", with the process of implementation consisting of "*trying to get as many passengers on board as possible.*" This process created high levels of anxiety among staff, especially during the initial stages of reform planning and implementation. Like in many states, correctional bureaucracies in Kansas and Michigan were used to waves of organizational change based on highly formalized, structured tools and protocols—e.g., new guidelines, checklists. The new reforms represented a shift from this model, thus resulting in heightened uncertainty: in Kansas, the reaction to the metaphor of a DOC mid-level manager was "*if the KOR3P is a house…what kind of house is it? An outhouse? A mansion? We didn't have a sense of the big picture.*" Similarly, in Michigan, the reply to the image of the MPRI being like a plane was one of characterizing such plane as "*flying by night.*"

- *A change in corrections discourses*. Beyond the challenges of communication of the rationale behind the new initiatives, both the MPRI and the KOR3P advocated for a substantial realignment of correctional discourses and practices. Because such realignment was accompanied with a reexamination of previous models considered to be more driven by a doctrine of incapacitation and a law enforcement perspective, the reforms struggled to differentiate themselves from various stereotypes, ranging from "*this is just another early release program*" to "*this is too soft, or hug-a-thug*" to "*this is rehabilitation all over again*". The rhetoric of both

DOCs moved away from language that would facilitate this type of reaction. In the blueprint of KOR3P for example, the word "rehabilitation" is not used—instead, the document refers to the offender's process of "internal change". Some MPRI documents include references to rehabilitation but often times this concept is directly linked to "offender accountability". In some occasions, the differentiation of the new initiatives from prior models is less explicit but equally important. For example in a training session on collaborative case management, a DOC manager referred to the parole agents in attendance as "*the new crop of crime fighters*". More substantively, reentry initiatives in Kansas and Michigan were framed as different from rehabilitation due to their more ambitious framework based on enhanced community development and better government, not just offender success. For example, former MDOC Deputy Director Schrantz said that the 1970s rehabilitation model "(…) failed, in my view, partly because Corrections departments continued to operate in a vacuum without the requisite partnerships with other state agencies that provide the funding for the services associated with parolee success: housing, employment, substance abuse and mental health services" (State Bar of Michigan, 2005). In other words, the systems integration advocated by MPRI (Duran, 2007), and KOPR3P was framed by some of planners in terms of generating cost-effective synergies within corrections rather than in more normative ground (Alexander, 2009). Indeed in both states, one of the underlying rationales for partnerships was the realization by state officials that "*we are paying for each of these guys two, three, multiple times*" through different programs and agencies.

- *Programs targeted to high-risk offenders and focused on risks and needs*. The MPRI and the KOR3P shared a number of more explicit characteristics. Consistent with evidence-based practices, they both target interventions for subpopulations assessed as high risk through the use of actuarial tools of assessment and classification; they both structure supervision and programming interventions on these grounds, modifying both tracks of intervention at key junctures of the correctional process. Over time, both models seek to impact the overall operation of corrections by customizing protocols according to levels of risks and needs. In the meantime, however, the scope of the reforms remains relatively limited to high risk offenders released to parole (in Kansas, there are additional limitations marked by the geographical coverage of reentry programs). Both initiatives also shared similar challenges regarding the coordination of reentry initiatives within the DOC and across agencies: within the domain of programming, for example, efforts not only involved interventions across different areas (job preparedness, mental health), but also different populations (offenders with disabilities, women), different partners (volunteers, providers, other state agencies), in many jurisdictions (rural, urban), with potentially different funding streams, assessment instruments, and reporting requirements. As indicated in a KDOC report, a new framework requires coordination to be "inter-branch, inter-agency, inter-jurisdiction". The creation of reentry offices with substantial power within the DOCs has facilitated this task, although both jurisdictions still face significant challenges (data integration, long-term reassignment of reentry funding directly through state partner agencies).

- *Local-level challenges to state-wide reform*. Local stakeholders remain wary of the operation and funding of large-scale reentry policies in both states. Generally, local-level stakeholders tend to see reentry policies as addressing a "state problem" thus not requiring further commitments from specific jurisdictions (Kansas) or resulting in the displacement of community resources traditionally geared toward local reentry programs (Michigan). Other operational issues related to MPRI and KOR3P continue to be debated at the local level, including, for example, county reimbursement programs, detainers in local courts, and relative availability of providers in more rural jurisdictions.

