TASC AND OFFENDER MANAGEMENT SYSTEMS: 2004 AGENCY SURVEY REPORT
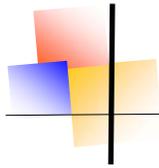
TASC AND OFFENDER MANAGEMENT SYSTEMS: 2004 AGENCY SURVEY REPORT

By: Mary Shilton and Robert Aukerman, with Kiriaki Avramidis

Contents

Table of Figures

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Scott Sylak   Mary Shilton
President   Director
National TASC   National TASC
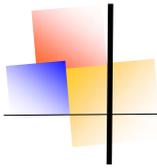
Preface

This report provides a new look at programs that began in 1972 as "Treatment Alternatives to Street Crime," also known as "TASC" programs. More recently TASC has also changed to mean "Treatment Accountability for Safer Communities." TASC agencies are designed to provide a set of alternatives to incarceration. TASC programs offer placement of clients in substance abuse treatment or other criminal justice sanctions and services for drug-involved offenders. The TASC method of reducing street crime is aimed at therapeutically changing the subject's behavior rather than isolating him and ignoring his addictions. TASC has been joined by a number of other organizations in recent years in this effort. This survey explores how TASC agencies incorporate community support and outreach in meeting criminal justice and treatment goals. The TASC survey is accompanied by a separate community corrections survey report.

This updated survey report is prepared for criminal justice leaders, policy makers, behavioral healthcare providers and the public—to consider what we know about TASC programs, their core elements and other offender management systems in 2004. As the nation's numbers of drug-involved offenders in need of treatment continues to climb, increasing caseloads have caused agencies to change their operations and seek new resources for funding services. These changes have impacted all aspects of the justice system related to access to treatment, but this report focuses on screening, assessment and case management for substance-involved offenders, which is the traditional work of TASC programs. The data that has been collected concerning the organization of TASC programs, their relationship with offender management programs, and their operations shows some interesting trends that we will begin to explore in this report. The information will be useful to TASC agencies, criminal justice professionals and the treatment community in assessing challenges and strengths of their offender services.

Part 1: The Context of this Study

It has been nine years since National TASC conducted its last membership survey[1] and thirteen years since the Bureau of Justice Assistance issued its second report on TASC Programs.[2] In an introduction to a BJA Program Brief, Acting Director Elliott A. Brown provided the following comments while noting that there was renewed interest in TASC and its abilities to solve problems.

> "TASC provides an objective and effective bridge between two separate institutions: the criminal justice system and the treatment community. The criminal justice system's legal sanctions reflect community concerns for public safety and punishment while the treatment community emphasizes individual behavior change through therapeutic relationships. Under TASC supervision, community-based treatment is made available to drug-dependent offenders who would otherwise burden the criminal justice system with their acknowledged and persistent criminality."[3]

Renewed interest in TASC

TASC has been the subject of renewed interest in the states and in the United Kingdom recently[4]. Recent attention was sparked by demands placed on both justice and treatment systems to reach more clients in need of drug and alcohol services. Scarce resources and increasing caseloads have stirred interest in diversion, reentry and extended case-management for drug-involved offenders in the context of TASC services. Many of such programs are called "TASC" and a growing number of TASC–like entities are now located within governmental agencies. The study examined the system's elements—where they are located and their work with justice and human services. We also looked for information about how the programs are organized and indicators of change in these programs. The survey gathered responses to a number of operational policies and elements. New trends document the wide variety of community outreach and support for these programs. They serve cases from many doors and few programs receive direct federal support for their work. Increasingly states and localities have taken on the role of administering TASC programs. Therefore, keeping in mind the core elements of these programs[5], we examine survey responses from the TASC and community corrections field in this first of two documents.

Federal recognition and funding history

By the end of the 1970s it was estimated that there were more than 40 TASC programs. [6]By 1982 the number had grown to as many as 130 TASC programs in 39 states. [7]TASC programs have continued to expand in some places, but not in others since that time. This survey outlines the dimensions of these trends.

In 1986, the Bureau of Justice Statistics prepared a resource catalog for TASC professionals.[8] The TASC projects that received federal funding under the Justice Assistance Act of 1984 and the Anti-Drug Abuse Act of 1986 were hailed as an emerging and cooperative discipline to improve justice system services for substance abusers. For example in 1991, the National Institutes on Drug Abuse reviewed the history and evaluations of TASC programs and noted that:

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[1]National TASC Membership Survey, Initial Analysis, August 1996.
[2]Bureau of Justice Assistance, *Treatment Alternatives to Street Crime: TASC Programs*, *2nd Edition, Program Brief,* NCJ 129759
[3] Ibid.
[4]http://www.crimereduction.gov.uk/drugsalcohol37.htm
[5]Peyton, Elizabeth, TASC in the 21st Century: A Guide for Practitioners and Policymakers, National TASC Alexandria, VA.
[6]Inciardi, James and McBride, Duane, *Treatment Alternatives to Street Crime: History, Experiences and Issues,* National Institute on Drug Abuse, DHHS at 23.
[7]Inciardi, and McBride, op. cit at 25.

It is important that TASC be expanded because of the role it can play in reducing the growing rates of violent, drug related street crime, alleviating court backlogs, and easing crowded prison conditions. On this latter point TASC can be especially crucial as an adjunct to parole and work release.[9]

In 1988 TASC programs became eligible for Bureau of Justice Assistance program funding[10] but since then, there has been little federal funding available for TASC programs.[11] With the exception of two states, TASC programs do not have dedicated funding sources. TASC programs may be in existence in a jurisdiction or state, but they may be difficult for potential clients to find because they do not all use the same names. This problem may also occur when programs are moved from one agency to another or contracted out—the names may change again. Also, in the past decade National TASC member programs reported closing due to lack of funding. In other places new TASC programs are starting up under the sponsorship of probation, or mental health programs. Despite the new trends, TASC programs universally identify adequate funding as their biggest challenge. Funding related issues were the most common responses to an open ended question about barriers to TASC agencies programs.

TASC, Drug Courts, and Breaking the Cycle

During the 1990s, several important trends emerged in localities concerning TASC and other justice system programs. TASC was involved in a National Institute of Justice initiative called "Breaking the Cycle."[12] The advent of drug courts and other specialty courts provided a judicially focused effort to attend to drug involved criminals. TASC programs participated in that development and often work closely with drug courts in their states. National TASC participated in a survey involving treatment and drug courts in 1999.[13] That survey broke new ground by documenting the relationship between treatment, justice systems and drug courts.

Community Corrections, Probation and Parole

Over the past several decades, probation and community corrections halfway houses developed day reporting and outpatient services for substance abusing offenders. Screening and assessment protocols have been used by a wide variety of correctional service providers. It is not widely known whether correctional programs and TASC programs provide similar services and in what way they are different. Considering such changes, this survey explores the work that is done by TASC programs.

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[8]Bureau of Justice Assistance, Treatment Alternatives to Street Crime (TASC): Resource Catalog. Washington DC: United States Department of Justice, 1989.

[9]Inciardi and McBride, op. cit at 25.

[10]Ibid.

[11]The Federal funding streams have been increasingly more limited in discretionary funding due to earmarks for other criminal justice funding priorities. Where TASC programs have been Federally funded in the past ten years, most have received funding from other generic categories of Federal funding such as the Byrne Memorial grants

[12]See National Institute of Justice, Breaking the Cycle Review, Issue 2, October 1999 accessed, June 2005 at url-htttp://www.ncjrs.org/pdffiles l/nij.btcissue2.pdf.

[13]Peyton, E & Gossweiler, R, Treatment Services in Adult Drug Courts: Report on the 1999 National Drug Court Treatment Survey, Executive Summary. URL-http://www.ncjrs.org/pdffiles1bja/188086.pdf.

Today, community corrections facilities operate side by side with TASC programs in many places. The extent to which they have formal relationships, shared goals and pooled resources has not been studied in depth. To begin to get a better understanding of their roles and their differences, this survey asked TASC agency respondents to indicate the extent to which their caseload comes from drug courts and community corrections. Additionally, we surveyed a number of community corrections programs and received 12 responses from these agencies. In states such as Colorado, TASC programs provide a reentry function when working with paroled and released offenders. In North Carolina, TASC works in the community corrections context to help with reentry. In some states where parole has been abolished or replaced with community corrections, TASC offers a bridge to services in the community. Professionals who provide these services such as mental health and substance abuse professionals may refer to their subjects as "clients" rather than "offenders". Where the term "client" appears in this report, it refers to the social service perspective that is part of many TASC reentry programs. The responses documented some differences and similarities.

This study's responses may indicate trends for TASC and other offender management systems. The following questions are covered by the responses and invite further research and analysis.

