MEMORANDUM

TO: Chairs of the House Appropriations Committee
Chairs of the Senate Appropriations Committee
Chairs of the House Appropriations Subcommittee on Justice and Public Safety
Chairs of Senate Appropriations Subcommittee on Justice and Public Safety

FROM: Erik A. Hooks, Secretary *EAH*
Timothy D. Moose, Chief Deputy Secretary

RE: Substance Abuse Program Annual Report

DATE: March 1, 2020

Pursuant to G.S. 143B-707, the Division of Adult Correction of the Department of Public Safety shall report by March 1 of each year to the Chairs of the Senate and House Appropriations Committees and the Chairs of the Senate and House Appropriations Subcommittees in Justice and Public Safety on their efforts to provide effective treatment to offenders with substance abuse problems.

Please find the report for FY 2018-19 attached.

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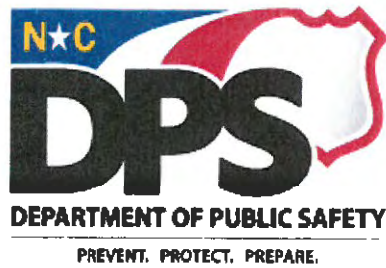4201 Mail Service Center
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**NC DEPARTMENT OF PUBLIC SAFETY – ADULT CORRECTION
DIVISION OF PRISONS**

**SUBSTANCE USE DISORDER TREATMENT
PROGRAMS ANNUAL REPORT
N.C.G.S. §143B-707**

March 1, 2020

Roy Cooper **Governor**	**Timothy D. Moose** **Chief Deputy Secretary**	**Erik A. Hooks** **Secretary**

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G.S. §143B – 707. Reports to the General Assembly.

The Division of Adult Correction of the Department of Public Safety shall report by March 1 of each year to the Chairs of the Senate and House Appropriations Committees and the Chairs of the Senate and House Appropriations Subcommittees in Justice and Public Safety on their efforts to provide effective treatment to offenders with substance abuse problems. The report shall include:

(1)   Details of any new initiatives and expansions or reduction of programs.

(2)   Details on any treatment efforts conducted in conjunction with other departments.

(3)   Utilization of the community-based programs at DART Cherry and Black Mountain Substance Abuse Treatment Center for Women.

(4), (5)   Repealed by Session Laws 2007-323, s.17.3 (a), effective July 1, 2007.

(6)   Statistical information on the number of current inmates with substance abuse problems that require treatment, the number of treatment slots, the number who have completed treatment, and a comparison of available treatment slots to actual utilization rates. The report shall include this information for each Department of Public Safety funded program.

(7)   Evaluation of each substance abuse treatment program funded by the Division of Adult Correction of the Department of Public Safety. Evaluation measures shall include reduction in alcohol and drug dependency, improvements in disciplinary and infraction rates, recidivism (defined as return-to-prison rates), and other measures of the programs' success.

EXECUTIVE SUMMARY

The mission of the Alcoholism and Chemical Dependency Programs Section (ACDP) is to deliver effective and comprehensive services to eligible North Carolina Department of Public Safety (NCDPS) offenders who meet criteria for a substance use disorder and are appropriate for treatment. Contemporary research demonstrates a high correlation between therapeutic interventions focused on an offender's substance use and a significant reduction in recidivism or re-arrest and subsequent re-incarceration.

ACDP continues to take significant strides in the implementation of evidence-based male and female programs, delivered by well-trained and clinically supervised professionals, in both community-based and prison-based treatment environments.

The fiscal year (FY) 2018-2019 statistical analysis conducted by the Office of Reentry Programs and Services demonstrate ACDP program success continues to rise, as described in the final section of this document. Most important is data demonstrating the substance use continuum effectively impacts the rate of recidivism among those who completed the program and indicates a constructive change in both addictive and criminal thinking patterns among participants.

As the field of substance use disorder services evolves, ACDP remains committed to ongoing self-evaluation and professional development. These efforts ensure offenders receive the latest evidence-based best practices. Program improvement initiatives are critical to this process.

ORGANIZATIONAL STRUCTURE

In early 2016, ACDP was realigned within the NCDPS Division of Prisons organizational structure to reside within Behavioral Healthcare Services. This realignment was in keeping with the mission of ACDP and parallels other state and federal entities in the management of vital healthcare resources and the provision of services.

TREATMENT NEEDS

ACDP utilizes the Substance Abuse Subtle Screening Inventory (SASSI) to screen new prison admissions at the diagnostic centers to identify inmates with a substance use problem and the appropriate level of treatment needed. Below is a statistical snapshot of the FY 2018-2019 prison admissions SASSI testing results:

- Of the 15,970 inmates screened, 73% or 11,625 indicated a need for intermediate or long-term substance use disorder treatment, which is a 1% increase from FY 2017-2018.

- Of the 2,480 adult female inmates screened, 83% or 2,058 indicated a need for intermediate or long-term substance use disorder treatment.

- Of the 12,500 adult male inmates screened, 71% or 8,934 indicated a need for intermediate or long-term substance use disorder treatment.

- Of the 990 youthful male inmates (under age 22) screened, 64% or 633 indicated a need for intermediate or long-term substance use disorder treatment.

TREATMENT RESOURCES

During the FY 2018-2019, ACDP resources provided one in four inmates the opportunity for placement in a long-term program and one in two inmates the opportunity for placement in an intermediate program. However, an in-depth analysis on page 9 outlines specific differences in program placement opportunities between male and female populations. The graph below reflects the number of inmate admissions from FY 2008-2009 through FY 2018-2019 identified as having a substance use problem during the admission process and the total number of daily treatment slots available to that population.