2. *Differences*

- *Planning and dissemination of the reforms*. Unlike Michigan, Kansas implemented a substantial set of reentry reforms with very few resources. The KDOC was not able to persuade the legislature to commit new funds to services or programming until KDOC was able to demonstrate a reduction in revocation levels and other quantifiable impacts on the size and cost of the system linked to the new efforts. In Michigan, the state's reentry efforts began with significant technical assistance and substantial support from key stakeholders at the state level. Indeed, MPRI was a top-bottom initiative guided by the Governor's Office and key MDOC managers. To a certain extent, the implementation of KOR3P was also coordinated by top executives within KDOC. However, a number of programs and initiatives that preceded KOR3P were largely implemented by mid-level KDOC managers and staff. Perhaps due to its closeness to political leaders, the MPRI had a more clearly defined strategy of statewide implementation aimed at completing the reorganization of corrections by the end of the second term of Governor Granholm (January 2011). Also, the content and strategy of the reforms in Michigan were more critically impacted by the short-term needs of the corrections system regarding prison beds and resources (MPRI was reconfigured to maximize rapid impacts on prison populations). While in Kansas some of these moderators of reform did exist, they were less visible; for example, some of the pressure on the prison expansion had been partially alleviated through initiatives prior to KOR3P. Also, while KDOC strived for a broader implementation of risk reduction in the state, such expansion was not tightly associated with a specific time or indicator of coverage.

- *Mobilization of resources*. Despite the lack of early financial support of the state, the KOR3P benefited from an institutional infrastructure that facilitated the mobilization of support and technical assistance for specific projects—e.g., the 3R Committee, the Kansas Sentencing Commission, the Joint Legislative Committee on Prisons and Corrections. The exchanges between these actors led to the passage of several pieces of legislation that alleviated some of the short-term pressures of the resources of the KDOC (e.g., SB 323 (2000), SB 67 (2001), SB 123 (2003)). However, because this infrastructure was largely aimed at examining ways to moderate prison growth, their ability to galvanize support for reentry initiatives was somewhat limited; yet, in recent years the work of CSG has enhanced some of these partnerships, reflected, for example, in the enactment of SB 14 (2007). In Michigan, this government infrastructure was limited to legislative bodies and related entities such as the Senate's Fiscal Agency. However, reentry efforts in this state benefited from the greater visibility and technical capacity of non-profit agencies and research-based organizations that provided effective support for the planning and coordination of the MPRI.

- *Model for service delivery*. Kansas' reentry program was largely focused on the development of new capacity within KDOC through the hiring and recruitment of new reentry personnel and the training of the existing workforce. The strategy focused both on the parallel development of facility and community-based processes with an emphasis on cognitive interventions. In Michigan, reentry was primarily focused on the development of community capacity for reentry. As such, it privileged capacity building among providers and delegated some of the local planning capacity to area coordinators and representatives. Consistent with this framework, most of the attention of MPRI was devoted to pre-release preparation, parole, and other community-based interactions. The resulting division of labor of the two models was remarkably different. In Kansas, reentry specialists contributed actively to the case management of offenders through direct input in reentry plans, referrals and services. Parole officers, while retaining formal control of the entire community-based process, effectively concentrated on supervision activities, leaving service and treatment interventions to KDOC specialists. In Michigan, parole agents benefited from the infusion of resources through MPRI, but their routines vis-à-vis providers remained

largely unaltered; in Kansas, however, there has been a reduction of programming funding resulting in comparatively lower rates of availability for programs.

- *Quality assurance and oversight*. Because of substantive differences in design of service delivery of the two programs, there are also differences in oversight and quality assurance. Given the MPRI's focus on community development, procurement of services is partially controlled by fiduciary agent. The enhanced visibility of providers makes the model more vulnerable to turnover of staff in these organizations, lack of training on evidence-based practices, and inconsistencies in reporting. Given that in Kansas a significant fraction of reentry is done by KDOC staff, some of these problems may not be as important. However, because both supervision and service tracks are nested within the same agency, the division of labor may lead to conflicts over policies and reporting.

- *Staff buy-in*. In both states, the domains of staff resistance were similar (e.g., "it doesn't work", "that's not what corrections is about"). However, the anxieties were different. In Kansas, for example, staff were more concerned about layoffs; in Michigan, staff were more concerned about privatization of corrections. Also, these staff issues impacted overall reform differently in each state: changes in job descriptions and hiring were easier to accomplish in Kansas because of fewer provisions for organized labor; in Michigan, unions played a greater role in reforms and MDOC had lower staff turnover. As a result, changes were more difficult if resisters were entrenched in the organization.