1. How do TASC programs focus on offender case management?
2. TASC agencies typically handle nonviolent or reentry cases. How does this function enhance parole, probation and community corrections services?
3. What are the histories and characteristics of the ATASC programs that responded to the survey?
4. Are adult and juvenile populations served by TASC agencies similar to those served by probation, parole and community corrections?
5. What are the typical budgets of TASC programs and what types of services are covered by TASC budgets?
6. How are TASC agencies organized within their communities? Are their trends or differences in organizational placement with governments and systems?
7. From which types of agencies do TASC programs receive their caseloads and don't most of these cases come from the adult and juvenile justice systems?
8. What types of evidence-based treatment is available to TASC programs and is this similar to community corrections, probation and parole trends?
9. What types of services and TASC operations indicate community involvement, support and oversight of TASC programs.
10. What TASC procedures and practices are intended to coordinate offender management, health and other service systems?
11. What are the operational elements identified by TASC programs?
12. What challenges, needs and future priorities were recommended by TASC agencies?

Methodology

This project was designed to gather information from TASC programs and TASC-like community corrections offender management programs. Therefore it was based on the methodology of an earlier project funded by BJA known as the Baseline Management and Assessment Data Project. The present survey was the first coordinated effort since the Baseline Management and Assessment Data Project in the 1980's to review TASC management and program operations across the nation. Although there were differences in the detail of the responses, and in reporting generally, this information underscores the need for a more uniform and comprehensive system for reporting such information nationally.
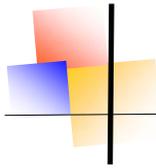
Part 2 Systems' Elements

Two survey instruments were developed based on the results of the early project funded by the Bureau of Justice Assistance. One survey instrument based on a 1996 survey of TASC members was used for TASC programs, and a similar survey instrument was designed for community corrections programs. Both survey instruments were designed with input from the TASC and community corrections fields. They were reviewed by researchers and by individuals at selected sites to ensure feasibility of collection of information. The survey instrument was modified based on this process and was mailed in March 2004 to 100 TASC programs and 75 community corrections programs utilizing a mailing list provided from the Office of National Drug Control Policy, the Center for Community Corrections and National TASC mailing lists.

National TASC mailed the surveys in March 2004 and also posted them on the National TASC website. Follow-up phone calls, correspondence and newsletter postings encouraged agencies to respond to the survey.

The responses represent a range of programs and activities throughout the justice system concerning substance abusing offenders. The results of this study, although small in number, were very encouraging because agencies voluntarily provided detailed information. Responding agencies reported the processing of a total of more than 750,000 cases in 2003. Overall, the respondents to both surveys in their comments revealed an active engagement and understanding of both community corrections and TASC program goals and operations.

TASC's 2005 report is based on information provided by thirty-nine TASC agencies and related agencies that perform TASC-like functions. There are four state-wide systems with a high volume of cases represented in the responses. Most other responses are local nonprofit or governmental entities. Following up on the previous surveys of the TASC field, the responses provide insights into trends in program services, staffing, challenges and developments, although caution should be used in generalizing about this trend data.[14]

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[14]Both TASC and community corrections respondents spent considerable time completing this survey There were 39 TASC responses to 100 surveys that were mailed to TASC agencies (a 39% response rate a first glance). However, these 39 responses included three collective statewide responses that represented approximately 65 covered TASC agencies within the 39 responses." The aggregation of responses, was an unintended consequence of statewide TASC program management in a few states and affects the characterization of a percentage response rate.

With respect to the community corrections survey there were 75 community corrections surveys mailed and 12 community corrections responses (a 16%) response rate; two responses were from state agencies and several responses were from urban areas. This variation in responses points out the differences between statewide and localized approaches to TASC and community corrections throughout the United States.

A Focus on Offender Case Management

This section presents indicators of TASC core elements that pertain to various systems and multiple jurisdictions. They fall in three clusters: justice support, community support and social services support. As TASC evolved over more than three decades, it emphasized client and system accountability and community safety with the change in its name from "Treatment Alternatives to Street Crime" to "Treatment Accountability for Safer Communities." The name has changed but many components remain the same. TASC programs are an alternative to the costly revolving door of incarceration and crime. However, such programs also focus on managing the substance-involved offender in the community safely.

TASC itself was not in the business of treatment when it began over thirty years ago. However, it was, and still is in the business of assessing the offender's need for treatment. This is done by interviewing the offender, reviewing his history of criminality, addiction, and treatment and then referring him or her to the most appropriate treatment available. Assessing the need for other services in addition to assessing the need for treatment is an integral part of the TASC Case Management Model.[15] This is a universal practice in TASC agencies or in conjunction with partner agencies such as probation (See Figure 10 for a list of TASC services related to assessment, referral and treatment).

A case management plan is developed with each client's participation, which includes assessing other needed services, meeting criminal justice system requirements, and successfully completing treatment and TASC. An important component is monitoring participation in the treatment regimen through close and frequent communication with treatment programs. This facilitates brief interventions with clients as needed. As appropriate, TASC retains clients in treatment for longer periods of time, and monitors required abstinence from alcohol and other drugs through urinalysis and other physical testing. These activities remain at the core of TASC elements (See TASC Critical Elements, Appendix B).

Respondents' Jurisdictions

Geographical Diversity

There were 39 TASC survey responses representing more than 70 TASC operations in the field. Surveyed jurisdictions include: Alabama, Arizona, Connecticut, Delaware, Florida, Hawaii, Idaho, Illinois, North Carolina, Ohio, Texas, Virginia, and Washington. This response represents about half of the states where there a known TASC programs. Three states responded in a single survey response representing statewide programs over multiple sites. These states were Arizona, Illinois and North Carolina. Arizona's response represented 8 agencies; Illinois response represented 21 agencies; and North Carolina represented a statewide network, divided into 4 regions that involve hundreds of city, county and non-profit entities.

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[15]Peyton, Elizabeth A., TASC in the 21st Century, National Consortium of TASC Programs, Inc.

Community corrections entities that responded were from 6 states. Three of these states also had TASC programs. Figure 1 below indicates in the states that had a community corrections response, a TASC response and both types of entities responding.

Figure 1-Responding Jurisdictions

- TASC
- Community Correction
- TASC and Comm Corr.

6-20-05

TASC Respondents' Background

Program Longevity Indicators

The 2004 Treatment Accountability survey indicates the variety and complexity of TASC programs. Thirty-nine programs that responded include many of the largest and longest operating programs. Three programs were established as part of earlier agencies prior to 1969. Figure 2 provides a timeline with respect to the establishment of surveyed TASC programs.

Figure 2-TASC Agency Start-up
Number of Cases Across Adult and Juvenile Systems

In what year was your agency founded?

Number of agen-
cies responding

3	6	4	1	2	4	9	2

Pre-1969	1970-74	1975-79	1980-84	1985-89	1990-94	1995-99	2000-02
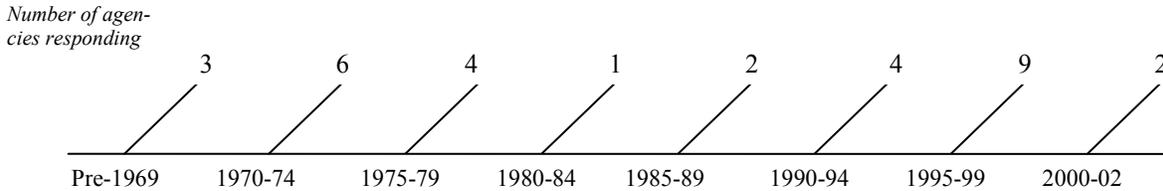
Most of the cases served by TASC programs in 2003 were adults. In the programs responding there were a total number of 218,655 cases. Of these, the total numbers of cases served in the previous year by the responding agencies are listed in Figure 3 below.

Figure 3-Cases Served in 2003
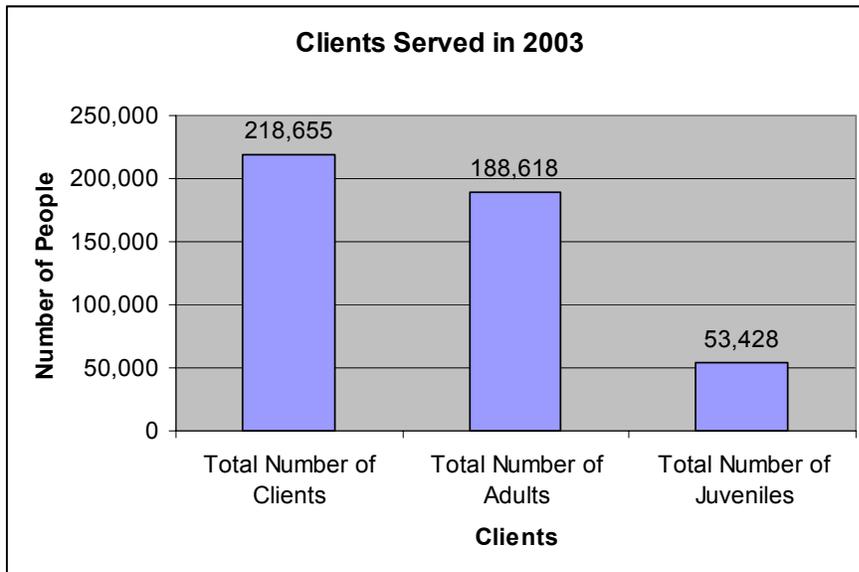
Sixty percent (21) of the respondents had fewer than 2500 adult cases in 2003. Another 20% (7) had less than 10,000 cases. Two respondents (6%) had more than 20,000 cases. The range in cases served was from zero to 56,000.