Graph 1
FY 2018-2019 Inmate Admissions Identified with a Substance Use Problem and Number of Daily Treatment Slots Available
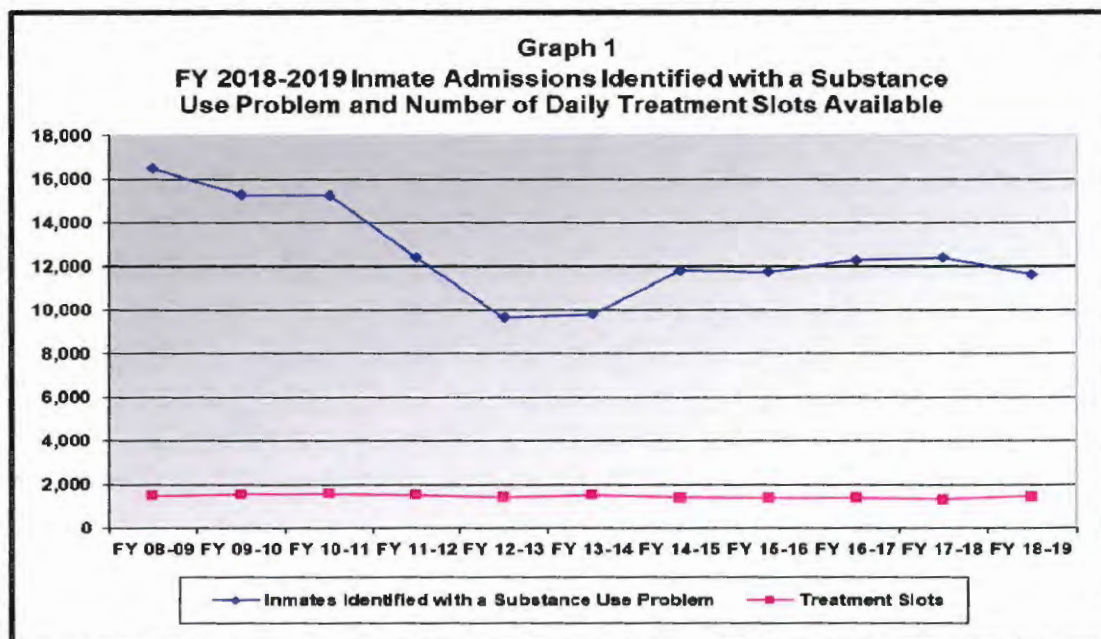
Without additional resources, the gap between the substance use disorder treated offender and the substance use disorder untreated offender will increase exponentially resulting in offenders returning to our communities without treatment. In the interest of public health and safety, ACDP will continue to strengthen its substance use disorder services offered to the offender population to the extent possible.

TREATMENT PROGRAM COSTS

The NCDPS Controller's Office computes agency and program costs annually. The figures below are for FY 2018-2019.

- The DART Cherry facility average cost per day per offender was $71.88.

- The Black Mountain Substance Abuse Treatment Center for Women facility average cost per day per offender was $161.30.

- The prison-based program average cost per day per inmate was $81.28, this cost estimation was calculated using the program and custody costs. The ACDP prison-based program per day per inmate cost was $18.50.

STAFF RECRUITMENT AND RETENTION

G.S. § 90-113.40 - Requirements for certification and licensure (September 2005), requires all substance use disorder professional be duly credentialed or registered and established a new clinical supervision requirement for clinical practice.

ACDP has effectively addressed the practice standards established in the legislation and is able to provide all clinical supervision and most training requirements for credentialing at no cost to the professional. However, competitive pressure remains between public and private providers for credentialed substance use disorder professionals, with the competition varying in different areas of the state. With this competitive pressure, it continues to be a challenge for ACDP to remain an attractive employment option, as professionals consider work within the prison environment, and limitations on compensation within the state personnel system.

Limited resources, staff recruitment challenges related to state salary guidelines, demanding work environments, and professional credentialing requirements remain obstacles to fulfilling the primary ACDP goal to provide effective treatment services to all offenders who show a demonstrated need.

The following page provides a summary of ACDP substance use disorder treatment programs by program type and length of treatment.

Table 1 – FY 2018-2019 ACDP Programs by Program Type, Target Population, and Program Length

Facility/Program		Treatment Slots	Length of Treatment
Community-Based Residential Treatment Programs			
Adult Male	DART Cherry	300	90 Days
Adult Female	Black Mountain Substance Abuse Treatment Center for Women	60	90 Days
	Total	360	
Prison-Based Intermediate Intensive Outpatient Treatment Programs			
Adult Male	Alexander Correctional Center (Intermediate)	100	90 Days
	Catawba Correctional Center	32	90 Days
	Craggy Correctional Center	68	90 Days
	Lincoln Correctional Center	32	90 Days
	Harnett Correctional Institution	33	90 Days
	Johnston Correctional Institution	68	90 Days
	Lumberton Correctional Institution	64	90 Days
	Pender Correctional Institution	106	90 Days
	Piedmont Correctional Institution (Minimum)	33	90 Days
	Rutherford Correctional Center	34	90 Days
Adult Female	NC Correctional Institution for Women (Intermediate)	68	90 Days
	Swannanoa Correctional Center for Women	64	90 Days
	Total	702	
Prison-Based Long-Term Intensive Outpatient Treatment Programs			
Adult Male	*Alexander Correctional Institution (Long-Term)	20	180-365 Days
	Dan River Prison Work Farm	68	180-365 Days
	*Greene Correctional Institution (RSAT)	64	120-180 Days
	Morrison Correctional Institution	88	180-365 Days
Youthful Male	Foothills Correctional Institution	32	180-365 Days
Adult Female	Neuse Correctional Institution	62	120-180 Days
	NC Correctional Institution for Women (Long-Term)	34	180-365 Days
	Total	368	
Community-Based Residential Treatment Programs		360	
Prison-Based Intensive Outpatient Treatment Programs		1070	
Total Treatment Slots		**1,430**	

* Alexander Correctional Institution long-term program began operations in February 2019.
* Greene Correctional Institution RSAT program began operations in March 2019.

INTRODUCTION AND OVERVIEW

ACDP is a major component of the North Carolina Department of Public Safety - Adult Correction, Division of Prisons. The mission of ACDP is to plan, administer, and coordinate substance use screening, assessment, and treatment services for offenders. Within ACDP, there are approximately 206 positions including state-level administrative staff, community-based office and program staff, and prison-based office and program staff. ACDP provides regular training and clinical supervision for clinical staff, encourages staff input regarding program development, and is committed to activities directed at leadership development for administration, community-based program, and prison-based program management teams.

BEST PRACTICE

ACDP implements programs that reflect "best practices" for treatment, as established by the National Institute on Drug Abuse (NIDA) and the national Substance Abuse and Mental Health Services Administration (SAMHSA). ACDP embraces programs based on cognitive-behavioral interventions, which challenge criminal thinking and confront the substance use identified by program participants and are proven to reduce recidivism. In addition, ACDP provides information and education on traditional recovery resources available to offenders while in prison and upon return to the community. The male programs utilize the Hazelden's evidence-based curriculum "A New Direction", emphasizing identification of destructive thinking patterns and replacement with constructive recovery-driven thoughts and actions. The female programs utilize gender specific, cognitive behavioral evidence-based material developed by the Federal Bureau of Prisons, along with material from Stephanie Covington, a pioneer in work with female criminal justice populations.