- *Relative resiliency to current crisis in state budgets:* The current economic recession has impacted corrections organizations throughout the country (Scott-Hayward, 2009). Both Kansas and Michigan have been particularly hard-hit by greater than expected declines in tax revenues. Reentry initiatives in these two states have been somewhat impacted by this economic climate. However, the impacts are more significant in Kansas, including for example, the loss of programming for some of the core elements of KOR3P, and the postponement of the final statewide implementation of LRI-R. In Michigan, despite the heightened sense of economic uncertainty and fiscal crisis, MDOC managers have been effective at preserving the integrity of the program and further enhance its statewide implementation. These two contrasting trajectories of reentry policy may be explained by differences in public education campaigns, and differences in levels of stakeholder sense of ownership and commitment vis-à-vis these reforms.

IV.   Emerging challenges and constraints

The reforms inspired by KOR3P and MPRI redefined the scope of correctional practices by more closely aligning key functions and components of the DOCs—facilities and field services, central office and regional offices, inmate classification and programming. This process was also shaped by new tools and protocols such as the introduction of the LSI-R in Kansas or the COMPAS in Michigan, as well as new discourses reflecting the increased agency focus on reentry-related processes and interventions, such as the structure of pre-release programming, the specification of supervision and reintegration plans, and the quality of inter-agency coordination. The organizational changes triggered by these reforms minimized a number of institutional problems within the DOC including, for example, the pervasiveness of communication gaps among line staff and between staff and providers, and the relative absence of research-based guidelines for offender classification and management. At the same time, however, the new institutional environment created by KOR3P and MPRI gave rise to a host of new challenges, some directly linked to the process of design and implementation of these reforms and others linked to the resulting new functions and objectives of the DOCs. In this section we summarize the emerging challenges associated with the implementation of KOR3P and MPRI.

1. *Narrow scope and small scale*

The core of the reforms in Kansas and Michigan focused on strengthening the management of high-risk offenders. Moderate and low-risk offenders benefited indirectly from the reforms through more targeted interventions and enhanced inter-agency coordination for services and follow-up in the community. While this tier system was largely consistent with the paradigm of Evidence-Based Practices (e.g.., Burke, 2007), other components of the reforms further restricted the range and nature of the new policies, undermining their long-term system impacts. For example, the reforms' had a narrow emphasis on the realignment of processes in mostly urban jurisdictions; all three community-based reentry programs in Kansas, for example, were located in the largest urban areas of the state with marginal institutional support in more rural jurisdictions. Over time, both the KDOC and the MDOC decreased the length, form, and intensity of various re-entry interventions (e.g., shorter lengths of stay in MPRI in-reach facilities, reduced case management by field specialists in Kansas) in order to address funding short-falls or to expand capacity to accommodate a greater pool of targeted offenders. These adaptations reflect a broader policy dilemma associated with balancing a robust model of service delivery while also "right-sizing" the offender pool to increase the scope of the impacts tied to the reforms at the system-level.

The narrow focus of the reforms may have also amplified disparities across similar functional units of the DOC, or across urban/rural regions, because only specific subsets of the larger organization were reinvigorated with new resources and more ambitious work-plans. In Michigan, but more critically in Kansas, it remained unclear whether the core of the reforms needed to be consistently implemented across DOC functional and geographical areas or whether implementation was merely a matter of scaling the model according to local resources and target populations.

2. *Low fidelity*

To increase the pace and breadth of implementation, corrections managers in both Kansas and Michigan allowed local DOC bureaucracies to translate the overall vision of corrections put forward by KOR3P and MPRI into specific practices. While this process was bounded by core tools and protocols (e.g., cognitive focus, assessment instruments) that were required across localities, mid-level managers both in local parole offices and in individual facilities effectively *customized* the rationale of the reforms, harmonizing their own concerns and resources with the broader parameters set by top managers of the DOC. As a result, the actual realignment of DOC practices linked to the reforms was highly sensitive to local contexts—that is, it varied according to differences in institutional resources, community support, levels of buy-in by DOC staff and mid-level managers. In Kansas for example, mid-level managers retained control over the array and orientation of programming resources in local facilities. In Michigan, local MPRI steering committees were tasked with the creation of community-level reentry plans.

In the long term, this strategy of implementation of the reforms prioritized large scale and fast adoption of the discourses and tools associated with MPRI and KOR3P while allowing, to a certain extent, a lack of uniformity in the content of reforms across the state. Thus, over time, the overall integrity of the new statewide reentry models in Kansas and Michigan may be threatened by the wide variation in local versions of these models and the relative inability of the DOCs to monitor their evolution, quality in service delivery, and programmatic vulnerabilities. These issues are particularly critical in the context of reforms like KOR3P and MPRI that sought to first disseminate a new vision for correctional practice rather than favoring the early adoption of new protocols and guidelines. In this context, the "translation" of the reforms by mid-level managers may over-simplify the extent of the organizational changes—e.g., "*it's just about not revoking people*"—due to lack of resources or confusion regarding key components of the reforms and underlying rationale.