With respect to juveniles, thirteen respondents (39%) had less than 1000 juvenile cases. Twelve (36%) did not serve juveniles. Nine percent had between 1000 and 2000. Three (9%) reported in excess of 7000 juveniles served in 2003. One (3%) was in the 2000-7000 case range.
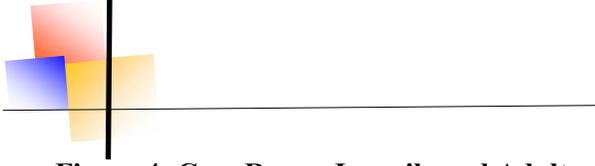
Figure 4- Case Range Juvenile and Adult

Number of Adult Cases		Number of Juvenile Cases	
Cases	Agencies	Cases	Agencies
0	1	0	13
1-2,500	21	1-1,000	13
2,501-9,999	7	1,001-2,000	3
10,000-20,000	4	2,001-7,000	1
20,001-56,000	2	Above 7,000	3

Respondent's Budgets

Stretched Budgets, More Services

Although some areas of the survey indicate substantial changes from previous responses, the levels of program funding (large and small) have remained proportionately very similar. This suggests little increase in resources for TASC over the last eight years. In 2004 there were 14 responding agencies with budgets over $2,000,000. Fifteen agencies indicated budgets between $500,000 and $2,000,000. A total of 8 respondents were in agencies with budgets less than $499,000. This suggests that small nongovernmental TASC programs have diminished due to lack of funding. Individual responses indicate that where they are operational, they are supported by state and local funding. Figures 10, 17 and 18 demonstrate that TASC programs are now linked to many more programs than were previously known.

Figure-5

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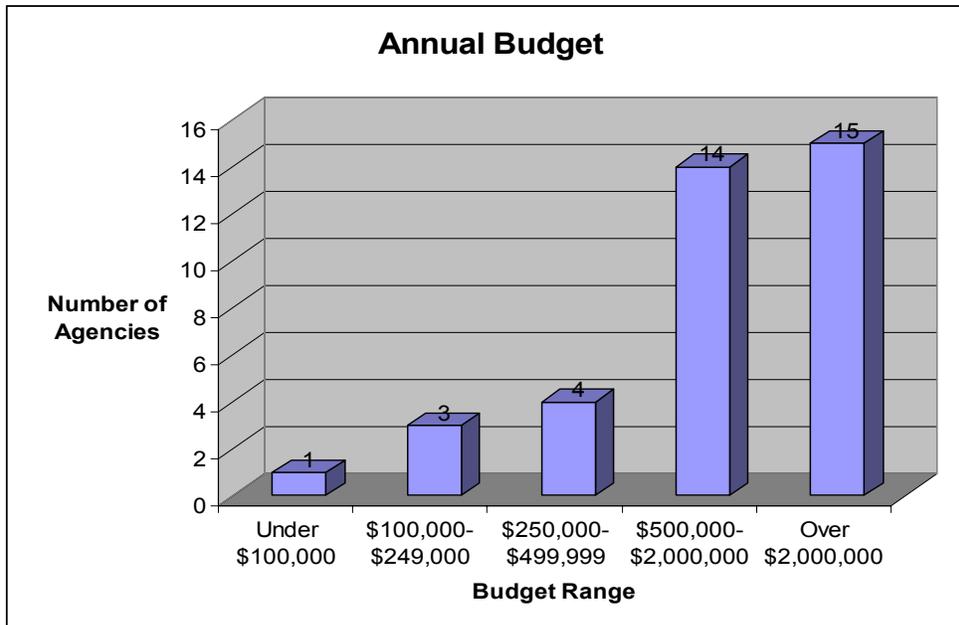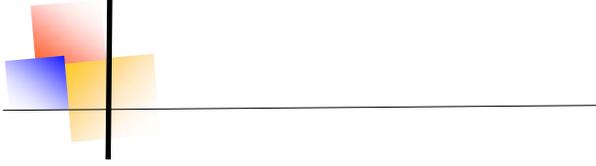
Broad Justice System Support

Responses indicate close communication with the criminal justice system so that sanctions are imposed when necessary. Counterproductive sanctions are avoided through case management protocols. Such activities are designed to protect communities and to give offenders an opportunity to succeed.[16] This justice system support is evidenced by the wide variety of justice clients (Figure 7).

The TASC mission, then, has been to provide an alternative to the revolving door of crime, incarceration, release, and more crime for drug involved offenders. It accomplished this through complying with criminal justice system requirements, and dealing with problems in the treatment process.

Broad Social Services and Community- based Support

TASC works with treatment programs to retain clients in programs and to monitor continued client abstinence. These activities both protect the community and give clients every opportunity to succeed while under supervision and while in recovery. Figure 7 reveals community involvement through a number of referrals from schools and from outside of the justice system. Most respondents were involved in a range of community programs such as child welfare, schools and community networks (See Figure 9 which details types of support).

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[16]Ibid.
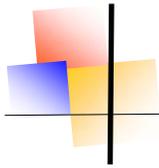
Part 3: Organizational Elements

The TASC Administrative Unit

Responsibility for Integrity as a Neutral Agency

TASC programs address the need for a neutral administrative agency to provide objectivity in delivering treatment services to criminal justice populations. An agency can be "neutral" or "objective" if it has sufficient autonomy to provide its services with integrity. Because of the need for objectivity in the administration of screening, assessment and referral, TASC operates as a nonprofit entity in many places. However, the financial requirements for funding have caused many TASC programs to operate as part of the criminal justice or social services system within a government agency.

Governmental Affiliations

Respondents were asked which option best characterized their type of agency. A majority of TASC agencies (57% of respondents) are situated within county, city, state and regional combinations. Fifteen responding agencies were private nonprofits and one TASC respondent was affiliated with a for profit service provider. The "other" was a responding statewide entity composed of county, nonprofit, regional and state agencies. Figure 6 provides a summary of TASC programs by type of agency affiliation.

Figure 6-Organizational Placement of TASC Agencies
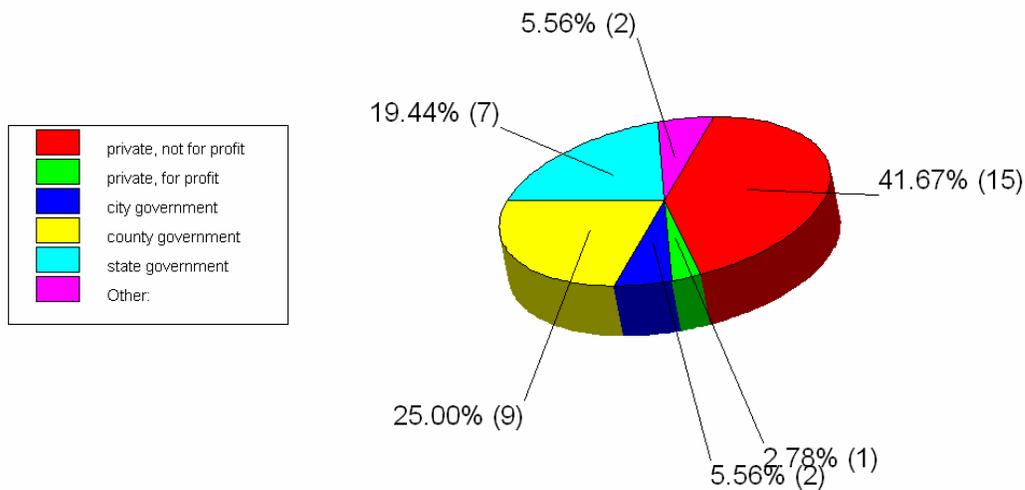
Justice Support and Communication Indicators

A broad base of support from the justice system is a critical element of TASC programs. Support and communication requires a process to coordinate justice services and a formal system. TASC interprets justice and treatment system expectations and requirements. TASC monitors clients to maintain client accountability in both systems. TASC advocates for needed treatment, thereby increasing treatment access. Clients are assisted with staying in treatment by a combination of sanctions and motivational interventions.

As depicted in Figure 6 above, more than half of the TASC entities were located within a criminal jus-tice agency. Of the remaining private agencies, all of them revealed a variety of ties to the criminal justice system.

