TESTIMONY THOM ROGOSKY, DIRECTOR BUREAU OF COMMUNITY CORRECTIONS SUB-COMMITTEE ON CRIME AND CORRECTIONS DRUG AND ALCOHOL SERVICES SCI – CHESTER APRIL 5, 2000

Good morning Chairman Birmelin, members of the Committee and staff. My name is Thom Rogosky. I am the Director of the Department of Corrections Bureau of Community Corrections.

The Bureau of Community Corrections is charged with the task of providing transitional services to men and women who have been released from a state correctional institution, with the goal of preparing them for community reintegration.

The program, authorized by Act 173 of 1968, began in 1969. We started with a small number of inmates. By

1995, we had 1,066 inmates in the program. Today, we have nearly 2,300.

The Department of Corrections operates 14 community corrections centers, and private vendors operate 43 facilities throughout the Commonwealth. Six of the Department's Community Corrections Centers provide services solely to women. Thirteen provide services to both men and women in separate areas of their facilities.

Prescriptive Program Plans are developed for each inmate who enters the program. Counselors meet with the inmates at least twice a week during their stay in the centers. Progress towards meeting the goals of the plan are reviewed monthly with inmates and center staff. Inmates in the centers must provide their whereabouts to facility staff at all times, and regular, unannounced verifications are conducted by the staff. All inmates who are physically able

to do so are expected to work and to have responsibilities within the facility. They do so under the guidance and direction of center staff. An inmate's participation in community corrections is a privilege. An inmate's failure to abide by the rules and regulations, to participate in programs, or to be accountable for his or her time, can result in his or her immediate return to a state correctional institution.

Now, I would like to talk a little bit about some of our special community corrections programs.

As you may know, the Quehanna Boot Camp is targeted for non-violent offenders with substance abuse problems. The Department realized that no matter how much treatment is provided in the Boot Camp, if the inmate returns to the same environment with little or no follow-up treatment, he or she is more likely to violate parole or

commit another crime. In light of the importance of aftercare, we started such a program for boot camp graduates returning to the Philadelphia, Harrisburg, Pittsburgh and Erie areas. The graduates will be placed in a structured six-month residency program followed by an additional six months of outpatient treatment services.

Last year, we opened a center in Philadelphia for mentally ill inmates. It is operated by Gaudenzia. Mike Harle of Gaudenzia will speak to you a little later about the program. It is the first of its kind in the nation. In addition to the residential services, the program provides key community linkages to help ensure a smooth transition of the special needs of these inmates.

We have half—way back residential beds for parolees who are encountering difficulties on the street and a special vocational and on-the-job training program for parolees run

by Crispus Attucks in York. They are mostly young and gain their work experience by rehabilitating buildings.

There are two other community corrections programs of note for parolees. One is the Substance Abuse Violators Effort (SAVE) program to which Deputy Love alluded. It is run by Eagleville Hospital and is designed to provide substance abuse services to parolees in the Philadelphia area. Charlie Folkes from Eagleville will be talking to you more about this program.

The Residential Substance Abuse Treatment Program (RSAT) is for general population inmates and technical parole violators with substance abuse problems. It is conducted in six state correctional institutions and community corrections centers throughout the state.

Private vendors – Gaudenzia, Gateway Rehabilitation,

Civigencs and Eagleville Hospital are here today – partner

with the Department to use the Therapeutic Communities

Treatment Model as the basis for intensive drug and
alcohol treatment.

In addition to drug and alcohol treatment, we monitor community corrections inmates for drug use. Just as Secretary Horn has made zero tolerance for drugs the policy of our state correctional institutions, so too inmates in community corrections must be drug free. In the last fiscal year, 33,991 urinalysis tests were conducted at community corrections facilities. The positive test rate was less than two tenths of one per cent (.2%). Mandatory urinalysis tests are done weekly. A positive urinalysis for unprescribed medications or illegal drugs can result in immediate return to prison.

Community corrections inmates contributed to the cost of their program by reimbursing the Department of

Corrections \$1,491,838 in rent in the last fiscal year.

Payment of rent is a requirement of their participation in the program.

They earned \$12,228,248 and paid \$2,723,965 in taxes. Under the provisions of Act 84 of 1998, they paid over half a million dollars in restitution, court costs and fines.

I hope that I've given you a brief picture of the operation of community corrections, and more importantly, the strong initiatives we've taken to address substance abuse issues for inmates who are transitioning to the community.

If you have any questions, I would be happy to answer them. Thank you.