3. *Low formalization*

Both in Kansas and Michigan, the reforms were systematically described by top managers as seeking, first, to focus on the communication and dissemination of a new vision, and, second, to update formal rules and procedures. As such, changes in policies were not seen as a priority by reformers until a change in vision had taken hold. This was particularly the case in Kansas where the reform process was not guided by clearly-specified stages of execution. In addition, the reforms were not fully formalized because, substantively, both the MPRI and KOR3P sought to broaden the discretion of line staff and expand their level of "*professionalism*" by pushing them to "*think outside the box.*" As a result, the reforms were intrinsically designed to be flexible and general, leaving changes in practices to line staff and mid-level managers. A number of critical changes associated with the reforms were formally translated into new protocols and policies – e.g., job descriptions, case review timelines, training requirements—but the core of the process of change involved informal changes in practices that went beyond formal directives.

In the long term, this strategy may not be effective at preserving the integrity of the new models because traditionally DOCs have implemented organizational change based on formal adjustments to policies and procedures ("*a new checklist replaces the old one*"). In this highly legalistic framework, rules and procedures are seen by staff as mechanisms of legal protection and as the ultimate training and coaching tool shaping the nature of their work. Without a more comprehensive formalization of KOR3P and MPRI, staff will continue to revert back to "*the books*" when confused about the nature of the organizational changes within the DOC or when seeking to justify their resistance to the reforms ("*I just go by what's policy*"). Further, because local mid-level managers and staff have been given room to adapt the reforms according to their own environments, there is increasing formalization of practices at the local level—a process described to us by some staff as "*doing policy by email*" – a formalization of practices that occurs outside of the central DOC and contributes to a structural lack of uniformity of reforms.

4. *Limited capacity to document change and foster innovation*

The ability of the MDOC and the KDOC to document the process and outcomes of the reforms remains limited. Both departments sought to update their case management systems with mixed success; both systems have more connectivity and new content areas, but the scope of reports and the coverage of processes are inconsistent. While the reforms sought to impact both traditional indicators of corrections performance (e.g., prison population, recidivism) as well as new outcomes (e.g., cognitive functioning, stability in housing/employment) it is unclear whether the DOCs can report reliably on these latter more broadly-defined metrics of reform. More generally, both agencies have only a partial capacity to systematically evaluate intermediate outcomes of the reforms and the process of implementation. In Michigan, for example, the design of a quality assurance model for evaluating service providers was underway as of 2009, but evaluation strategy required some additional vetting by local managers and fiscal agents in the community. In Kansas, this process has been significantly delayed because KOR3P remains in the process of implementation and KDOC is hoping to align its own process of quality assurance with a broader state-wide effort.

The ability of the DOC to learn about their own experience with change is not only an issue of quality assurance and follow-up. It also involves the stature and development of their training divisions. In Michigan, and to a lesser extent in Kansas, the reforms were dependant on technical assistance to disseminate new skills and frameworks such as collaborative case management and motivational interviewing. Over time, however, the ability to replicate this knowledge and adapt it to local conditions has not been nurtured by top managers. Rather, the DOC training divisions remain under-funded and under-staffed, compromising their ability to develop the skills of incoming personnel and to update tools and skill-sets.

5. *Staff resistance and fatigue*

The ability of top managers in the DOCs to trigger organizational change was limited by the resistance of line staff and mid-level managers to the process and substance of the reforms. While there was substantial adoption of the proposed changes across ranks and offices of the DOCs, a number of staff and mid-level managers systematically questioned the extent to which the reforms actually took place (denial), the extent to which the impacts of the reform were significant (dismissal) and/or the overall legitimacy and new direction of the DOC (defiance). The first form of resistance (denial) involved negating that the new initiatives had in fact changed the DOCs. Staff that relied on this method of resistance acknowledged a change in discourses used by central office to define correctional work, but they denied the fact that these discourses materialized into concrete changes in practices. The second form of resistance (dismissal) pertained to staff acknowledging that change had in fact occurred, but these employees dismissed the changes as being unimportant or ineffective. The final form of resistance (defiance) involved staff again acknowledging that change occurred but arguing that the changes were "*wrong*" or that KOR3P/MPRI was having a negative impact on the organization.