In 1996, 79% of TASC clients were estimated to be from the criminal justice system. In 2004, all re-spondents except juvenile programs indicated detailed percentages of justice clients from an array of sources. Of the 39 respondents answering the question "Which types of clients does your agency serve?" the answers reported were as follows: twenty-seven (14.9%) responded with "Probation," 20 agencies (11.0%) responded with "pretrial," and 19 agencies (10.5%) answered with "diversion." Nineteen agencies (10.5%) responded with "drug court," 16 (8.8%) replied with "community correc-tions,"13 (7.2%) answered with "juvenile courts." Thirteen (7.2%) listed "parole," and 8 agencies (4.4%) have "corrections/prison." Seven (3.9%) agencies responded with "child welfare," 7 (3.9%) responded with "family courts," 6 (3.3%) agencies responded with "other reentry clients." Six (3.3%) answered with "schools." Five (2.8%) agencies responded with "other courts," and 4 (2.2%) agencies responded with "non-criminal justice system." Three (1.7%) of our agencies answered with "mental health court," and 3 (1.7%) agencies said they have "Other." Two (1.1%) agencies responded with "private business." One (0.6%) agency responded with "juvenile-adult transfer," and 1 (0.6%) agency responded with "other criminal justice agency."

Figure 7-Types of Clients Served

Which types of clients does your agency serve? Check all that apply.
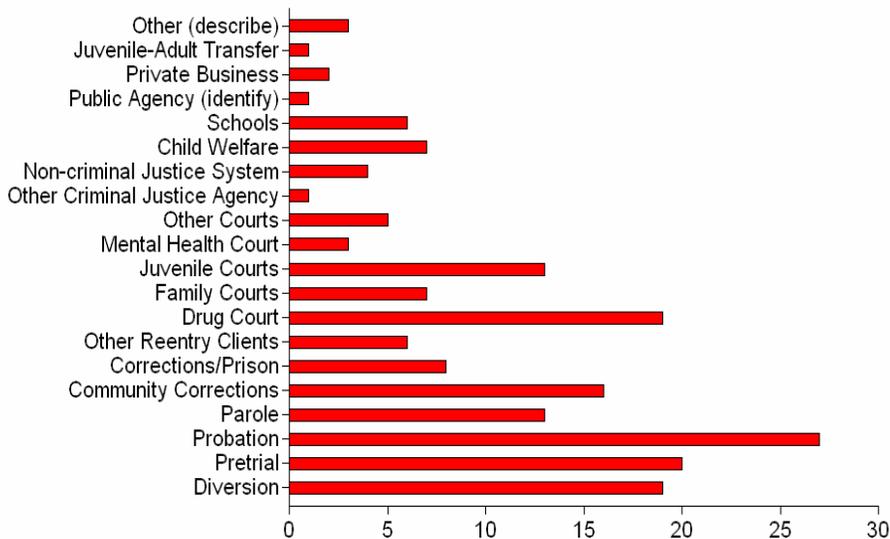
181 Responses   Mean 6.66   7

13
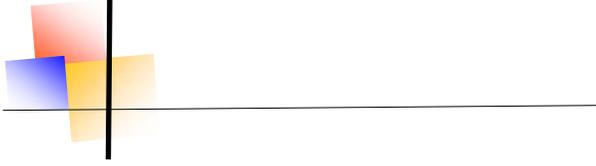
Treatment and Social Services Support

Treatment Service Indicators

Survey responses indicate that clients enter from many doors but they also are referred for a variety of social services. According to the NIDA report on Treatment Alternatives to Street Crime, "Prior to TASC there were few effective links between the criminal justice process and drug abuse treatment."[17] For TASC-like programs to maintain a position as a neutral entity for offender case management bridging two systems, broad-based community support is essential. This support involves the ability to serve a high number of cases effectively and efficiently.Figure 8 indicates that there are a wide variety of evidence-based practices that have been incorporated into TASC programs and/ or are available for referral. The most often mentioned program listed in Figure 8 below is cognitive behavioral therapy. Motivational enhancement was the second most often directly available practice. Co-occurring disorders treatment was the most often referred evidence-based practice.

Evidence-based Practices

The next set of data examines the specific evidence-based practices in which the 38 agencies provide either directly and/or by referral. Three agencies provide "Reasoning and rehabilitation practices directly and three by referral, 11 agencies offer "Motivational Enhancement Therapy Practices" directly, 3 agencies offer "Multi-systematic Therapy Practices" directly and 3 by referral, 10 agencies provide "Co-occurring Disorder Treatment Practices" by referral, 5 agencies offer "Brief Strategic Family Therapy for Adolescent Practices" by referral, 12 agencies offer "Cognitive Behavioral Therapy Practices" directly, 6 agencies provide "Women's Treatment for Trauma Practices" by referral, and 3 agencies provide "TCU- Preparation for Change" directly and by referral.

Figure 8
Of the treatment services offered please indicate which of these specific evidence-based practices is included.

Evidence-based Practices	Directly	Referral	Both
Reasoning and Rehabilitation, Ross & Fabiano, T-3 Associates, Ottawa, Canada	3	3	2
Motivational Enhancement Therapy/Motivational Interviewing	11	6	6
Multi-systematic Therapy, (Juvenile Offender Program)	3	3	1
Co-occurring Disorders Treatment Dartmouth Co-occurring Disorders Research Group	1	10	1
Brief Strategic Family Therapy for Adolescent Drug Abuse	4	5	1
Cognitive Behavioral Therapy (CBT)	12	5	1
Women's Treatment for Trauma, Seeking Safety	5	6	1
TCU- Preparation for Change: The Tower of Strengths and weekly planner	3	3	1

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[17]Inciardi, & McBride supra.

Community Involvement and Support

Longevity

Indicators of community involvement were found throughout the survey's responses. Longevity is one indicator of community ties. Fourteen of the 39 responding agencies have been in operation more than twenty years. Only eleven respondents were started within the past ten years. (See Figure 2)

Use of Volunteers

Sixty percent of TASC programs used community volunteers. They included interns and mentors as well as contacts from faith-based and other community programs. Of the programs that gave information about funding sources, all of them received local support. Despite this, local funding was less than 20% of the budget in two thirds of the agencies. Only two reporting agencies received above 40% of their budgets from local funds.

TASC agencies are most often community-based or local government organizations with modest budgets. Fifteen of the agencies had budgets over $500,000 but below $2,000,000. Fourteen of the larger TASC agencies had budgets over $2,000,000. Eight respondents revealed operating budgets under $500,000.

Client Fee Funding

All TASC respondents receive funding from client fees for services. For over half of the agencies fees comprise less than 20% of their funding. However one agency reported that fees were more than 60% of its budget.

County/City Non-profit Structure

One in five respondents indicated they were county programs and 5% were identified with cities. Private nonprofits were 38% of the respondents. States and regions comprised the balance. Twenty-two of the surveyed programs or 61% had less than 3999 clients in 2003.

Procedures to Coordinate Systems

Assessment practices

Figure 10 reveals that assessment practices are widely available. In thirty-five instances the responding agency always did the assessment and in three instances there was less emphasis on assessments as they were sometimes not available. TASC agencies routinely employ information transfer systems and protocols between agencies and staff. To perform the assessment, screening, case management, drug testing and treatment related services, agencies employ computerized case and management information systems. A few "unavailability of assessment practices" responses may indicate a barrier to transfer of information between agencies that perform assessments. This is most often due to lack of automation or information sharing protocols involving the various levels and agencies. Most TASC programs work to address this issue.
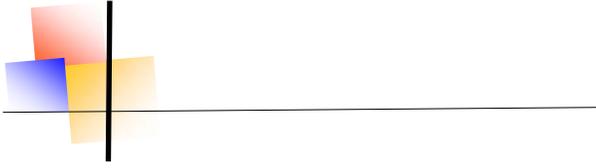
Information transfer

A formal system of communication is established by each TASC program in order to serve a wide array of clients and agencies. This system addresses the differences in roles, language, training and communications between the criminal justice and the treatment system. TASC agencies tend to use neutral language and goals. For example, the justice term "offenders" are "clients." In TASC justice "monitoring" functions are defined in stages of "case management" and "goal attainment."

With respect to information transfer technologies in 1996, ninety-eight percent of respondents indicated that their agencies used computers and information technology. Due to the uniformity in the field, this question was not included from this survey. But all related questions and responses indicate that information transfer and technologies are universally used.

Use of Technology

As one indicator of the availability of the use of technology, eight respondents (37%) indicated that vehicles such as the internet would be useful to them for training and technical assistance. Four (19%) would like video-linked conferences, and two wanted to see more information and research on the National TASC website. Other responses included: all methods, program and fundraising information and assessment and screening technology information.

Formal System Integrity Measures

Because TASC systems work with multiple agencies and funding sources, they all must develop a formal system that meets government and private agency standards for integrity. Figure 9 below indicates that all of the respondents indicated receiving state funding. Other sources included Federal, county or city, private foundation, corporations and fees for services.

