Pathway Home Evaluation
Facility Survey

April 2022

INTRODUCTION

Mathematica and its research partners, Social Policy Research Associates, and the Council of State Governments Justice Center, are evaluating the Pathway Home Grants program on behalf of the U.S. Department of Labor (DOL). As part of the evaluation, we are asking correctional facilities that have partnered with the Pathway Home grantees to complete a brief survey about their perspective on the implementation of the grants in their facilities.

The survey covers several topics, including the characteristics of your facility, your experiences planning for, and supporting the implementation of the Pathway Home grant, the other services offered in your facility, and a description of the people in custody (inmates, residents).

We will use the results from the survey for research purposes and, after removing your name and contact information, we will provide summary information on the findings across facilities where the Pathway Home grants were implemented. Further, we will not share your responses with your partners.

The survey should take about 20 minutes to complete. If there are questions you are unable to answer, please feel free to draw on the expertise and knowledge of others within your facility.

If you have any questions or concerns as you complete this survey, please contact Betsy Santos at Mathematica at (609) 750-2018 or BSantos@mathematica-mpr.com.

A. CONTACT INFORMATION AND CHARACTERISTICS OF FACILITY

ALL

Please complete this background information about yourself and the facility for which you work.

REO_A3.
A1.   **Your name:**

(STRING 60)

REO_A4.
A2.   **Your title:**

(STRING 60)

NEW
A3.   **Your phone:**

(STRING 60)

NEW
A4.   **Your email:**

(STRING 60)

NEW
A5.   **According to our records, the name of the correctional facility for which you work is [FACILITY NAME]. Is this correct?**

◯   Yes, this is correct ....1 GO TO A6

◯   Yes, but there's an error in the name...2

◯   No, this is not the facility name...3

IF A5 = 2 OR 3

A5a.   **Please provide the correct name of your facility.**

A6.   **[GRANTEE NAME] was awarded a Pathway Home grant to implement a re-entry program in your facility. According to our records, the name of the Pathway Home program is [PROGRAME NAME]. Is this correct?**

◯   Yes, this is correct ....1 GO TO A6

◯   Yes, but there's an error in the name...2

◯   No, this is not the program name...3

A6a. **Please provide the correct name of Pathway Home re-entry program.**

[   ]

NEW
A7. **Facility type:**

Select one only

○ Jail..1

○ Prison..2

○ Halfway house or other transitional housing.......................................3

○ Work-release center..4

○ Pre-release center..5

○ Other (SPECIFY)...99

[   ] (STRING (NUM))

NEW
A8. **Security levels within your facility:**

Select all that apply

☐ Minimum..1

☐ Medium...2

☐ Maximum...3

☐ Other (SPECIFY)...99

[   ] (STRING (NUM))

NEW
A9. **Total number of beds in your facility:**

[   ] NUMBER OF BEDS
(0-20,000)

NEW
A10. **Does your facility employ one or more reentry navigators for the facility as a whole?**

○ YES..1

○ NO...0

B. PROGRAM PLANNING AND IMPLEMENTATION

ALL

The next questions ask you to think specifically about planning for the [PROGRAM NAME] program.

REO_B1.
B1. **Did [GRANTEE NAME] provide services in your facility before being awarded the Pathway Home grant in June 2021? Include any services that [GRANTEE NAME] provided through their partners.**

- ⚪ YES...1
- ⚪ NO..0

IF B1 = 1

NEW.
B2. **Did the [PROGRAM NAME] program exist in some form within your facility before [GRANTEE NAME] was awarded the Pathway Home grant in June 2021?**

- ⚪ YES...1
- ⚪ NO..0

NO B3 – B5 this version

NEW
B6. **Next, we would like to know what types of supports staff from your facility provide to the [PROGRAM NAME] program.**

Do staff from your facility do any of the following activities related to the [PROGRAM NAME] program?

	Select one per row	
	Yes	No
a. Advertise the program	1 ⚪	0 ⚪
b. Provide the names of eligible participants	1 ⚪	0 ⚪
c. Enroll participants	1 ⚪	0 ⚪
d. Lead program-related workshops	1 ⚪	0 ⚪
e. Provide program-specific services	1 ⚪	0 ⚪
f. Provide security staff for program activities	1 ⚪	0 ⚪
g. Provide security staff to transport people in custody within the facility	1 ⚪	0 ⚪
h. Provide logistical support for virtual services	1 ⚪	0 ⚪
i. Another type of activity not yet mentioned (Please specify the type of support or activity) (STRING 60)	1 ⚪	0 ⚪

(IF ANY = 1 AT B6)

NEW.
B6a. **Did staff from the [PROGRAM NAME] program, provide the corrections staff performing these activities with any training about the program?**