Both DOCs also experienced significant staff fatigue, particularly among managers and line staff directly involved with the implementation of the reforms. These individuals adhered to the new vision of corrections proposed by the top leadership of each agency and have sought to disseminate that vision. Over time, however, the support for the reforms among these change agents has begun to crumble due to a number of factors, including conflicts with resisters, negative feedback from immediate supervisors, and uncertainty regarding integrity of the model. More substantively, some staff have also become increasingly aware of the process of performance reviews—seen as inconsistent or unrealistic—and changes to the reentry model that seem to oppose the overarching rationale of the original set of reforms. For example, in Kansas some reentry staff did not agree with the combination of their responsibilities into new case manager/parole office positions. This was seen as diminishing the importance of the case manager function and confusing the role of case managers vis-à-vis parolees.

Over time, as the reforms continue to be fully implemented, staff resistance may decrease, but staff fatigue may increase. Both forces threaten the robustness of the reentry models because they undermine the rationale for the changes and question the management structure of the organization.

6. *Unstable institutional environment*

The ability of the DOCs to further implement reentry-based reforms is vulnerable to other elements that affect work conditions of staff and managers. Fiscal crises may be the most obvious external force that can impact reform. As correctional budgets continue to shrink, staff are asked to do more with less. The increased strain limits the ability of the DOC to fully implement specific components of the reforms, such as pre-release programming or case management for all cases. In Kansas, the perception that risk reduction is something done by the reentry personnel also affects the broad dissemination of this framework. In Michigan, a set of similar concerns was raised by some parole agents who believe that the increased visibility of providers may eventually lead to the privatization of community supervision.

Conclusion and Recommendations

The process of corrections reform is determined by a number of forces both internal and external to the penal bureaucracy. The experience of organizational change in Kansas and Michigan triggered by the KOR3P and the MPRI show that the recent realignment of these systems as well as the execution of more narrow reforms in other states (e.g., Jacobson 2005) grows out of the intersection of several forces ranging from budget constraints, interests of staff and managers, demands of other state agencies, and external political or media-driven crises. These factors, however, were simply the most immediate forces affecting change in Kansas and Michigan. The degree of resident support for rehabilitation, the experience of the Departments of Corrections (DOCs) and other criminal justice agencies with prior models of supervision and rehabilitation, and the relative levels of unionization of the corrections labor force also affected the timing and nature of reforms. Moreover, these two sets of forces—proximate and structural—will continue to shape reform in the states. For example, beyond the effect of new policies inspired by shifting state fortunes, changes to sentencing guidelines and the adoption of new mandatory sentencing policies may undercut any long-term impacts on the size and shape of corrections systems initiated through penal reforms like KOR3P or MPRI. In addition, staff resistance, staff fatigue, or significant changes in leadership within the DOCs may continue to reshape reforms over the long term.

As corrections departments in other states develop similar reentry-based strategies s they may take into consideration the following set of recommendations to avoid or minimize many of the same challenges.

Recommendations for Addressing External Challenges to Reform

- **Make reform a state issue not just a DOC issue.**

In Kansas, but more clearly in Michigan, the corrections reforms examined in this project were conceived and marketed as state issues. In both places, the most general targets of the KOR3P and MPRI (reduced prison populations and costs; public safety) were marketed as problems that affected state residents, other government agencies, and the community at large, including political leaders. . But, more importantly, the reformers recognized the overlap in targeted populations and tasks across agencies. Stakeholders interviewed for this project in Kansas for example noted that that there was a high fraction of active parolees who were also on the caseloads of the state's mental health agency or who received social security benefits. They also noted that corrections shared with these other agencies the goals of ensuring access to mental health treatment, reducing substance abuse, or ensuring payment of child support.

Involving other government agencies in the reform process and crafting the reforms to address the goals of these agencies makes the change process political, not just technical. Corrections should be discussed as just one element in a system of agencies that impact parolees and that ultimately determine the success of individuals in the community. This is about leadership (involving leaders outside corrections), about communicating or recognizing the shared goals across agencies (understanding how agencies interact), and about creating the appropriate infrastructure to support collaborations (changes in budget appropriations to decentralize reentry funds). The process is less taxing when state leaders (e.g. governor, legislators) push the reforms as supported by broad, top-down coalitions as they did in Michigan; but, it can also be accomplished through the efforts of leaders within corrections, as occurred in Kansas. In either instance, reformers got others involved early-on, mobilizing government partners, and made reforms a state issue, ensuring greater buy-in for reforms. This may be more difficult when, like in Kansas, reforms are perceived to emerge largely within the DOC without substantial, long-term support from the Governor's office.