PROGRAM STRUCTURE

ACDP programs encompass three major service levels for offenders. There are two community-based residential treatment programs for probationers and parolees: DART Cherry for male offenders and Black Mountain Substance Abuse Treatment Center for Women (Black Mountain) for female offenders. The final two categories established for male and female inmates consist of intermediate and long-term intensive outpatient treatment programs within multiple prison facilities.

Unique to some ACDP treatment environments is the concept of a Modified Therapeutic Community as a core component of the treatment design. The Modified Therapeutic Community model views addiction as a disorder of the whole person and the treatment activities promote an understanding of criminal thinking in relation to substance use behavior and engage the offender in activities that encourage experiential and social learning. The offender community is the change catalyst, as offenders who are further along in treatment help others initiate the process of change.

The ACDP prison-based programs were originally designed to work with inmates at the beginning of their prison sentence. However, dating back to a 2002 Substance Abuse Advisory Council recommendation, ACDP now encourages treatment assignment consideration near the end of the offender's sentence, coinciding with other preparation for release and reintegration. Research-supported best practice findings suggest the release of offenders from treatment directly into the community is more beneficial to retaining treatment gains than to release offenders back into the general prison population.

SCREENING AND REFERRAL FOR PRISON–BASED PROGRAMS

Eligibility for prison-based treatment program placement is established during diagnostic processing. In 2003, ACDP implemented the Substance Abuse Subtle Screening Inventory (SASSI) as a severity indicator of a substance use disorder. The SASSI replaced earlier screening tools, the Chemical Dependency Screening Test (CDST) and the Short Michigan Alcoholism Screening Test (SMAST). ACDP selected the SASSI because it has a reputation as the "gold standard" of screening instruments. The SASSI was normed for the North Carolina prison population.

ACDP administers the SASSI to inmates during the diagnostic process and enters the recommended level of treatment into OPUS the DPS Offender Information System. The SASSI identifies the probability that an inmate has a substance use problem. SASSI testing has allowed ACDP to identify those offenders who need treatment, using scoring categories normed for ACDP ranging from 1 (no problem) to 5 (very serious problem). The range of scores with the ideal treatment recommendations are as follows:

SASSI Score	Recommendation	Program
1	No treatment	None
2	Intervention	None
3	Intermediate treatment	90 days
4	Intermediate/long-term treatment	90 -180 days
5	Long-term treatment	120-365 days

During FY 2018-2019, 15,970 newly admitted inmates, who had not been previously tested or scored below a 3 on previous tests, completed the SASSI. The SASSI identified 73% of the inmates screened needed intermediate or long-term treatment services (scores 3, 4, or 5) and an additional 15% needed substance use intervention. The differences in SASSI scores among the three demographic groups are presented in Table 2 below.

Table 2 – FY 2018-2019 Prison Entries and SASSI Scores

Inmate Group	SASSI Score				
	1	**2**	**3**	**4**	**5**
Adult Female	195 (8%)	227 (9%)	661 (27%)	802 (32%)	595 (24%)
Adult Male	1,591 (13%)	1,975 (16%)	5,295 (42%)	2,498 (20%)	1,141 (9%)
Youthful Male	174 (18%)	183 (18%)	290 (29%)	190 (19%)	153 (15%)
Totals	**1,960 (12%)**	**2,385 (15%)**	**6,246 (39%)**	**3,490 (22%)**	**1,889 (12%)**

Graph 1 reflects the percentage of SASSI scores of three or more by demographic group during the current and past five fiscal years indicating a need for intermediate or long-term treatment. The adult male demographic group demonstrated a slight increased need for treatment, whereas the female demographic group need for treatment remained the same and the youthful male demographic group need for treatment had a slight decrease from FY 2017-2018. The need for intermediate and long-term treatment for all three groups ranges from 64% to 83%.

Graph 2
**FY2018-2019 SASSI Scores of 3 or Above by Group**
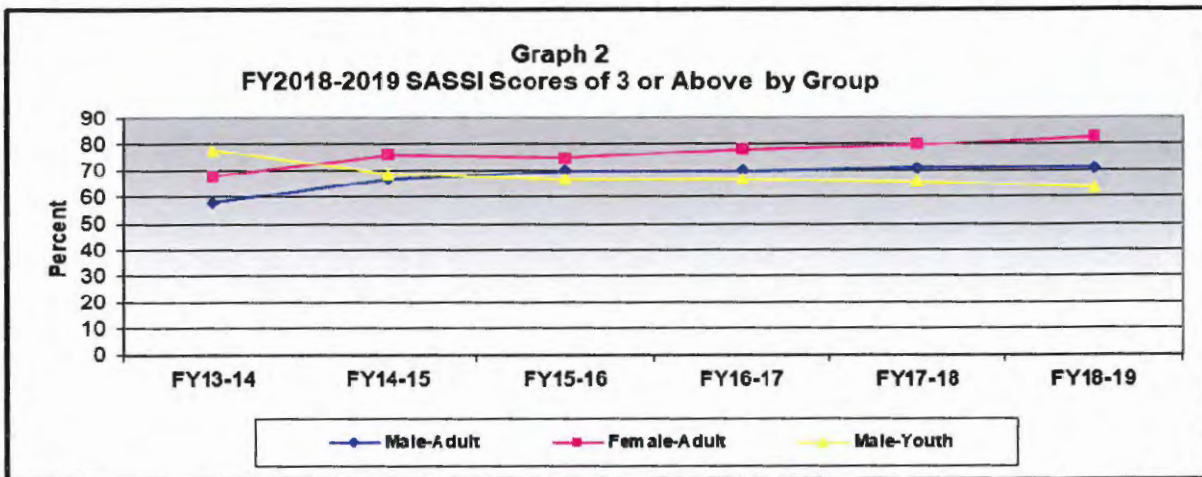
Graph 2 compares FY 2018-2019 prison admissions by demographic group and each group's SASSI score of three or more, indicating the need for intermediate or long-term substance use disorder treatment.