Please estimate the percentage of funding your agency receives from each of the following:

Figure-9

Funding Sources

Type of Support

	0 %	1- 20%	21-40%	41-60%	More than 61%
Federal Discretionary	4%	8%	0%	0%	0%
State (Federal Pass-through)	0	9	4	0	0
State	0	60	60	20	0
County-City	0	12	3	0	0
Private/Foundation	0	6	0	0	0
Private/Corporations	0	30	0	0	0
Fees for Services	0	9	3	0	0
Individual Donations	0	3	0	0	0
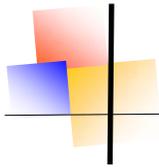
Part 4: Operational Elements

The TASC System Flow Chart (Appendix C) lists seven activities that have been recognized as operational elements of TASC programs. They are: eligibility criteria; client centered case management; screening for client identification; assessment and referral; monitoring and case management reporting along with chemical testing; competency with diversity; and community networks.

Eligibility Criteria

Client eligibility criteria guide the activities listed in figure 10 below. TASC respondents indicated that their services include a range across the criminal justice, substance abuse and mental health fields. The Figure below indicates the types of services that TASC performs, that also reach across treatment and justice system services. All of the operational elements relate to the services listed in Figure 10.

"Figure 10-What types of programs and services does your agency provide"

Figure 10-Types of TASC Services

Staffing, Policies and Procedures, and	Always Available	Sometimes Available	Never Available
Assessment	35	3	
Case Management	34	3	
Drug Testing	32	6	
Screening	31	3	1
Treatment Planning	30	3	1
Treatment Readiness	16	6	4
Treatment Services	19	4	10*

* Many TASC programs stress professional objectivity and separation from treatment and the justice system by not conducting treatment within the TASC program.

Management Information Systems and Evaluation

TASC agencies are employing management information systems and gathering information with respect to assessment, case management, drug testing, screening, and treatment planning, readiness and services as set out in Figure 10 above. Additionally, eleven respondents indicated that they provide research related services to the community. Nineteen provided community education, and twenty provided public awareness pertaining to this field. Newsletters and public policy development were routine activities in nine agencies.

Although this survey did not seek specific information about TASC management information systems, and evaluation methods, it is believed that this area should be explored in detail in a future study of technology issues. TASC respondents listed providing client services that are linked to a dozen types of criminal and juvenile justice agency components. In addition, referrals and linkages were identified with respect to human services, schools, child welfare, employment, housing and other community agencies.

Staffing, Policies and Procedures, and Training

TASC responses have indicated as few as one professional staff person and as many as 370. Respondents reported a range in support staff from 0 to 699. Volunteer numbers ranged from zero to 789.

"Please indicate the number of staff in each of the following categories..."
Figure-11

Staff Number	Professional	Support	Volunteer
>10	14 agencies	24 agencies	17 agencies
11-30	13 agencies	4 agencies	5 agencies
31-70	4 agencies	3 agencies	3 agencies
71-200	2 agencies	3 agencies	3 agencies
200+	6 agencies	1 agency	1 agency
Unknown			1 agency

The study attempted to get feedback on training needs as indicators of staffing and training elements. With this range of staff and also a variety of agency affiliations (government vs. private), there is a common core of TASC programming, concerning staffing, policies and procedures and programming. Figures 12, 13 and 14 reflect training priorities.

Cross-training

Figures 12, 13 and 14 depict ranked responses to this question: "Please help us identify the types of training and technical assistance that would be most beneficial to your agency by rating the topics."

Figure-12
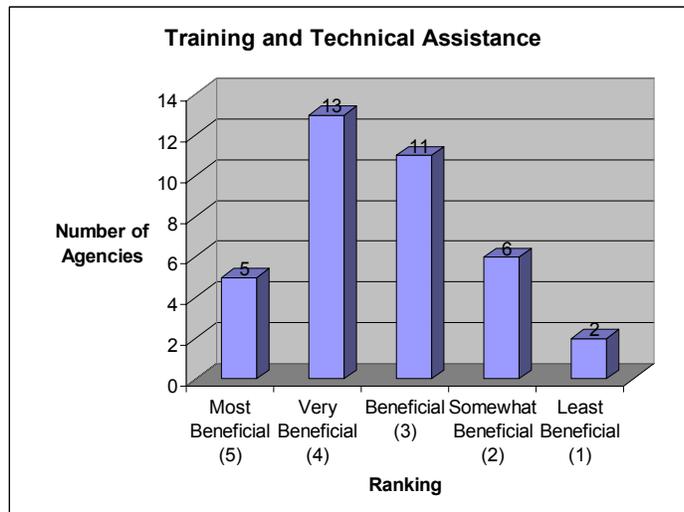
In Figure 12 above, of the 37 respondents, 2 of the agencies felt that Training and Technical Assistance would be least beneficial as compared to the 5 agencies that felt it would be most beneficial. Six

agencies believed it would be somewhat beneficial, 11 agencies believed it would be beneficial and 13 agencies believed it would be very beneficial.

Figure-13
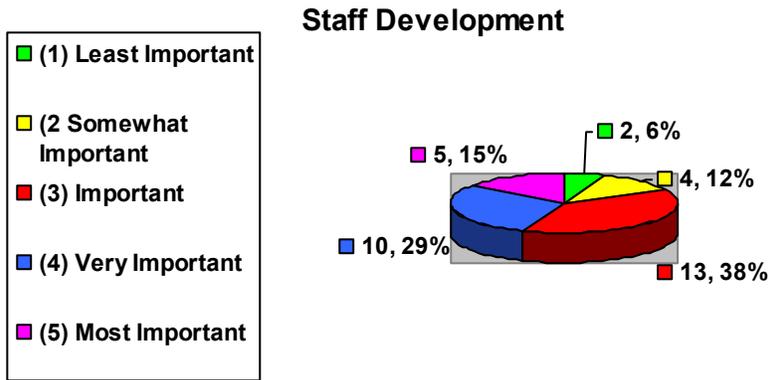
Staff Development

Figure 13 above depicts that 10 agencies believed that it would be very beneficial, and 5 agencies believed it would be the most beneficial. Two of the responding agencies believed that staff development would not be beneficial, 4 agencies believed it would be somewhat beneficial. Thirteen agencies believed that it would be an important technical assistance area.

Figure-14
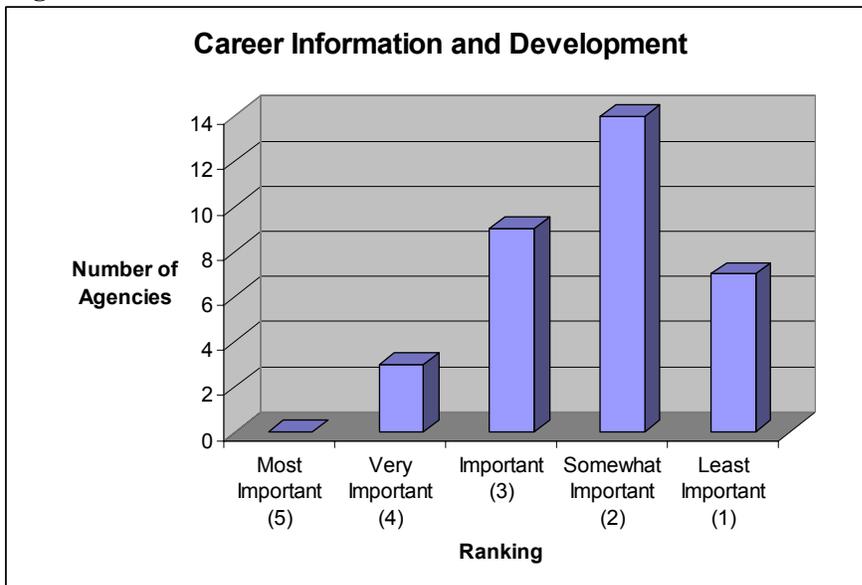
As indicated by the graph above, 14 agencies felt that career information and development was somewhat important, 9 agencies felt it had importance, 3 agencies believed it was very important but none ranked it as the most important area for technical assistance.

Client Centered-Case Management
Figure-15
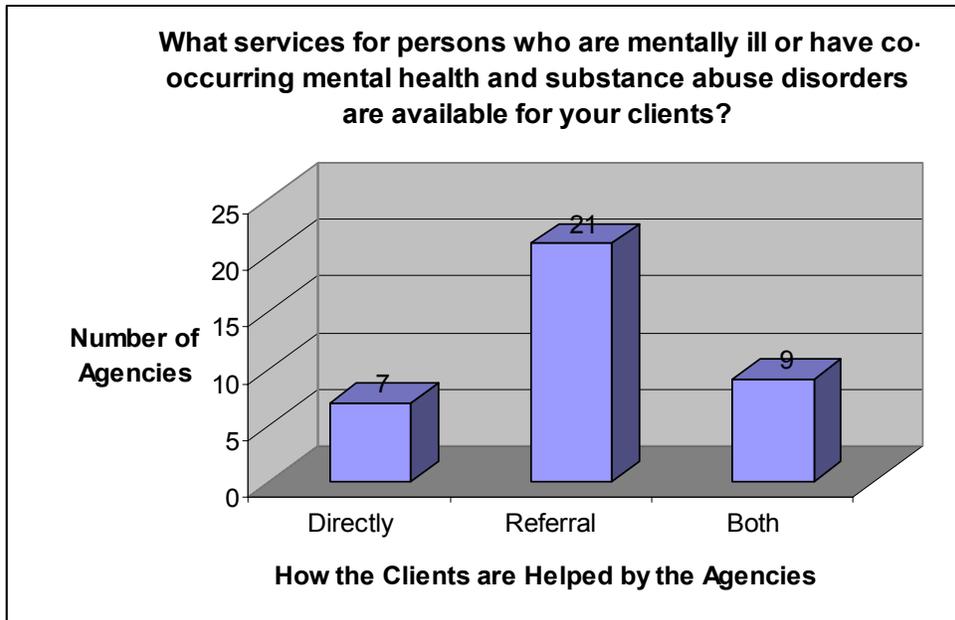
There are many indicators that case management is individualized. For example the variety of evidence based practices provided and referred in Figure 8 are such indicators. Another one is the availability of mental health services.