- **Market reform to different constituencies in an individualized way.**

The reforms in Kansas and Michigan required sustained collaboration between the DOC and external agencies (other non-DOC government organizations, private providers), as well as continuous support of local and state stakeholders. But, this involved marketing the need and substance of the reforms to many different constituencies. To accomplish this, planners of KOR3P and MPRI framed these initiatives in ways that each constituent could understand. For example, in Kansas, reformers marketed the reforms to legislators as a cost-saving strategy and, over time, provided legislators with indicators or evidence showing a cost-savings for the DOCs (e.g. lower prison populations, lower recidivism rates). Reformers communicated reforms as a public safety issue to law enforcement and other criminal justice system actors, relying on lower re-arrest rates and low returns to prison to mobilize their support. Finally, the DOCs marketed the reforms to service providers and the community in a variety of ways, relying on the importance of shared goals across members of society, the need for second chances and opportunities for redemption, and the role of community ties in promoting public safety.

Marketing reforms involves, first, communicating reforms in the language of the targeted constituency. This process needs to balance the need to remain consistent with the substantive content of the reform with the need to develop different narratives on the rationale and justification of such measures. For law enforcement, it may be the language of public safety. For treatment providers, it may the language of addiction. For legislators, it may be the language of fiscal impact. But, marketing reforms – particularly those that may meet with resistance from external actors– also involves providing a narrative for these other constituencies who must justify their support for the reforms; this narrative must provide the rationale on which other constituencies can rely and must be delivered before an alternative, negative narrative provides the justifications for not supporting the reforms. In other words, reformers should control the framework and narrative of the reforms *and* include in the narrative multiple reasons for support that are tailored to different constituencies. This also involves "going beyond show and tell." One level of engagement with other stakeholders is simply presenting overviews of reforms or outcomes to other agencies with no real engagement. A second level, however, is the use of liaisons or boundary spanners to actively engage other agencies systematically addressing how their own concerns and priorities may be aligned with the reforms.

- **Be prepared to regulate providers.**

In addition to the support of other state-level agencies and policymakers, the reforms in Kansas and Michigan also relied heavily on service providers in the community. To implement the reforms, both DOCs reached out to service providers to develop new practices or adjust practices to fit with the new models. The success of the reforms, therefore, depended to some extent on the Departments' ability to monitor/evaluate and regulate the performance of providers. In Michigan, this was addressed through the design of a performance-based procurement system in which local fiscal agents and the MDOC evaluated and contracted with MPRI providers. In contrast, in Kansas, there was no statewide strategy to evaluate providers; rather evaluation occurred unsystematically by local KDOC agents or specific programs or protocols and involved little coordination, no clear standards of review, and little feedback to KDOC.

When reforms rely on the active involvement of services providers, corrections administrators should be prepared to regulate them. In this sense, regulation involves getting providers to alter practices in accordance with the orientation and parameters of corrections reforms. A department of corrections can regulate provider licensing, adherence to eligibility criteria for program participation, reporting of interventions and availability of programs. However, they should also be aware of the difficulty and limitations of that regulation: Corrections administrators cannot often fully evaluate the content or quality of services and must understand that most providers do not want to be evaluated, particularly by an agency that is not necessarily fully-involved with their core domain of service (e.g., DOCs monitoring mental health service provision, or substance, abuse treatment, housing assistance, etc.). Corrections administrators should make evaluation criteria known to providers from the start as criteria imposed after

full implementation of reforms may lead to resistance from providers.   Finally, corrections administrators must be cognizant of the fact that providers exhibit and amplify some of the same problems with the dissemination of organizational change seen inside corrections that make reform difficult (e.g. high turnover, low pay, resistance to new tools, lack of oversight, lack of communication).

- **Engage the community.**

    The reforms in Kansas and Michigan were often outwardly directed, with the DOCs engaging other government agencies, multiple state and local stakeholders, and multiple service providers. These efforts target different parts of the correction systems at different times but largely focused on the departments' practices and processes in the community. Yet, the two states sought to engage the community to very different degrees. In the early stages of the MPRI for example, MDOC managers and their local partners sought to organize the community at the grass-roots level; "community" in this initial version of the model meant individuals residing in high-crime, high-incarceration areas. In contrast, in Kansas, there was no similar push to include this version of community organization. Instead, the core elements of the KOR3P were focused on the strengthening of operations within the DOC. Subsequent versions of the reforms in Kansas and in Michigan were implemented with a more narrow specification of community centered on the role of providers as representatives of the larger community. This subset of actors proved to be a more manageable version of community to engage.
    Reform efforts that focus on realignment of community-based services and practices must engage the community in some way. However, reformers must determine what part of the community they really need. Further, they should anticipate that definitions of community may vary across jurisdictions. For example, community in urban areas may be different than community in rural areas; in urban areas the community may be simply providers (and since reforms are designed for urban areas this makes sense). But community in rural areas may include all residents since there are no providers; in this sense, the community may include family members, churches, or community organizations. In both cases, however, reforms may not be necessarily asking community providers to do anything differently, since providers are already relied on for housing, employment, or other services; rather, corrections reforms may be asking provider to do more and may be asking them to think about their role differently. Moreover, if reforms are a marketed as a state issue – asking providers to see themselves as an integral part of offender success and the success of DOC – engaging the community is critical to the success of reforms.