Graph 3
FY 2018-2019 Prison Admissions by Demographic Group
Needing Intermediate or Long-term Treatment
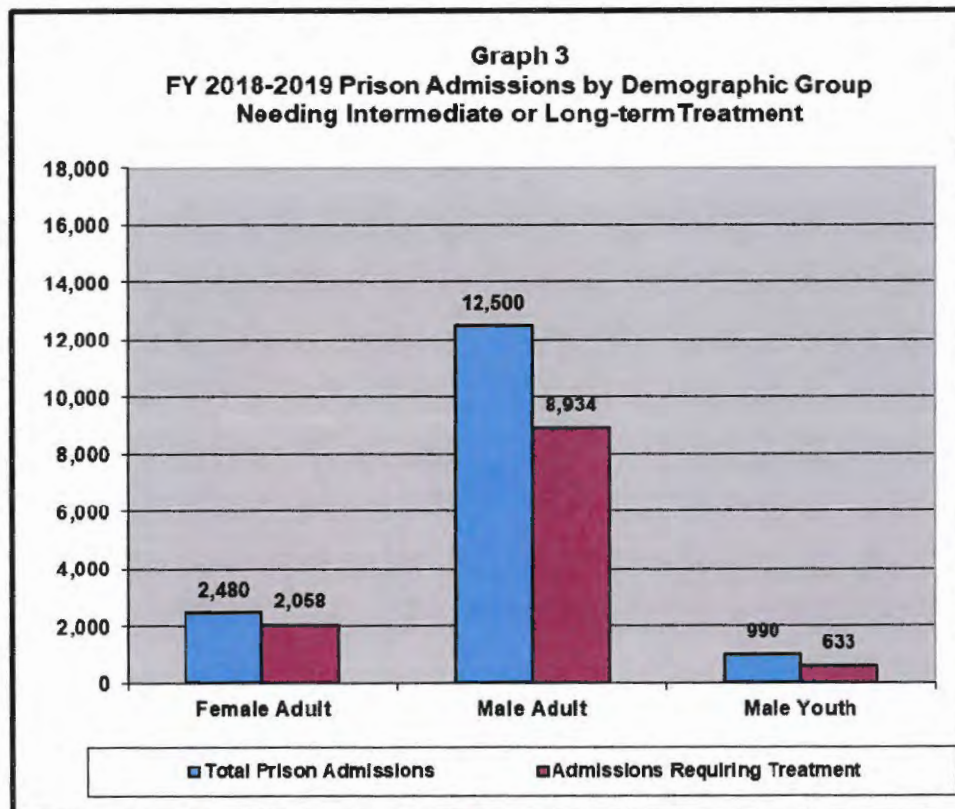
As reflected in Graph 2, the youthful male and adult female demographic groups have smaller admission numbers than the male population, however during FY 2018-2019 the female demographic group had a higher percentage of population in need of intermediate or long-term treatment services, 83% of adult female admissions. Although the percentage of adult male admissions needing treatment is smaller than the adult female demographic group, the actual number of adult males 8,934 is the largest overall pool of admissions in need of intermediate or long-term substance use disorder treatment services. As noted later in this report, only 16% of males and 25% of females in need of long-term treatment services have a chance of placement in a long-term treatment program.

Of all the prison admissions during FY 2018-2019, 92% completed the SASSI. As reflected in Graph 3, with the decrease in prison admissions in FY 2018-2019, SASSI screenings also experienced a slight decreased from 17,203 in FY 2017-2018 to 15,970 in FY 2018-2019. Approximately 8% of inmates were not screened due in part to a serious health condition or a score of 3 or higher on a previous SASSI.

Graph 4
FY 2018-2019 Reduced Prison Admissions and SASSI Screening
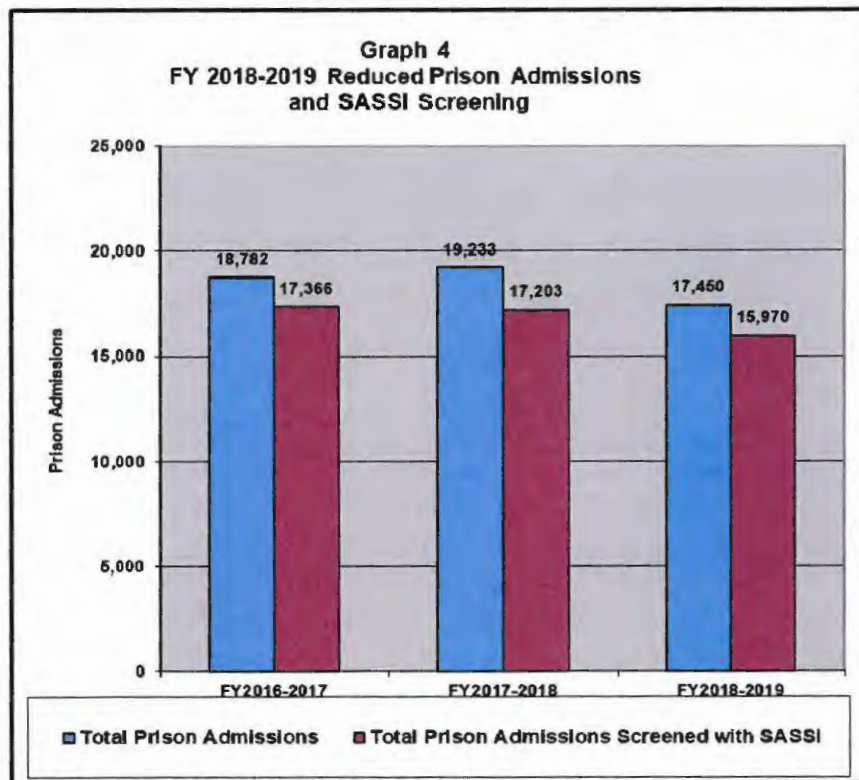
Prison case analysts assigned to the diagnostic centers use the SASSI scores entered by ACDP staff to determine priority for substance use disorder programming. A referral may be generated in OPUS by the case analyst if the inmate has a SASSI score of three or above providing prisons with an identified pool of inmates eligible for substance use disorder programming. Depending on program type and program space availability, some inmates who have completed the diagnostic process and are referred into the eligible pool will be transferred directly from the diagnostic center to a prison facility for ACDP program assignment. After arrival at the prison facility, the inmate is then assigned to the ACDP program on the *Inmate Activity Assignment* screen in OPUS. This is one of many opportunities for inmate assignment to an ACDP program.

Other inmates who have completed the diagnostic process and are eligible for substance use disorder programming are transferred to prisons and assigned to a prison unit case manager who may facilitate their transfer and assignment to an ACDP program, later during their incarceration, based on ACDP bed availability. There are instances where inmates are not referred due to the inmate's need for other programs, scheduling constraints, operational needs in prisons, or sentences which are shorter than available treatment.