Of the programs that responded to our question: "What services for persons who are mentally ill or have co-occurring mental health substance abuse disorders are available for your clients?" 21 (56.76%) agencies stated that they have it available by referral, 9 (24.32%) agencies have it available directly, and 7 (18.92%) agencies provide it both by referral and directly.

Client Identification and screening

Table 10 discussed above also indicates the range of services where there is a process of identifying clients, screening and matching for treatment. For example 30 (88.2%) of our responding agencies stated that they have "Treatment Planning" always available, 3 (8.8%) agencies have it available sometimes, 1 (2.9%) agency never have it available.

Assessment and Referral

This survey asked agencies about what type of assessments they provided. Thirty-eight of our agencies provide assessment for substance abuse, 14 of them provide it for mental health, 9 of the agencies provide assessment for physical health, 22 agencies provide it for risk/needs, and 9 agencies provide it for employment.

20

Figure-16 Assessment Types
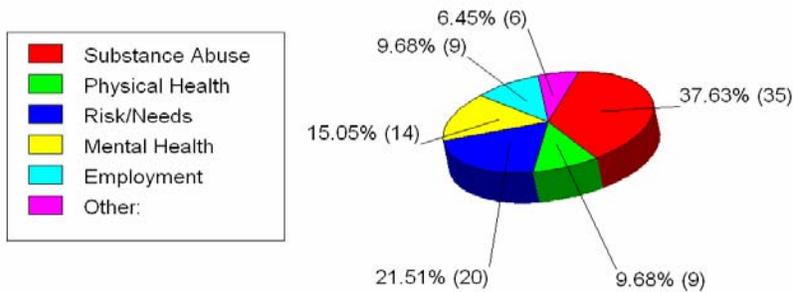
Competency with Diversity

Of the 38 respondents, 13 agencies have reported having "Culturally Competent Programming Ser-
vices" sometimes available, 18 agencies have "Gender Specific Services" sometimes available, 22
agencies have "Pregnant/post-partum Services" sometimes available, 19 agencies have "services for
persons who are HIV positive" sometimes available, 21 agencies have " mentally ill or co-occurring
mental health and substance abuse services" sometimes available, 24 agencies have "Services for vic-
tims and perpetrators of domestic violence" sometimes available, 11 agencies provide services for
"non-English speaking participants" at all times, 11 agencies never provide "Services for juveniles",
28 agencies have "Primary Health Services" available sometimes, 29 agencies have "Physical Exami-
nations" available sometimes, and 3 agencies have "Dental Care" available sometimes.

Figure-17 Cultural Competency
Which of the following services are available to your clients?

Service Types	Always Available	Sometimes Available	Never Available
Culturally Competent Programming	11	13	7
Gender Specific/ Women Only	11	18	4
Services for Pregnant/post-Partum women	5	22	6
Services for persons who are HIV positive	6	19	8
Services for mentally ill or co-occurring mental health and substance abuse	7	21	9
Services for victims of perpetrators of domestic violence	3	24	8
Services for non-English speaking participants	11	10	9
Service for juveniles	10	5	11
Primary Health Services	2	28	1
Physical Examinations	2	29	1
Dental Care	1	23	1

Community Networks

In an open ended question: "What other services are available for your clients?" respondents indicated a wide array of support services and outreach. The responses are listed below.

- defendants/clients with identifiable needs are referred to public and private community service providers and agencies education services;
- job placement; mental health services; parenting and related services
- housing assistance, residential services, GED classes, etc.
- laboratory drug testing services

substance abuse and gambling evaluations

Figure 18 outlines specific responses to the question: "What types of programs and services does your agency provide to the community?"

Figure- 18
Community Networks

Community Programs
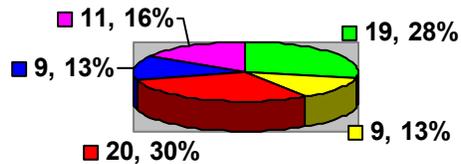
When asked what types of programs and services the agency provides to the community, 19 of the agencies responded with "community education," 9 agencies responded with "newsletters," 20 agencies said they provided "public awareness," 9 agencies responded with "public policy development," and lastly, 11 agencies responded with "research."
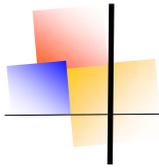
Part V Recommendations

TASC agencies were asked to identify priorities for National TASC by rating activities. The following are items ranked in order of priority:

National TASC Priorities

1. **Funding**: Identifying Federal and State resources to support TASC member agencies was given the highest priority (20 mentions) and 7 mentions as very important.
2. **Public Policy Development**: Fifteen respondents believed that National TASC should put highest priority on efforts on developing public policy at the Federal level that would support the work of TASC and related programs. Seven saw this as a very important priority as well.
3. **Model Programs**: Ten respondents saw model programs identification and summarizing them for replication as the highest priority. Another 13 respondents identified this as very important.
4. **Accreditation**: Seven programs identified TASC agency accreditation as a high priority and an other seven identified it as among the highest.
5. **Public Awareness**: This was selected by six as a top priority but another 15 ranked as the next highest priority.
6. **Training and Technical Assistance**: This was given highest priority by 5 but another 13 gave the next highest ranking.

Technical Assistance and Training Priorities

Respondents were asked to what types of training and assistance would be most beneficial to respondents' agencies. Items mentioned with more than 20 responses in the two highest categories were: case management, criminal justice and substance abuse, program evaluation, and substance abuse. They were ranked accordingly as listed below.

1. **Substance Abuse Research and Model Programs**: Ten programs gave this the highest response and another 17 indicated it was their second highest priority.
2. **Criminal Justice and Substance Abuse**:   Ten programs also gave this highest priority with another 15 noting it as second highest.
3. **Assessment**: Eight programs made it highest and another 12 made is very high in priority.
4. **Drug testing**: Eight indicated this was highest priority and another 9 felt it was a second highest priority topic.
5. **Program Evaluation**: This was mentioned as highest priority by 7 and another 16 gave it second highest.
6. **Program Management**: Six gave this "most important" priority and another 12 gave it "second highest."
7. **Drug Courts**: Six gave drug courts highest priority and 10 ranked it as second highest.
8. **Case Management**: Five felt it deserved highest priority and another 17 mentioned it as very high priority.
9. **Program Development and Implementation**: Five ranked it highest and another 14 noted it was second highest.
10. **Public policy development and advocacy**: This was mentioned by five as highest with another seeing it as second highest.
11. **Staff Development**: This was indicated by 5 as highest and by another 10 as second highest.
12. **Board of Directors**: Building and managing a volunteer board was ranked as highest by 5 respondents and another 4 felt it was second highest.
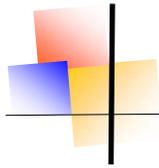
Conclusion

During the past decade, TASC has continued to develop along the path of assessing the needs of persons involved in the justice system with respect to substance abuse and other human services. TASC agencies have been joined by others in the field in an effort to serve more offenders. As federal funding availability for TASC programs has diminished with the lack of any dedicated federal funding, most TASC programs have received state and local funding as well as funds from nonprofit and corporate sectors and fees from clients. The limited availability of funding resources has continued to be a challenge for TASC agencies. As a result, more respondents to this survey were affiliated with governmental agencies than in past years, more were receiving state funding, and fewer were receiving federal funding support. TASC agencies are distributed throughout the states, but only three states reported having statewide TASC organizations.

At the system's level TASC programs reveal both broad based human services, substance abuse linkages as well as numerous criminal and juvenile justice ties. TASC clients arrive through many types of agencies and referrals, and TASC agencies provide communication and coordination between systems, agencies and clients. This survey provides documentation of an element that has long been recognized as necessary for TASC programs to function—community support and acceptance. The many types of community activities and connections such as offender family support, faith based mentors, employment skills and support, public education, and involvement of community businesses, agencies and individuals in boards, new projects and aftercare that were documented make TASC unique from other types of service providers in its outreach and involvement with community members.

At the organizational level, this study found that TASC agencies are more connected to their communities in a web of complex operations and services. TASC has seemingly taken on the role of providing more varied and evidence based services at a time when funding has been short and many jurisdictions will not provide adequate reimbursement for case management as a clinical service.

