AXIS Q1 FY2027 Evaluation Report

Sep 29, 2026

San Juan County Alternative Sentencing Division — AXIS/NEXUS Program Quarterly Evaluation Report, Q1 FY2027 (July 1 – September 30, 2026)

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Data current as of September 29, 2026. The report is due on or before the last day of the quarter, so measures whose follow-up windows extend past September 30 are reported as in progress and will be completed in the Q2 report.

Part 1: Narrative

Summary of quarter results

AXIS served 15 women in Q1, exceeding the quarterly minimum of 10. Every measure reportable this quarter met its target. Group 104 was admitted July 28, 2026, and all 8 new admissions graduated on September 24, 2026. Group 103 graduated 6 clients on July 16, 2026.

All 8 new admissions were screened at intake for serious mental illness (SMI) and current MAT participation (100%). Recidivism was below the 50% target in all three follow-up windows. There were 0 new charges in months 0–3 or months 4–6, and 2 of 13 graduates (15.4%) had a new charge in months 7–12.

NEXUS aftercare initiation, engagement, and completion are in progress. Group 104 was released September 24, so the 10-day window closes October 4 and the 60-day window closes November 23. Those measures, along with MAT referrals at release and out-of-county recidivism checks, will be reported in Q2.

Highlights

- **Clients served above target.** AXIS served 15 women against a quarterly minimum of 10. That count includes 8 new admissions, one of them a late add-on to Group 104.
- **100% graduation of the Q1 entry cohort.** All 8 Group 104 admissions completed the 60-day treatment episode and graduated September 24. A ninth Group 104 graduate was a Group 103 participant whose treatment was extended; she is counted once, under her original admission.
- **Mental health care started early in treatment.** Every Group 104 participant received an initial telepsychiatry evaluation within the first week, on August 3; the add-on was referred August 5. Three participants started mental health medication during treatment, and each has follow-up mental health care planned at release.
- **Recidivism well below target.** No new charges occurred in months 0–3 or months 4–6 after graduation. Two of 13 graduates (15.4%) had a new charge in months 7–12, against a target of under 50%.

- **Every follow-up due this quarter was completed.** All 30 graduates due for a 3-, 6-, or 12-month follow-up had a records check this quarter.
- **Stronger data tracking.** ASD implemented a new AXIS data tracker built around the SOW's eight performance measures. It replaces a separate spreadsheet, so data is entered once and each measure calculates automatically.
- **Treatment extensions standardized.** Counselors now follow up with extended participants during the roughly 10 days between cohorts. This replaces holding NEXUS sessions in the AXIS building for one participant, and it means NEXUS attendance counts only after final release.
- **Exit survey participation.** All 6 Group 103 graduates completed exit surveys (100% response), with an average overall satisfaction of 4.0 out of 5.

Major issues and proposed resolutions

Issue	Impact	Proposed resolution
No time after quarter close to compile data. The report is due on or before the last day of the quarter, so data produced at or after release isn't available yet. Group 104 was released September 24: their 10-day NEXUS window closes October 4, their 60-day window closes November 23, and their MAT referrals at release are still being compiled. Odyssey checks for out-of-county charges are also pending.	NEXUS initiation, engagement, and completion, MAT referrals at release, and out-of-county charges can't be fully reported for this quarter.	Report NEXUS measures one quarter behind: clients released in Q1 are reported in Q2. Group 103 (released July 16) NEXUS data, Group 104 MAT referrals at release, and Odyssey results will be included in Q2 as well.
Naltrexone is the only MAT started in custody. The intake screen identifies women already in a MAT program or with a naltrexone history, and the telehealth provider assesses for naltrexone. Screening for other forms of MAT is informal and is used to make referrals at release. No Group 104 participant was in a MAT program or on naltrexone at intake.	The SOW's MAT measure needs a definition that matches current practice.	Define MAT screening as the intake screen plus the naltrexone assessment. Count a participant as receiving MAT if she starts or continues naltrexone in custody, or is referred to community MAT at release when appropriate. MAT referrals at release will be recorded with each client's discharge referrals. Because naltrexone is currently the only MAT available in custody, other forms of MAT are provided through referral at release rather than during the

Issue	Impact	Proposed resolution
		residential period. In 2027, ASD will join the Just Health Plus Program, a Medicaid waiver pilot that includes MAT induction in custody and will allow other forms of MAT to be offered during the residential period.
12-month recidivism checks used local records only. The Q1 checks used SJCADC booking records (New World). Odyssey, which captures out-of-county charges, was not available to the staff member who ran the checks.	Out-of-county charges in months 7–12 may be undercounted for Group 98.	Staff with Odyssey access will run the 13 Group 98 graduates before the Q2 report, and any additional charges will be reported as a correction.
Data reconciliation during the transition to the new tracker. Staff found a mislabeled cohort, a duplicate entry for a treatment extension, two unrecorded participants, and several follow-up entries that counted probation violations or carried a charge into a later window.	Figures could have been over- or under-reported.	Corrected against source rosters and booking records, and three earlier follow-up entries are under review. Treatment extensions stay on one record, and each follow-up window counts only charges from that window.

Part 2: Logic model and performance data

Program logic model (SOW Section 4)

Problem statement: Female substance-abusing offenders in San Juan County lack access to intensive, gender-responsive treatment that reduces substance use, recidivism, and family disruption.