SCREENING AND REFERRAL FOR COMMUNITY-BASED PROGRAMS
(DART Cherry and Black Mountain)

G.S. §15A-1343(b)(3) mandates that participation of probationers in a residential program must be based on a screening and assessment that indicates a substance use disorder. Professionals from Treatment Accountability for Safer Communities (TASC) complete the assessment in the community to determine appropriateness of assignment to a community-based facility.

For probationers and parolees, Judges may order participation in a community-based residential treatment program as a condition of probation or post-release supervision and the Parole Commission may order participation as a condition of parole. Eligible offenses include driving while impaired or other drug-related charges/convictions.

QUALITY ASSURANCE

- **Clinical Supervision** is a formal process of professional support and learning which enables individual clinicians to develop knowledge and competence to meet ethical, professional, and best-practice standards.   Clinical Supervision provides staff the opportunity to develop and improve clinical skills, thus enhancing work satisfaction, reducing work stress, and giving program participants the best possible treatment.   Clinical Supervision promotes quality clinical practice in addition to ensuring the safety and welfare of program participants.

  "Clinical supervision has become the cornerstone of quality improvement in the substance abuse treatment field. In addition to providing a bridge between the classroom and the clinic, clinical supervision improves client care, develops the professionalism of clinical personnel, and imparts to and maintains ethical standards in the field."
  SAMHSA –Substance Abuse and Mental Health Services Administration

  The Alcoholism and Chemical Dependency Programs Section recognizes Clinical Supervision as an essential component of good quality clinical service provision and expects all staff engaged in clinical interaction with offenders to receive regular clinical supervision by suitably qualified supervisors and/or clinical supervisors approved by the North Carolina Addictions Specialist Professional Practice Board (NCASPPB) and as required by North Carolina General Statute (G.S. §90-113.40).

- **Learning Labs**

All registrants and credentialed full or part-time counselors delivering substance use disorder services require Clinical Supervision. ACDP has approximately 115 employees who fall into this category. ACDP has developed the "Group Learning Lab" to provide another Clinical Supervision vehicle to meet the North Carolina Addictions Specialist Professional Practice Board (NCASPPB) expectation for clinical oversight of all providers of substance use disorder services, as required by North Carolina General Statute (G.S. §90-113.40).

The primary goal of the "Group Learning Lab" is to improve counselor skills in a process group setting. The lab is designed to provide three to four hours of Clinical Supervision monthly and may combine counselors from several programs affording them the opportunity to learn new methods of working effectively with various offenders. The design permits time for exploration of skills, teaching by master clinicians (LCAS and CCS), counselor role-plays, and feedback. This group format provides an excellent forum for counselors to practice skill development in a safe and supportive environment and to observe the modeling actions of how other counselors handle certain situations. ACDP implemented the "Group Learning Labs" in September 2009.

- **File Reviews**

To ensure compliance with the standards established for case management, electronic data entry, offender record content, quality and appropriateness of services delivered; ACDP, working in conjunction with NCDPS Management Information Systems (MIS) developed two formal treatment file review processes which may be utilized by ACDP; the Case File Review and the Peer Review. The data generated by each of these reviews enable ACDP to track the results of the established review elements thereby assisting management in the identification of areas that need additional attention, program strengths, job performance and training needs.

- **Program Evaluation Tools**

NOTE: A more in-depth discussion on program evaluation tools begins on page 29.

Brief Situational Confidence Questionnaire:

The Brief Situational Confidence Questionnaire (BSCQ) assesses an offender's self-confidence to resist the urge to drink heavily or use drugs in eight situations. The tool evaluates the increase or decrease in self-efficacy from two different times and provides program feedback.

"Individuals in recovery have very different levels of confidence regarding their ability (self-efficacy) to change and abstain from substances. Some are overly confident, while others feel hopeless about achieving sobriety or even reducing use. Self-efficacy, particularly with respect to capabilities for overcoming alcohol dependence or abuse is an important predictor of treatment outcomes. Self-efficacy questionnaires ask clients to rate how risky certain situations are and to estimate their confidence in how well they would do in avoiding the temptation to use substances in these situations. The numerical scores provide an objective measure of a client's self-efficacy for a specific behavior over a range of provocative situations." *Substance Abuse and Mental Health Services Administration (SAMHSA)*

ACDP implemented the BSCQ in the intermediate programs, long-term programs, and DART Cherry program in September 2009. Black Mountain implemented the BSCQ in November 2010.

Criminal Thinking Scales:

The Criminal Thinking Scale (CTS) was developed by the Institute of Behavioral Research at Texas Christian University in Dallas, Texas to provide criminal justice treatment providers with a brief and cost-effective tool for measuring the criminal thinking among offenders. Criminal justice literature highlights criminal thinking as one of several key determinates of an individual's willingness to commit crime both before and after criminal justice sanctions have been applied. The instrument uses six scales that represent distinct elements of anti-social cognitions and attitudes based on a national sample of male and female offenders. The results of the CTS survey provide treatment programs with a method to document the impact of program interventions and the change in offender thinking and attitudes that have been associated with drug use and criminal activity.

ACDP long-term programs implemented the CTS in FY 2007-2008. Intermediate programs and the DART Cherry program implemented the CTS in March 2010. Black Mountain implemented the CTS in November 2010.

- **Training**

  Trainings during FY 2018-2019 focused on enhancing professional development by providing approved hours for counselor certification/recertification. The ACDP trainer facilitated approximately 300 hours of training. The following training modules were offered during FY 2018-2019:

  1. Professional Ethics
  2. HIV, Aids and Sex Workers
  3. Stress and Time Management
  4. Back two Basic – Clinical Skills
  5. Clinical Documentation
  6. Marijuana Madness
  7. Medical Consequences
  8. CBT Review
  9. Anger Management and De-Escalation
  10. Crisis Intervention Techniques Refresher

Outside agencies with staff representation at ACDP trainings during FY 2018-2019:

1. NCDPS Psychiatric and Psychological Services
2. NCDPS Health Services-Nursing
3. NCDPS Health Services-Social Work
4. Division of Community Corrections
5. Treatment Accountability for Safer Communities (TASC)
6. Department of Health and Human Services
7. Department of Social Services
8. Federal Bureau of Prisons
9. Drug Treatment Court
10. Juvenile Justice
11. Local Community Colleges
12. Alcohol and Drug Services-Guilford
13. Coastal Horizons
14. Fellowship Hall
15. Youth in Transition
16. Youth Villages
17. Cognitive Connections

DETAILS OF NEW INITIATIVES, EXPANSIONS
OR REDUCTION OF PROGRAMS

NEW INITIATIVE AND PROGRAM EXPANSIONS

Neuse Correctional Institution: In July 2018, ACDP increased the Neuse Correctional Institution, 48 bed, adult female, 120-180-day, intensive outpatient program to 62 beds.