At the operational level, this study provides a long list of types of assessments that are often performed by respondents. Types of assessments include substance abuse, mental health, physical health, risk/needs, and employment. Assessments are conducted in house, out-sourced or both by community agencies and TASC organizations. In addition, most agencies provide some type of treatment as well as referrals to a range of providers in the community. The study also reveals that there is substantial involvement with child welfare, specialty courts, drug courts, schools, prevention and civil court referrals to TASC programs. TASC agencies are providing a continuum of services to juveniles and adults that range from pretrial to post trial. While mental health screening and treatment is not universal, there is substantial movement in that direction with more agencies providing such services.

At the national level, there was substantial support for the National TASC office to provide a wide variety of informational and advocacy services. Among the top items were assistance with funding and resources for member agencies as well as national policy development consistent with the TASC mission. TASC administrators, like their community corrections counterparts place a high priority on substance abuse research and models, particularly for the criminal justice client. The experiences of these agencies in managing a quarter of a million cases in 2003 provide guidance for meeting the challenges ahead.

This information will assist National TASC to provide better services. It will also assist member organizations in developing improved management tools and strategies. National TASC will be sharing this information with a working group of researchers as part of a long term effort to improve evidence based practices.

The information gathered from this study will shape new web-based informational and training materials. The study identifies a need to serve an increasing number of TASC programs that are locally funded and operate at the county level. Many are nonprofits but most of them have an array of community networks. Such programs are often utilizing faith based volunteers and resources donated by the private sector. They are actively engaged in public education and outreach concerning crime prevention and drug free living.

This study also underscores the critical role that TASC plays in many communities as a link for re-entry, prevention, youth services, and jail or prison/ based assessment and aftercare for persons under justice supervision. National TASC will continue to work with community corrections, probation, parole, prosecutors, courts, defense and pretrial services in the justice system. Also National TASC will assist its members to continue to advocate for improved access to physical, mental health/ substance abuse, housing, employment and other human services for offenders with such needs.

AGENCY DEMOGRAPHICS

Name of Agency: **SURVEY SUMMARY**

In what year was your agency founded: **3** before 1970**; 29** -- 1970 thru 2002

Type of agency or organization:

Private, not for profit	15_____
Private, for profit	1_____
City Government	2_____
County Government	11_____
State Government	8_____
Other (please explain)	all government --- 21--- 56.75%

Please describe your agency's clients:

Total number served in 2003	__218,655_ (22--- under 4000; 9--- 9000 to 21,960)
Number of adults	__188,618_ (21--- under 2500; 7--- 2501 to 9999)
Number of juveniles	__53,428__ (12--- zero; 13--- 1 to 1000)

Please indicate the number of staff you have in each of the following categories:

Professional Staff: _____range 1 to 370

Support Staff: _____range 0 to 699

Volunteers: _____range 0 to 789

Please estimate the *percentage* of funding your agency receives from each of the following (%):

Federal discretionary	_____% 4--- zero; 5--- <10%; 3--- 11 to 20%
State (Federal Pass-through)	_____% 4--- zero; 9--- 1 to 20%; 4--- 21 to 40%
State	_____% 20---more than 61%; 12--- 21 to 60%
County/City	_____% 12 --- 1 to 20%; 3--- 21 to 40%
Private/Foundation	_____% 6--- 1 to 20%
Private/Corporations	_____% 3--- 1 to 20%
Fees for service	_____% 9--- 1 to 20%; 3--- 21 to 40%
Individual Donations	_____% 3--- 1 to 20%
Other (please describe)	_____%

_____

_____

What is your agency's annual budget?
Under $100,000   _____1

$100,000 - $249,999	_____	3
$250,000 - $499,999	_____	4
$500,000-$2,000,000	_____	14
Over $2,000,000	_____	15

SERVICES PROVIDED

What types of programs and services does your agency provide to clients? Please check all that apply.

CLIENTS

	Always Available	Sometimes Available	Never Available
Assessment	_____35	_____3	_____
Case Management	_____34	_____3	_____
Drug Testing	_____32	_____6	_____
Screening	_____31	_____3	_____1
Treatment Planning	_____30	_____3	_____1
Treatment Services	_____19	_____4	_____10
Treatment Readiness	_____16	_____6	_____4

Other (Please describe): _____

_____

What kinds of assessments does your agency provide? Please check all that apply.

Substance Abuse	_____	38
Mental Health	_____	14
Physical Health	_____	9
Risk/Needs	_____	22
Employment	_____	9

Other (Please describe): _____

_____

Indicate which of the following services are available for your clients.

	Directly	Referral	Both
Culturally competent programming	_____11	_____13	_____7
Gender-specific/women-only programming	_____11	_____18	_____4
Services for pregnant/post-partum women	_____5	_____22	_____6
Services for persons who are HIV positive	_____6	_____19	_____8

Services for persons who are mentally ill or have co-occurring mental health and substance abuse disorders

_____7	_____21	_____9

Service	Directly	Referral	Both
Services for victims or perpetrators of domestic violence	3	24	8
Services for non-English-speaking participants	11	10	9
Services for juveniles	10	5	11
Primary healthcare services	2	28	1
Physical examination	2	29	1
Dental care	1	23	1

Other (please describe):

_____

_____

Of the treatment services offered please indicate which of these specific evidenced-based practices is included?

	Directly	Referral	Both
Reasoning and rehabilitation, Ross & Fabiano, T-3 associates, Ottawa, Canada	3	3	2
Motivational Enhancement Therapy/ Motivational Interviewing	11	6	6
Multi-systemic Therapy, (Juvenile Offender Programming)	3	3	1
Co-Occurring Disorders Treatment Dartmouth Co-occurring Disorders Research Group	1	10	1
Brief Strategic Family Therapy for Adolescent Drug Abuse	4	5	1
Cognitive Behavioral Therapy (CBT)	12	5	1
Women's Treatment for Trauma, Seeking Safety	5	6	1
TCU-Preparation for Change: The Tower of Strengths and weekly planner	3	3	1

Other evidence-based or research-
validated practice (Please describe):_____

_____

What types of programs and services does your agency provide to the community? Please check all that apply.

COMMUNITY
Community Education   _____19
Newsletter   _____9
Public Awareness   _____20
Public Policy Development   _____9
Research   _____11

Please classify the clients whom your agency serves, into the following categories by percentages (total may exceed 100%):

Diversion   _____% 21 programs; (15--- 1 to 20%)
Pretrial   _____% 21 programs; (17--- 1 to 20%)
Probation   _____% 29 programs; (10--- 81 to 100%)
Parole   _____% 16 programs; (13--- 1 to 20%)
Community Corrections   _____% 18 programs: (9--- 1 to 20%)
Corrections/Prison   _____% 11 programs; (7--- 1 to 20%)
Other Reentry Clients   _____% 7 programs: (5--- 1 to 20%)
Drug Court   _____% 20 programs; (12--- 1 to 20%)
Family Courts   _____% 8 programs; (6--- 1 to 20%)
Juvenile Courts   _____%11 programs; (9--- 1 to 20%)
Mental Health Court   _____% 4 programs;
Other Courts   _____% 6 programs; (4--- 1 to 20%)
Other Criminal Justice Agency   _____% 2 programs --- (both 1 to 20%)
Non-criminal Justice System   _____% 6 programs (5--- 1 to 20%)
Child Welfare   _____% 7 programs --- (all 1 to 20%)
Schools   _____% 7 programs --- (all 1 to 20%)
Public Agency   (identify)   _____% 2 programs --- (all 1 to 20%)
Private Business   _____% 3 programs; (2--- 1 to 20%)
Juvenile-Adult Transfer   _____% 2 programs;
Other (please describe)   _____% 2 programs --- prosecutors office
                                                                4 programs--- various agencies

TASC MEMBER AGENCY NEEDS

National TASC is seeking input from its members about priorities for their national association. What are the types of *programs, services,* and *assistance* that would be most beneficial to your agency? Please rate each of the following National TASC programs and services on a scale of one to five, with "1" being least important to your agency, and "5" being most important to your agency:

                Least Important   *Most Important*

Annual TASC Conference on Drugs and Crime
                1 **2**   2 **7**   3 **12**   4 **12**   5 **4**

Accreditation (*of local TASC agencies and programs*)
                1 **7**   2 **5**   3 **10**   4 **7**   5 **7**

Funding (*identifying Federal and State resources of support for TASC member agencies*)
    1 **2**   2 **4**   3 **2**   4 **7**   5 **20** *

Model Programs (*identifying model programs and summarizing their activities for replication*)
    1 **1**   2 **3**   3 **9**   4 **13**   5 **10** *

Newsletter
    1 **5**   2 **10**   3 **12**   4 **6**   5 **3**

Public awareness (*about TASC efforts, substance abuse, criminal justice and related issues*)
    1 **1**   2 **2**   3 **12**   4 **15**   5 **6** *

Public policy development and implementation (*in Congress and with the Administration*)
    1 **0**   2 **6**   3 **9**   4 **7**   5 **15** *

Training and technical assistance (*see pages 4-5 of this survey*)
    1 **2**   2 **6**   3 **11**   4 **13**   5 **5**

Career information and development
    1 **7**   2 **14**   3 **9**   4 **3**   5 **0**

Other (please describe): _* indicates top priority (more than 20 responses of 4 and 5)
_____
_____
_____

TASC staff and allied professionals provide a variety of training and technical assistance services. Please help us identify the types of training and technical assistance that would be *most* beneficial to your agency by rating the following topics from "1" to "5", with "1" being *least important* and "5" being *most important* to your agency.