Recommendations for Addressing Internal Challenges to Reform

- **Avoid maintaining separate units of reform over the long term.**

    Kansas and Michigan approached reforms in a manner similar to the way many organizations approach reform, through the use of pilot programs, dedicated staffing, and slow roll-out of reforms. In both states, but particularly in Kansas this involved the creation of separate units to oversee the initial reforms. For example, the KDOC created separate "reentry units" in three parole offices in the state and new reentry positions in parole and facilities; staff who worked in these units or in these new positions received higher pay, etc. Michigan approached reform implementation in a similar manner, with the core of the initial steps of MPRI implementation centered on the operation of in-reach facilities and core community providers. In Kansas the creation of separate units led to a great deal of resistance and animosity within the DOC; this could have been partially avoided by not maintaining these separate units indefinitely
    Creating separate units to implement reforms can work very well – in the short term. In the short term, the creation of separate units allows reformers to control the content of reforms, to adapt quickly to constraints, to train individuals, and to get reforms up and running quickly; there is no need to wait for the organization as a whole to change. In the long term, however, the creation of separate unites creates divisions in the office, presents problems of coordinating and supervising line staff, and makes it harder

for people who are not in the separate unit to think of themselves as part of the reform; there is no buy-in from people outside the unit to change.

- **Delimit the stages of implementation.**

Kansas and Michigan articulated the stages of reforms in different ways. The MDOC clearly defined three stages of the reform process symbolized by the MPRI: design, pilot implementation, and state-wide dissemination. Each stage involved defined tasks and timeframes for completion. While these were ultimately modified in terms of form and content, they provided a base framework for reformers and stakeholders to coordinate activities and strategies In Kansas, by contrast, the different stages of the KOR3P were not clearly delineated in the same manner. New practices were introduced over a long period of time, with new routines and protocols routinely refined and no clear date by which implementation would end and the KDOC could be said to have completed the reform process. As a result, staff often felt as if the KDOC was always implementing the reform.

While refinement and revision of reforms is part of any reform process, at some point the implementation of reforms must be perceived as coming to an end. Constant tweaking of practices and lack of formalization of policies and procedures leads to staff fatigue and resistance over the long term. Moreover, it becomes very difficult to articulate clearly what the reform consists of or to market the success of reforms internally to staff or externally to other stakeholders. It is hard to avoid this in corrections due to high rates of turn-over in staff and ideas. In addition, reforms that push vision rather than practices amplify these problems. While it may be easier politically to sell a change in vision, it is hard to determine when a vision has been fully implemented or to measure its success.

- **Understand the relative importance of money.**

In Kansas, the KDOC focused many of its early reform efforts on articulating a new vision of corrections and seeking to change the culture of the department; through this change in vision, the department was able to reduce revocation rates and implement many reforms without expending additional resources. In contrast, Michigan focused early reforms efforts on engaging community providers and providing additional services to parolees in the community; in turn, the MDOC required additional resources to effectively implement reforms. The two approaches to reform demonstrate the relative importance of money.

When implementing reforms, reformers must recognize that not all reforms require additional resources or even the reallocation of resources to implement. When reforms involve new training, demonstration programs, or the creation of new programming then additional resources are likely necessary. Additional resources also allow an organization to test new ideas or approaches and give the organization the freedom to create new staff positions or to bring in people from outside the organization to implement the reforms. Money also helps when trying to persuade people in other organizations to change – money to removes money as an impediment for others to support reform. But, the absence of money is not a barrier. If an organization seeks to change the way staff do their jobs, to alter staff roles in the organization, to push new goals of the organization, additional resources, or at least a lot of additional resources, are not necessarily needed.

- **Make the DOC a learning organization.**

Kansas and Michigan took different approaches to the use of internal and external experts to train staff and monitor the reform process. In Michigan, for example, the MDOC relied exclusively on external trainers to train staff in evidence-based practices, while Kansas relied more on internal trainers. In contrast, Kansas relied heavily on external evaluators to track change in the department and to monitor success. Both states demonstrate the importance of making the DOC a learning organization.