Swannanoa Correctional Center: In February 2019, ACDP increased the Swannanoa Correctional Center, 60 bed, adult female, 90-day, intensive outpatient program to 64 beds.

Alexander Correctional Institution: In February 2019, ACDP increased the Alexander Correctional Institution, 80 bed, adult male, 90-day, intensive outpatient program to 100 beds.

Alexander Correctional Institution: In collaboration with Prisons, ACDP selected Alexander Correctional Institution to house additional treatment slots. ACDP opened a 20 bed, adult male, 180-365-day, intensive outpatient program at Alexander Correctional Institution in February 2019.

Greene Correctional Institution: In collaboration with Prisons, ACDP selected Greene Correctional Institution to house the RSAT treatment slots formally based at Dan River Prison Work Farm.   ACDP opened a RSAT funded, 64 bed, adult male, 120-180-day, intensive outpatient program at Greene Correctional Institution in March 2019.

PROGRAM REDUCTIONS

There were no reductions in ACDP programs during FY 2018-2019.

DETAILS OF TREATMENT EFFORTS CONDUCTED
IN CONJUNCTION WITH OTHER DEPARTMENTS

North Carolina Department of Health and Human Services (NCDHHS); Division of Mental Health, Developmental Disabilities, and Substance Abuse (DD, MH, SAS); Justice System Innovations

The Alcoholism and Chemical Dependency Programs Section management continue to meet with NCDHHS as set forth in G.S. §148-19d and the Memorandum of Agreement between NCDHHS and the NCDPS. ACDP meets with NCDHHS on the proposed monitoring schedule, the tool used by NCDHHS for the evaluation of ACDP programs, and to receive NCDHHS feedback.

Each ACDP intensive outpatient and residential program is evaluated every two years. The evaluation includes a review of records, observations, and interviews with staff. The NCDHHS monitoring tool utilized during program evaluations is based on the expected practices from the American Correctional Association (ACA) Standards for Adult Correctional Institutions. Feedback from NCDHHS is used to improve treatment services provided by the Section.

North Carolina Department of Health and Human Services (NCDHHS); Division of Mental Health, Developmental Disabilities and Substance Abuse (DD, MH, SAS); Treatment Accountability for Safer Communities (TASC)

G.S. §15A-1343(b)(3) mandates that probationers in a residential treatment program must be screened and assessed for chemical dependency. Professionals from TASC complete the offender's assessment in the community to determine appropriateness for assignment to either DART Cherry for male offenders or Black Mountain for female offenders. TASC professionals work closely with both community-based treatment facilities to determine if an offender is appropriate for residential treatment. TASC assessments include a summary of the offender's medical and psychiatric conditions and any current prescribed medications. Upon release from either residential facility, the TASC professional is instrumental in ensuring offenders have access to outpatient treatment providers upon their return to the community.

UTILIZATION OF THE COMMUNITY-BASED PROGRAMS AT DART CHERRY AND BLACK MOUNTAIN SUBSTANCE ABUSE TREATMENT CENTER FOR WOMEN

COMMUNITY-BASED RESIDENTIAL TREATMENT

The Alcoholism and Chemical Dependency Programs Section has two community-based residential treatment facilities, DART Cherry and Black Mountain.

Judges may order participation in a community-based residential treatment program as a condition of probation or post-release supervision and the Parole Commission may order participation as a condition of parole. As noted on the previous page, G.S. §15A-1343(b)(3) mandates that participation of probationers in a residential program must be based on a screening and assessment that indicates a substance use disorder. Professionals from Treatment Accountability for Safer Communities (TASC) complete the assessment in the community to determine appropriateness.

Both programs are dedicated to a holistic treatment approach and address individual needs in six major life areas: (1) alcohol and drug use, (2) medical and physical health, (3) education and vocational, (4) family/social, (5) legal status and (6) psychological and mental health diagnosis. Facility counselors are trained in substance use disorder recovery principles and are licensed, certified, or registered with appropriate state counseling practice boards. Upon completion of a community-based residential treatment program, the offender's counselor develops a comprehensive aftercare plan. The aftercare plan is included in the case file material which is returned to the offender's supervising probation/parole officer to assist with continued treatment follow-up in the community.

The ACDP community-based facilities do not have detoxification units. Offenders requiring intensive detoxification including hospital accommodations/monitoring are not appropriate for assignment to a residential treatment bed (including priority beds) at a community-based facility.

DART CHERRY

DART Cherry is a 300-bed community-based residential facility located in Goldsboro, NC providing substance use disorder treatment services to male probationers and parolees. During FY 2018-2019, the facility had 1,411 admissions into the program as noted in Table 3. DART Cherry has monthly enrollments and exits.

The facility has three 90-day Modified Therapeutic Community programs in separate buildings, each with 100 treatment beds. The Modified Therapeutic Community model views addiction as a disorder of the whole person. Treatment activities promote an understanding of criminal thinking in relation to substance use behavior and engage the offender in activities that encourage experiential and social learning. The offender community is the main catalyst in bringing about change. The Modified Therapeutic Community programs admit three cohorts of offenders through the 90-day period. This entry style allows the more senior offenders to provide a positive and guiding influence on new offenders coming into the program. DART Cherry also maintains five treatment slots that are designated as "priority beds" available for probationers or parolees who are experiencing problems related to severe substance use and need immediate admission to the 90-day residential treatment program.

Table 3 – FY 2018-2019 DART Cherry Enrollments

Program Type and Type of Supervision	Offenders Enrolled	Percent of Annual Enrolled
90-day Parole	20	1%
90-day Probation	1391	99%
Totals	1,411	100%

Table 4 below presents the exits from DART Cherry for FY 2018-2019. Completions, or the satisfactory participation in the program for the required number of treatment days, represented 68% of the exits. When compared to FY 2017-2018, Absconded/Withdrawn remained the same, Completions experienced a decrease from 71%, Inappropriate for Treatment experienced an increase from 4%, Other remained the same, Removed/Discipline experienced an increase from 11%, and Transferred/Released experienced an increase from 1%.