Least Important   Most Important

Assessment
    1 **3**   2 **3**   3 **8**   4 **12**   5 **8**

Board of Directors (*Building and Managing a Volunteer Board*)
    1 **15**   2 **6**   3 **10**   4 **4**   5

Case Management
    1 **3**   2 **2**   3 **7**   4 **17**   5 **5** *

Criminal Justice and Substance Abuse
   1 **4**   2   3 **6**   4 **15**   5 **10** *

Drug Courts
   1 **6**   2 **8**   3 **6**   4 **10**   5 **6**

Mental Health Courts
   1 **4**   2 **11**   3 **9**   4 **10**   5 **2**

Other Special courts (*i.e. Family Courts*)
   1 **6**   2 **10**   3 **7**   4 **6**   5 **3**

Drug Testing
   1 **4**   2 **9**   3 **6**   4 **9**   5 **8**

Fundraising/marketing
   1 **10**   2 **7**   3 **6**   4 **9**   5 **3**

Program Development and Implementation
   1 **4**   2 **2**   3 **10**   4 **14**   5 **5**

Program Evaluation
   1 **3**   2   3 **9**   4 **16**   5 **7** *

Program Management
   1 **3**   2 **5**   3 **10**   4 **12**   5 **6**

Public Awareness (*Development and Implementation*)
   1 **4**   2 **7**   3 **9**   4 **14**   5 **2**

Public Policy Development and Advocacy
   1 **3**   2 **10**   3 **6**   4 **10**   5 **5**

Screening
   1 **6**   2 **5**   3 **6**   4 **15**   5 **4**

Staff Development
   1 **2**   2 **4**   3 **13**   4 **10**   5 **5**

Strategic Planning
   1 **2**   2 **3**   3 **11**   4 **16**   5 **3**

Substance Abuse (*Research, Model Programs, Trends, etc.*)
   1   2   3 **8**   4 **17**   5 **10** *

Technology (*Development and Implementation*)
   1 **3**   2 **5**   3 **12**   4 **12**   5 **4**

Treatment Planning
                1 **3**   2 **4**   3 **8**   4 **13**   5 **4**

       Other (please describe):

_____

_____

_____

* indicates greatest needs for training and technical assistance (more than 20 responses of 4 and 5)

Of those training and technical assistance needs rated 4 or 5, which can be done most effectively:

At the National TASC Conference (please list)

_____

_____

_____

At Regional Meetings

_____

_____

_____

In My Own State

_____

_____

_____

Other vehicles (i.e., internet)

_____

_____

_____

Please indicate any other challenges or barriers to your agency's services and programs.

_____

_____

Are there any other issues or needs that are important to your agency that were *not* addressed in the National TASC Treatment Accountability Survey? Do you know any other TASC programs we should contact? If so, please add any comments below (or attach additional pages as needed):

_____

TASC Critical Elements

Systems Coordination Elements

Element 1
A process to coordinate justice, treatment and other systems.

Element 2
Procedures for providing information and cross-training to justice, treatment, and other systems.

Organizational Elements

Element 3
A broad base of support from the justice system with a formal system for effective communication.

Element 4
A broad base of support by the treatment and other social services community.

Element 5
Organizational integrity.

Element 6
Policies and procedures for regular staff training.

Element 7
A management information system with a program evaluation design.

Operational Elements

Element 8
Clearly defined client eligibility criteria.

Element 9
Performance of client-centered case management.

Element 10
Screening procedures for identification of TASC candidates within the justice system.

Element 11
Documented procedures for assessment and referral.

Element 12
Policies, procedures, and protocols for monitoring TASC clients' alcohol and drug use through chemical testing.

Element 13
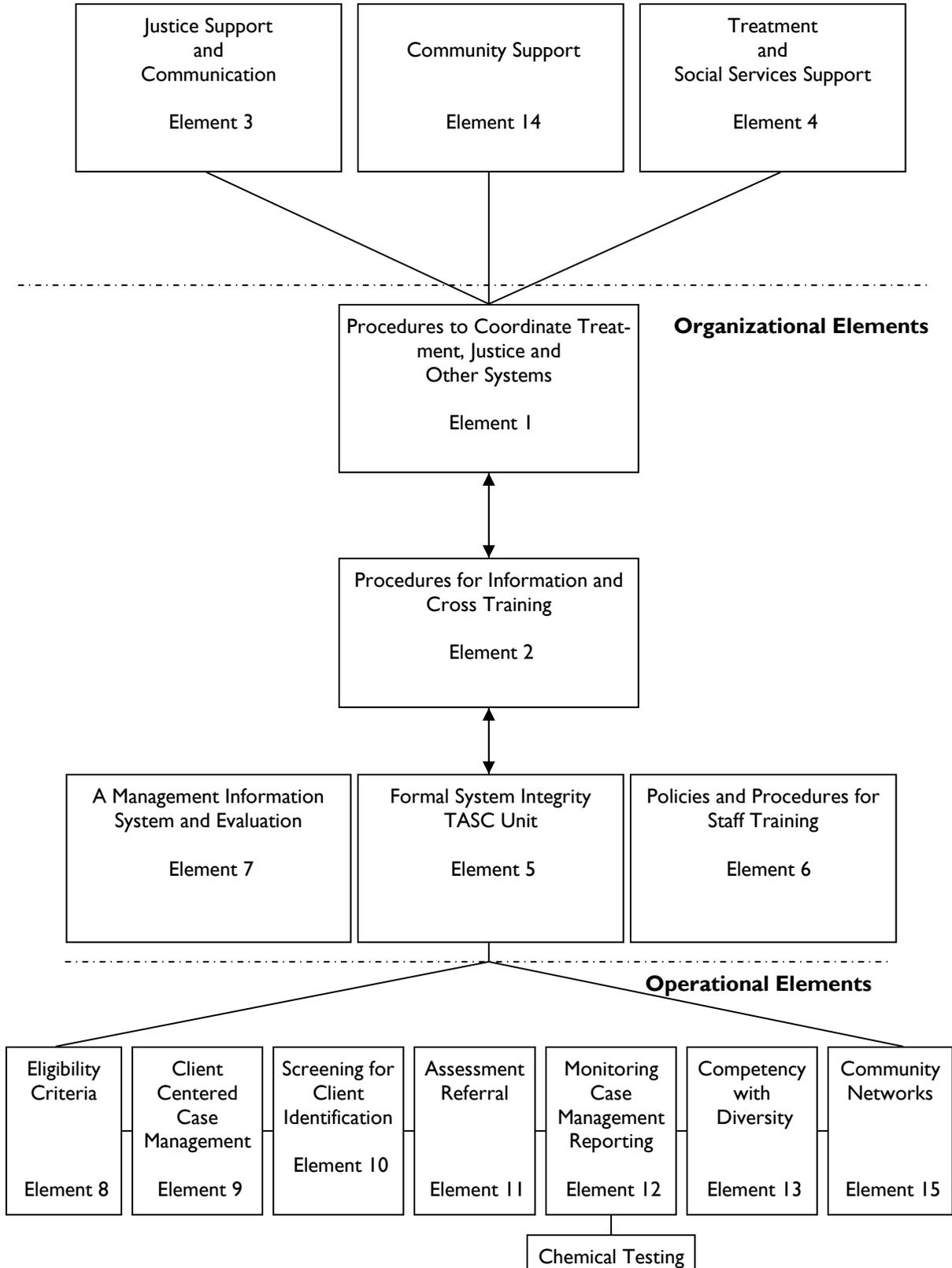Competency with diverse Populations

Element 14
Broad-based community support and involvement

Element 15
Participation in Community Networks.

The TASC System Flow by Element

Justice Support and Communication	Community Support	Treatment and Social Services Support
Element 3	Element 14	Element 4

Organizational Elements

Procedures to Coordinate Treatment, Justice and Other Systems

Element 1

Procedures for Information and Cross Training

Element 2

A Management Information System and Evaluation	Formal System Integrity TASC Unit	Policies and Procedures for Staff Training
Element 7	Element 5	Element 6

Operational Elements

Eligibility Criteria	Client Centered Case Management	Screening for Client Identification	Assessment Referral	Monitoring Case Management Reporting	Competency with Diversity	Community Networks
Element 8	Element 9	Element 10	Element 11	Element 12	Element 13	Element 15

Chemical Testing

34

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