Ensuring that the DOC is a learning organization requires attention to several domains. First, reformers should recognize the importance of date; this includes understanding data infrastructures and the reporting, timing, and flow of information. Attention to data issues is important so that reformers can define the right indicators of reform success, capture quality information at the right to measure these indicators, and report indicators to stakeholders in a timely fashion. The DOC should also be situated to learn from success; this includes identifying stories of success and mobilizing those stories as opportunities for learning across the organization. This becomes essential when data is poor or indicators do not clearly capture a particular piece of the reform effort; in these instances, particular case studies of reform (e.g. good case management or good outcome) become the indicators or data for reform. Finally, an important part of making the DOC a learning organization is creating in-house training capacity and making training dynamic. In the early stages of reform, it first makes sense to bring in outside trainers to train staff, particularly when the reforms involve specific tools or new procedures. But, over time, it becomes more important to increase in-house training capacity so that reforms become an integrated part of routine practices within the organization and ownership of the reforms increases among staff. Moreover, training should be dynamic, moving beyond simply training new employees and providing refreshers for current employees.

- **Balance fidelity and flexibility of reform.**

Kansas and Michigan, like most states, are a collection of diverse, local jurisdictions. Counties in both states vary in terms of population density, demographics, resources, and politics. They also possess different capacities for reform, acceptance of reforms, or necessity of reforms. In Kansas, reformers recognized this and allowed reforms to be adapted to local contexts; they demanded fidelity to core tools that were part of the reforms (case management, cognitive training, use of LSI-R) but allowed the core principles of the reforms (targeting, management of risk, coordination of service providers) to be adapted to local conditions (resources, availability of service providers). Michigan approached reforms in a similar manner, articulating a core set of tools or procedures required of all jurisdictions, but allowing communities to adapt the principles of reform according to local need and context.

When implementing system-wide reforms, reformers must be comfortable balancing fidelity to the core components of the model with flexibility to allow core principles to be adapted to local conditions. In this sense, reformers must understand local contexts of reform and determine which parts of the model are part of the core and must be applied in all localities and which parts are not part of the core and need not apply to all localities. This is partially based on an assessment of local conditions (e.g. number of service providers), but it is also based on an assessment of agency capacities (e.g. the readiness for or receptivity to reforms, local departmental resources available for the given reform). In a diverse state, reformers must appreciate that the reform cannot look the same everywhere and concede this at the design stage. Moreover, when communicating the reforms to different regions of the state, reformers should acknowledge that some regions or parts of the agency will not be part of the reform process. The calculation of which localities should be targeted for reforms may be based on the levels of support that may already exist in community, the number of providers that may be available, the number of potential participants for the reform, or the existence of local leadership.

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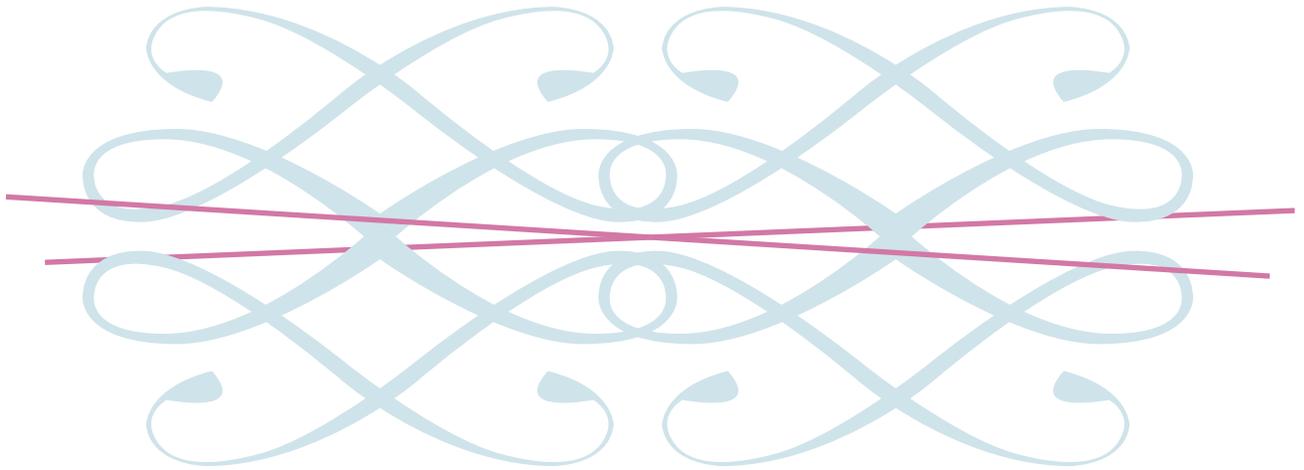

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