Table 4 – FY 2018-2019 DART Cherry Exits

Exit Reason	90-Day Program	
Absconded/Withdrawn	144	12%
Completed	806	68%
Inappropriate for Treatment	62	5%
Other	15	1%
Removed/Discipline	137	12%
Transferred/Released	20	2%
Totals	1,184	100%

DART Cherry Additional Programming

During FY 2018-2019, the following career and personal enrichment classes were provided to DART Cherry residents through a partnership with Wayne Community College (WCC).

Basic Skills Class
The participants who successfully complete the Basic Skills Class are eligible to test for their High School Equivalency Test (HiSET). By completing this test, participants will earn their High School Diploma, which may lead to attending college and/or obtaining a better job.

WCC conducted 46 Basic Skills Classes, with 718 participants enrolled. A total of 60 participants graduated and obtained their High School Equivalency Diploma.

Employment Readiness Program (ERP)
The ERP class provides participants basic job readiness training with step-by-step instructions for conducting a job search, interviewing skills, and tips for making a good first impression. It also reviews how to complete an application, resume guidelines, preparing for the interview, and workplace basics. The ERP class covers interpersonal skills, teamwork, communication, integrity, professionalism, problem solving, decision making, dependability, information processing, adaptability, and an introduction to entrepreneurship. Upon completion, participants may test for the National Career Readiness Certificate which assesses three areas: reading for information, locating information, and applied mathematics.

WCC conducted 33 total classes, with 607 participants successfully completing the class. A total of 104 participants were tested and 90 earned a National Career Readiness Certificate.

Working Smart
Working Smart is designed to fine-tune non-technical, critical employability skills that are essential in today's workplace. These transferable skills are vital in any industry or occupation and are often among the deciding factors in employee selection and promotion. Participants enjoy an interactive, hands-on learning experience and earn a portable credential upon successful completion.

WCC conducted 73 total classes, with 894 participants successfully completing the class.

Employability Success
This course is designed to provide non-technical, critical employability skills that are essential in today's workplace. These skills are vital in any industry or occupation and are often among the deciding factors in employee selection and promotion. Participants have an interactive, hands-on learning experience and will be evaluated on skills such as applications, resumes, and interviewing skills. Training includes lecture and hands-on activities with evaluation based on attendance, class participation, and demonstration of skills.

WCC conducted 73 total classes, with 948 participants successfully completing the class.

BLACK MOUNTAIN SUBSTANCE ABUSE TREATMENT CENTER FOR WOMEN

Black Mountain is a 60-bed community-based residential facility located in Black Mountain, NC providing substance use disorder treatment services to female probationers and parolees. During FY 2018-2019, the facility had 314 admissions into the program as noted in Table 5. Black Mountain has weekly enrollments and exits.

The facility's treatment activities encourage healthy social living skills, integrate cognitive-behavioral interventions using the core curriculum "Residential Drug Abuse Program", provide motivational enhancement therapy, utilize selected material from Stephanie Covington's work addressing women's recovery/trauma, and introduce the program participants to a variety of self-help recovery groups.

Table 5 – FY 2018-2019 Black Mountain Enrollments

Program Type and Type of Supervision	Offenders Enrolled	Percent of Annual Enrolled
90-day Parole	15	5%
90-day Probation	299	95%
Totals	314	100%

Table 6 below presents the exits from Black Mountain for FY 2018-2019. Completions, or the satisfactory participation in the program for the required number of treatment days, represented 74% of the exits. When compared to FY 2017-2018, Completions experienced a decrease from 85%, Absconded/Withdrawn experienced an increase from 3%, Inappropriate for Treatment experienced an increase from 5%, Other experienced an increase from 1%, and Removed/Discipline experienced an increase from 6%.

Table 6 – FY 2018-2019 Black Mountain Exits

Exit Reason	90-Day Program	
Absconded/Withdrawn	15	6%
Completed	194	74%
Inappropriate for Treatment	22	8%
Other	10	4%
Removed/Discipline	21	8%
Totals	262	100%

Black Mountain Additional Programming

During FY 2018-2019, the following career and personal enrichment classes were provided to Black Mountain residents through partnership with Asheville-Buncombe Technical Community College (AB Tech).

Hospitality (Certification Class)
The Hospitality class utilizes industry and local hospitality standards and practices to provide participants with the fundamental knowledge and practical skills necessary for successful employment in entry-level hospitality positions. Upon successful completion, the participants receive a nationally recognized certificate in the hospitality field. This certificate will assist with obtaining gainful employment.

AB Tech conducted classes allowing 63 students to successfully complete the class and pass a test which allowed each student to earn two nationally recognized certifications for a total of 126 certificates.

ServSafe Food Handler (Certification Class)
The ServSafe program prepares participants for the ServSafe Food Handler Certification exam. Training covers the importance of food safety, good personal hygiene, cleaning and sanitizing, food safety regulations, safe food preparation, cooking, time and temperature control, preventing cross-contamination, methods of thawing, cooling and reheating food, receiving and storing food, and more. Upon successful completion, the participants receive a certificate that will assist with obtaining gainful employment.

AB Tech conducted classes allowing 160 students to successfully complete the course and earn their nationally recognized certificates.

Money Smart
The Money Smart class focuses on practical matters, such as banking, saving, budgets, retirement funds, and investing. The class also covers the substance use problems surrounding money, such as delayed gratification, self-sabotage, and spending triggers.

AB Tech conducted classes allowing 56 students to successfully complete the course and earn an AB Tech Certificate.

Computer Basics
The Computer Basics class participants learn the parts of a computer and how they work together, basic keyboarding, using a mouse or touchpad, opening and closing applications, using common programs (Notepad and Microsoft Office), internet basics, internet safety, and email etiquette. By the end of the course, each participant composes and saves a resume to a flash drive. The flash drives are kept in the participant's transition folder for their transition back into the community.

AB Tech conducted classes allowing 92 students to successfully complete the course and earn an AB Tech Certificate.

Working Smart
Working Smart is designed to fine-tune non-technical, critical employability skills that are essential in today's workplace. These transferable skills are vital in any industry or occupation and are often among the deciding factors in employee selection and promotion. Participants enjoy an interactive, hands-on learning experience and earn a portable credential upon successful completion.

AB Tech conducted classes allowing 52 students to successfully complete the course and earn an AB Tech Certificate.

Pathways to Employment
The Pathways to Employment participants learn how to get and keep a job. The course covers resumes, cover letters, networking, job preparation, interviewing, dress/body language, resources, starting your own business, and working with others.