Stage	Components
Inputs	*Funding and staff:* Early Access Grant ($500,000 AXIS share); 2 FT counselors; 2 FT case managers; 1 PT peer mentor; Clinical Director and TSS; 3 FT detention staff; Deputy Director and Director (partial). *Facilities and tools:* jail-based residential facility; evidence-based curricula (CRA, MI);

Stage	Components
	clinical documentation and data systems; MAT capability in the jail setting. *Partners:* Drug, Mental Health, Family, and Pretrial courts; NWNMCOG (fiscal agent); SANE, FCC, DV Court, Four Corners HR; NEXUS EIOP aftercare providers.
Activities	*Residential treatment (60 days):* individual and group therapy (CRA, MI); trauma-informed, gender-responsive counseling; substance abuse and health education; 12-Step facilitation and peer support; MAT screening and administration; SMI screening and clinical assessment. *Life skills and workforce readiness:* life skills training (budgeting, parenting); resume and interview skills (Four Corners HR); community partner presentations (SANE, FCC, DV Court). *Aftercare (NEXUS EIOP):* intensive outpatient aftercare transition; case management and care coordination; housing, employment, and insurance referrals; 3-, 6-, and 12-month follow-up.
Outputs	*Service delivery:* minimum 50 unduplicated clients per year; 100% screened for SMI and MAT; 60-day treatment delivered per client; MAT administered to all appropriate participants. *Completion:* ≥90% of cohort graduates; ≥90% enter NEXUS within 10 days (2+ sessions); ≥80% attend 8+ NEXUS sessions within 60 days. *Reporting:* quarterly performance reports to NWNMCOG; annual program report with outcomes; final project report at contract close.
Short-term outcomes (0–6 months)	*Individual:* increased knowledge of substance abuse and recovery; improved coping and life skills; stabilization of co-occurring mental health conditions; motivation for sustained recovery. *Transition:* connection to NEXUS aftercare within 10 days; access to housing, employment, and insurance supports; strengthened family and social support systems.

Stage	Components
Long-term outcomes (6–24 months)	*Individual:* sustained recovery (≥3 months active recovery); reduced recidivism (<50% re-arrest at 3, 6, and 12 months); stable housing and employment; improved family relationships and parenting capacity. *Community:* reduced burden on the criminal justice system; strengthened regional behavioral health system; reduced community costs of substance abuse and incarceration.

Key assumptions: Participants are court-mandated and motivated to complete treatment. Community partners remain engaged and accessible. MAT availability continues within the jail setting. Adequate staffing levels are maintained. NEXUS EIOP remains funded and operational.

External factors: Housing market availability; transportation barriers; family support networks; employment availability; continued legislative and state funding; managed care organization engagement.

Q1 performance data

The table below lists each SOW performance measure and logic model output, with the Q1 data where it's available and reportable.

Measure	Indicator	Target	Q1 result	Status
Clients served	Unduplicated clients active during the quarter	≥10 per quarter; ≥50 per year	15	Met
Treatment completion	% of entry cohort graduating AXIS	≥90%	100% (8 of 8, Group 104)	Met
SMI screening	% of participants screened for SMI	100%	100% (8 of 8)	Met
MAT screening	% of participants screened for MAT (intake screen + naltrexone assessment)	100%	100% (8 of 8); none in a MAT program or on naltrexone at intake	Met
MAT participation	% of appropriate participants receiving MAT (naltrexone in custody, or referral to	100%	1 of 8 identified as appropriate (history of naltrexone); 1 of 1 offered naltrexone in	In progress

Measure	Indicator	Target	Q1 result	Status
	community MAT at release)		custody (100%) and declined, so 0 started it; MAT referrals at release will be reported in Q2	
Aftercare initiation	% entering NEXUS EIOP with 2+ sessions in the first 10 days	≥90%	Reported in Q2	In progress
Aftercare engagement	% completing 8+ NEXUS sessions within 60 days of EIOP entry	≥80%	Reported in Q2	In progress
Aftercare completion	% of graduates completing NEXUS aftercare	≥60%	Reported in Q2	In progress
Recidivism, months 0–3	New charge, Group 102 (graduated 5/7/26)	<50%	0% (0 of 8)	Met
Recidivism, months 4–6	New charge, Group 101 (graduated 2/26/26)	<50%	0% (0 of 9)	Met
Recidivism, months 7–12	New charge, Group 98 (graduated 8/7/25)	<50%	15.4% (2 of 13)	Met
Output: 60-day treatment episode	Participants completing the 60-day episode	Delivered to each participant	15 graduates (6 on 7/16, 9 on 9/24)	Met
Output: MAT for appropriate participants	Appropriate participants offered or continuing MAT	100%	100% (1 of 1 appropriate participant offered	Met

Measure	Indicator	Target	Q1 result	Status
			naltrexone; she declined)	
Follow-up at 3, 6, 12 months	Scheduled follow-ups completed	Per evaluation plan	30 of 30 due	Met

Definitions and data sources

- **Clients served:** Clients admitted on or before the last day of the quarter who hadn't been discharged before its first day. Each person counts once, and a treatment extension stays on a single record. Source: AXIS program intake records.
- **Treatment completion:** Graduates divided by clients admitted during the quarter. Source: graduation records.
- **SMI screening:** The nurse intake screen and initial telepsychiatry evaluation. Source: clinical screening and medical records.
- **MAT screening and participation:** Naltrexone is the only MAT started in custody. Screening is the nurse intake screen, which records current MAT participation and naltrexone history, plus the telehealth provider's naltrexone assessment. Other MAT is screened informally and addressed through a referral at release. A participant counts as receiving MAT if she starts or continues naltrexone in custody, or is referred to community MAT at release. Source: medical records and discharge referrals.
- **Recidivism:** A new criminal charge; a probation violation alone doesn't count. Measured for AXIS graduates only, in three separate windows, with each charge counted once in the window where it occurred. The cohort is the graduates whose window ends during the quarter. Source: SJCADC booking records (New World); Odyssey review for the 12-month window is pending.
- **NEXUS measures:** NEXUS EIOP attendance and program records, reported one quarter after release.

Signatures

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