❍ YES..1

❍ NO...0

(IF B6H = 1)

NEW.
B7. **Next, we would like to know about the types of data your facility provides to the [PROGRAM NAME] program.**

Select all that apply

☐ Risk-need assessment results...1

☐ Test of Adult Basic Education (TABE) testing scores..........................2

☐ Program completion information..3

☐ Certifications earned...4

☐ Lists of individuals who are sentenced...5

☐ Projected or actual release dates for people in custody.....................6

☐ History of infractions by potential participants....................................7

☐ Offense history of potential participants...8

☐ Other data (SPECIFY)...99

[   ] (STRING (NUM))

❍ *No data is provided to [PROGRAM NAME]* 0

REO_C1.
B8. **What operational or logistical issues did staff from your facility have to address to integrate the [PROGRAM NAME] into the facility?**

Select all that apply

☐ Restrictions on movement or transporting people in custody to [PROGRAM NAME] services...1

☐ Access to internet, or expanding existing access, for staff or participants...........2

☐ Improving internet connectivity at the facility......................................3

☐ [IF A7 = JAIL OR PRISON] Security access for [PROGRAM NAME] program staff and other partners..4

☐ Changes in duties or protocols for staff..5

☐ Special accommodations for [GRANTEE NAME] staff........................6

☐ Security training for [GRANTEE NAME] staff......................................7

☐ Other operational or logistical issues (SPECIFY)..............................99

[   ] (STRING 120)

NEW
B9. **How has the [PROGRAM NAME] program influenced the services offered at your facility?**

Select all that apply

❍   [PROGRAM NAME] offers new services in the facility...1

❍   [PROGRAM NAME] expands the availability of existing services........................2

❍   [PROGRAM NAME] has not changed the availability or range of services..........3

[INCLUDE HARD CHECK IF RESPONDENT SELECTS OPTION 3 AND ANY OTHER OPTION]

C. SERVICES OFFERED AT FACILITY

ALL

Next, we would like to ask you some questions about the types of services offered to people in custody through programs **OTHER THAN [PROGRAM NAME].** We are collecting information about the [PROGRAM NAME] program from [GRANTEE NAME]; for this question do not include the Pathway Home funded services.

NEW
C1. **Please indicate whether any of the following services are currently offered in your facility through a program OTHER THAN [PROGRAM NAME]:**

Select one per row

	YES	NO
a. Employment services (career planning, job search, resume prep, employability skills)	1 ○	0 ○
b. Occupational/vocational skills training	1 ○	0 ○
c. General equivalency degree (GED, HiSET. TASC)	1 ○	0 ○
d. Career and Technical Education (CTE) that leads to an industry recognized credential	1 ○	0 ○
e. Adult basic education (ABE) or literacy classes	1 ○	0 ○
f. English as a second language (ESL)	1 ○	0 ○
g. Postsecondary education	1 ○	0 ○
h. Case management	1 ○	0 ○
i. Individual counseling	1 ○	0 ○
j. Cognitive behavioral interventions [HOVER DEFINITION: An evidence-based treatment which helps individuals understand the thoughts and feelings which influence behaviors]	1 ○	0 ○
k. Work release	1 ○	0 ○
l. Planning for benefits assistance (SNAP, Medicaid, etc.)	1 ○	0 ○
m. Legal services	1 ○	0 ○
n. Mental health treatment	1 ○	0 ○
o. Health and wellness	1 ○	0 ○
p. COVID awareness and services (vaccination, testing, prevention)	1 ○	0 ○
q. Financial literacy	1 ○	0 ○
r. Institutional work details (e.g., kitchen detail, laundry, barbering, etc.)	1 ○	0 ○
s. Anger management	1 ○	0 ○
t. Family reunification	1 ○	0 ○
u. Peer mentoring	1 ○	0 ○
v. Woman-focused/gender responsive services	1 ○	0 ○
w. Substance use disorder treatment	1 ○	0 ○
x. Medication-Assisted Treatment (MAT)	1 ○	0 ○
y. Child support order modification support	1 ○	0 ○
z. Reentry/discharge planning	1 ○	0 ○
aa. Planning for post-release housing	1 ○	0 ○

YES	NO
₁ ◯	₀ ◯

ab. Are any other services offered? (Please specify)

(STRING (NUM))

NEW

C2. **How do people in custody express interest in programs offered in your facility?**

Select all that apply

- ☐ Fill out a slip...1
- ☐ Email...2
- ☐ Speak to a corrections officer..3
- ☐ Speak to correctional case management staff...4
- ☐ Walk-in or directly approach program staff...5
- ☐ Attend orientation or information session...6
- ☐ Some other way (SPECIFY)..99

	(STRING 60)

NEW.

