Argus Community Reentry Initiative (ACRI)
A SAMHSA funded Offender Reentry Program Grant

A Presentation to OAS/CICAD
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About Argus Community

- Argus Community, Inc. has been providing substance abuse treatment services for over 40 years. Argus started as a traditional residential community, in the “therapeutic community” tradition, an evidence-based practice in the SAMHSA documentation of successful treatment practices.

- Since 1968, Argus Community has expanded from the pure TC model to respond to the needs of the community to address and/or treat persons on public assistance, chronically unemployed, referred from the criminal justice system, those dually diagnosed with mental health and substance abuse issues, those needing outpatient substance use treatment, and women, men and children who are HIV positive.

Argus has many community programs

- Argus Community as an agency has many different successful programs primarily created in response to the needs of disadvantaged communities in NYC. Congress has designated our zip codes as Congressionally Designated Disaster Zones.

- Argus Community has a wide range of community-based substance abuse, mental health, educational and work/vocational programs in these communities suffering from urban psychosocial epidemics that interact to make each other worse and intensify social problems and behavioral health and crime and violence.
Range of Community Services

- Train persons on public assistance in counseling and basic work skills, leading to credentialing (i.e. CASAC-T) and/or employment.

- Outpatient mental health services for those with serious mental illness and criminal justice background.

- Case management services for persons with HIV/AIDS, their children and family members.

- Work experience program for high risk populations such as homeless persons who do not respond to traditional training programs.

More Argus Services

- Modified therapeutic community, providing integrated mental health and substance abuse treatment for homeless persons with co-occurring addictive and serious mental disorders.

- Therapeutic community residence for men, enhanced with pre-employment training.

- Welfare-to-work program trains persons on public assistance to become substance abuse counselors.

- Offender reentry program linking persons in correctional settings with community services.
Argus has history of successful services provision

- **Work Program**: 1,397 Individuals enrolled; 62% successfully completed training. 788 of 864 clients were placed in good jobs with benefits (92%)

- **Substance Abuse program**: Over a five year period, 50-70% of the residential patients who completed treatment remained drug free and free of incarceration.

- 94% of clients in various Argus programs have criminal justice involvement. Argus took the model of successful intervention and applied it to an offender reentry program last Fall.

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One Argus Program: **ACRI**

**Offender Reentry Component**

- Argus Community Reentry Initiative (ACRI) is a grantee under the SAMHSA/CSAT Offender Reentry Program.

- ACRI grant started in 9/30/2009 and is funded through 9/29/2012.

- ACRI is designed to expand services to adults over 18 years of age who are incarcerated in and around the 5 boroughs of NYC and are diagnosed with substance abuse disorder and scheduled for release.
About the ACRI Grant

- The ACRI outreach grant networks with various Criminal Justice agencies and Correctional facilities to develop linkages with prospective ACRI clients.

- ACRI Outreach is also done at various Re-entry workshops correctional facilities host annually. These workshops assist inmates who are within a year of release with the successful re-entry into the community.

ACRI grant expands current staffing

- The ACRI Offender Reentry component will allow Argus Community to add:
  - Project Manager to oversee reentry
  - Reentry Intake Specialist
  - MICA Reentry Counselor
  - Outpatient Counselor
  - And Reentry Counselor

- Staff are to be bi-lingual speaking
ACRI Outreach – In Corrections

- Transitional Counselors contact ACRI with prospective client's.
  - * Short Screen completed while client is still incarcerated.
  - * Upon completion of Short Screener a package is requested containing: Mental health diagnosis, criminal background, education, vocational history, drug history, treatment history, medical history etc.

If client is deemed appropriate for the ACRI program a Reasonable Letter of Reassurance is mailed to the client's correctional facility where the client is housed or directly sent to the NYS Dept of Parole.

Additionally, a letter requesting information regarding the client's release is also sent to ensure ACRI can make the proper arrangements to Argus programs such as ELS, Harbor House, or Mary S. Taylor facility.
ACRI Outreach – In the Community

- Once at ACRI, the client undergoes a thorough Intake process.
- Staff conduct face-to-face interviews to collect GPRA data and additional project evaluation survey data at intake and 6 months after intake, and discharge.
- All GPRA client data is entered into the online data system of CSAT/SAMHSA within 7 days of intake.

ACRI Community-based Services

- Vocational Training
- Employment Referral Services
- Internships
- Social Dates = community reintegration
- Substance Abuse Treatment = individual, group, and outside therapy, case management
- HIV/AIDS education
- HIV Rapid Testing Referral
ACRI Performance Reporting

The Argus Community Reentry Initiative (ACRI) has begun to report performance on the following measures: client’s substance use, family and living condition, employment status, social connectedness, access to treatment, retention in treatment, and criminal justice status.

This information is gathered using the CSAT Discretionary Services Client Level Government Performance and Results Act tool and other measures such as the Global Appraisal of Individual Needs (GAIN) instrument.

Initial Intake Data using GPRA

Because 6 month follow up has not been completed we do not yet have comparative data to measure success in meeting client-level goals.

GPRA INTAKE: MOST FREQUENTLY REPORTED SUBSTANCES USED:

- Alcohol 27.8%
- Marijuana 17.6%
- Cocaine 13.2%
- Benzodiazepines 5.8%
- OxyContin 5.1%
ACRI Evaluation Follow Up

- We expect to begin doing 6 month follow up of clients in June of 2010.

- ACRI’s goal is 225 clients over 3 years

- Hispanic population is currently about 47.8%

- ACRI currently serves 87% Males and 13% females.

Contact the Presenter at:

Willie Speight
Argus Community
Director of Agency Outreach
760 E. 160th Street
Bronx, NY 10456
Phone: 718-401-5765
Email: wspeight@arguscommunity.org