C3. **The next questions are about access to the internet and technology in your facility.**

C3.1. Thinking first about [PROGRAM NAME] program staff…

Select one per row

	Yes	No
a. Do program staff who provide services in your facility have internet access, even if that access is limited?	₁ ◯	₀ ◯
b. [IF C3f= YES] Can [GRANTEE NAME] staff access a web-based case management system?	₁ ◯	₀ ◯
c. Do staff ever have trouble with internet speed (such as difficulty uploading or downloading content)?	₁ ◯	₀ ◯

C3.2. Next, thinking about people in custody, do they ever use the following technology in the facility…

Select one per row

	Yes	No
a. Tablet	₁ ◯	₀ ◯
b. Computer	₁ ◯	₀ ◯
c. Smartphone	₁ ◯	₀ ◯
d. Some other technology? (SPECIFY)	₁ ◯	₀ ◯

C3.3 Still thinking about people in custody, do they ever …

	Yes	No
a. Have access to the internet, even if that access is limited?	1 ○	0 ○
b. [IF C3.3a= YES] Can people in custody view instructional videos?	1 ○	0 ○
c. [IF C3.3a= YES] Can people in custody view interactive media online?	1 ○	0 ○
e [IF C3.3a= YES] Can people in custody access employer websites?	1 ○	0 ○
f. [IF C3.3a= YES] Do people in custody have access to email (even if they have to pay for that access)?	1 ○	0 ○
g. [IF C3.3a= YES and C3h =YES] Do people in custody have to pay for email?	1 ○	0 ○
h. Do people in custody ever have trouble with internet speed (such as difficulty uploading or downloading content)?	1 ○	0 ○

NEW.

C4. **The next questions are about how staff from your facility prepare people in custody for discharge to the community. Which of the following strategies do corrections staff use when preparing people in custody for discharge to the community?**

	Never	Sometimes	Always
a. Share expected date of release with people in custody	1 ☐	2 ☐	3 ☐
b. Share expected date of release with case managers	1 ☐	2 ☐	3 ☐
c. Provide transportation voucher or pass	1 ☐	2 ☐	3 ☐
d. Provide people in custody with recently updated information on services available in the community	1 ☐	2 ☐	3 ☐
e. Provide [PROGRAM NAME] case manager with information of services available in the community	1 ☐	2 ☐	3 ☐
f. Meet with people in custody, either one-on-one or in group sessions, to discuss expectations and process for discharge	1 ☐	2 ☐	3 ☐
g. Provide people in custody with information about COVID (proof of vaccination if applicable, information about testing and prevention)	1 ☐	2 ☐	3 ☐
h. Provide housing information or assign an individual to a halfway house	1 ☐	2 ☐	3 ☐
i. Provide contact information for reentry programs and staff in the community	1	2 ☐	3

	1	2	3
	☐		☐
j. Provide people in custody with documentation of certifications credentials, or training completed while in the facility	☐	☐	☐
k. Other (SPECIFY)	☐	☐	☐
(STRING 180)	☐		☐

D. CHARACTERISTICS OF PEOPLE IN CUSTODY

NEW.
D2. We are interested in the demographics of the people in custody within your facility during 2021. Please provide your <u>best estimate</u> for the following questions.

Please enter….

D2a. The total number of people in custody within your facility during 2021 (best estimate is fine):

| | INDIVIDUALS |
(0-250,000)

D2d.   The percent of people in custody during 2021 who identified as (best estimate is fine):

% Male [   ]   (0-100)

% Female [   ]   (0-100)

Other [   ]   (0-100)

[DISPLAY TOTAL: [SUM OF CATEGORIES]. INCLUDE SOFT CHECK IF NUMBER DOES NOT EQUAL 100]

D2e.   <u>The number of people in custody during 2021 who were less than 25 years old:</u>

| | INDIVIDUALS |
(0-250,000)

D2f.   The average length of stay for people in custody in the facility during 2021:

| | SELECT DAYS OR MONTHS |
(1-360; 1-120)

D2g.   The <u>average daily</u> number of people in custody during 2021:

| | INDIVIDUALS |

(0-100,000) [INCLUDE SOFT CHECK IF NUMBER EXCEEDS A7 BY MORE THAN 50]

(IF A7 = 1 (JAIL), THEN ASK A10H)

D2h.

The average percentage of people in custody who are sentenced (best estimate is fine):

PERCENT OF INDIVIDUALS

(0-100)

NEW.
D3.   Lastly, is there anything else that you think we should know that we didn't ask you about?

| |
| (STRING 180) |

This concludes the survey. Thank you very much for participating.