AB Tech conducted classes allowing 59 students to successfully complete the course and earn an AB Tech Certificate.

STATISTICAL INFORMATION ON EACH DIVISION OF ADULT CORRECTION PROGRAM: THE NUMBER OF CURRENT INMATES WITH A SUBSTANCE USE PROBLEM REQUIRING TREATMENT, NUMBER OF TREATMENT SLOTS, NUMBER OF INMATES WHO HAVE COMPLETED TREATMENT, AND A COMPARISON OF AVAILABLE TREATMENT SLOTS TO ACTUAL UTILIZATION RATES

INTERMEDIATE TREATMENT PROGRAMS

In the beginning of FY 2018-2019, ACDP 90-day intermediate treatment programs were available in 12 prison facilities across the state. ACDP was able to maintain intermediate treatment programs in 12 prison facilities through the fiscal year. Intermediate programs begin with a mandatory orientation period, where ACDP staff members conduct assessments to confirm the inmate's need for treatment. After the orientation period and depending upon the results of the assessment and the inmate's level of motivation, the inmate may opt to leave the program. Otherwise, the inmate will continue through the treatment process. Treatment includes lectures, group counseling, individual counseling, and is designed to break through denial about the substance use problems and introduce the inmate to recovery-based thinking and actions.

Table 7 below presents data on the enrollment into the ACDP intermediate programs. Most of the programs are open-ended, and the weekly enrollments and exits are coordinated with prison transfer schedules. This coordination results in fluctuations in the number of inmates enrolled in the treatment program.

The overall capacity utilization rate for intermediate programs had an increase from 79% in FY 2017-2018 to 83% in FY 2018-2019. Additional information on these programs is provided in Table 7 below.

Table 7 – FY 2018-2019 Enrollment in Intermediate Prison-Based Programs

Facility	Treatment Slots	Annual Enrollment	Average Daily Enrollment	Days with Inmates	Capacity Utilization Rate (%)
NC Correctional Institution for Women	68	298	53	365	78%
Piedmont Correctional Institution (Min)	33	193	27	365	82%
Harnett Correctional Institution	33	163	25	365	76%
Pender Correctional Institution	106	540	80	365	75%
Johnston Correctional Institution	68	330	56	365	82%
Lumberton Correctional Institution	64	248	43	365	67%
Lincoln Correctional Center	32	189	27	365	84%
Catawba Correctional Center	32	221	27	365	84%
Craggy Correctional Center	68	451	59	365	87%
Swannanoa Correctional Center for Women	60	340	58	365	97%
Rutherford Correctional Center	34	198	30	365	88%
Alexander Correctional Center	80	531	78	365	98%
Totals	**678**	**3,702**	**562**		**83%**

The total annual enrollment for intermediate programs increased from 3,613 in FY 2017-2018 to 3,702 in FY 2018-2019. As noted earlier in this report, the overall capacity utilization rate may have been affected by the following program expansions/reductions/closures and available staffing:

Swannanoa Correctional Center: In February 2019, ACDP increased the Swannanoa Correctional Center, 60 bed, adult female, 90-day, intensive outpatient program to 64 beds.

Alexander Correctional Institution: In February 2019, ACDP increased the Alexander Correctional Institution, 80 bed, adult male, 90-day, intensive outpatient program to 100 beds.

Intermediate Treatment Need Compared to Treatment Availability

Since FY 2012-2013, an annual assessment of the supply and demand for intermediate substance use disorder treatment services has been completed to compare the number of intermediate treatment slots available to the number of inmates in need of intermediate services. As shown in Table 8 below, male inmates in need of intermediate treatment had a 54% chance of being assigned to an ACDP intermediate treatment program during FY 2018-2019. While these statistics reflect the need versus availability for the particular reporting year, the actual number of offenders requiring treatment grows exponentially as new inmates enter the system.

**Table 8 – FY 2018-2019 Yearly Need to Yearly Supply for Intermediate
Substance Use Disorder Treatment Slots by Gender and Program Type**

Gender	Program Type	Yearly Treatment Slots	Yearly Treatment Need	Chance of Program Placement
Females	Intermediate	558	661	84%
Males	Intermediate	2,916	5,295	54%
	Total	3,474	6,056	57%

The need for intermediate substance use disorder treatment services for males is significant within the prison population and presents a major challenge to ACDP. Female inmates in need of intermediate treatment have a better chance for placement.

Table 9 – FY 2018-2019 Exits from Intermediate ACDP Programs

Type of Exit	Number of Exits	Percent of all Exits
Completion	1,693	61%
Inappropriate for Treatment	123	5%
Other	142	5%
Removed/Discipline	390	14%
Transferred/Released	153	6%
Withdrawal	260	9%
Total	2,761	100%

Table 9 above presents the exits from the ACDP intermediate treatment programs. Of all exits from the programs, 61% were completions - the satisfactory participation in the program for the required number of treatment days. The completions decreased from 65% in FY 2017-2018 to 61% in FY 2018-2019. All other exit types are defined below.

- <u>The Inappropriate for Treatment exit type increased from 3% in FY 2017-2018 to 5% in FY 2018-2019</u>: This exit type consists of inmates who did not meet the clinical criteria for treatment at the program as determined by the assessment process. When inmates are assigned to a treatment program, program staff conducts a thorough assessment of the inmate's treatment needs.

- <u>The Other exit type increased from 4% in FY 2017-2018 to 5% in FY 2018-2019</u>: This exit type consists of inmates who were demoted or promoted to another custody level requiring the inmate's reassignment to another prison facility, inmates who died, or inmates who were assigned to the program in error.

- <u>The Removed/Discipline exit type decreased from 15% in FY 2017-2018 to 14% in FY 2018-2019</u>: This exit type consists of inmates who were removed from the treatment program by staff for administrative reasons or due to the inmate's behavior.

- <u>The Transferred/Released exit type increased from 4% in FY 2017-2018 to 6% in FY 2018-2019</u>: This exit type occurs when the inmate is moved to another prison facility (i.e., medical) or was released from prison due to coming to the end of their prison sentence.

- <u>The Withdrawal exit type remained the same at 9%</u>: At the end of the orientation period, the inmates may elect to continue or withdraw from the program. This exit type is made up of inmates who voluntarily withdrew from the treatment program against staff advice at the end of the orientation period or later during the treatment period. These inmates are referred to their Prison Case Manager for an alternative assignment.

LONG-TERM TREATMENT PROGRAMS

In the beginning of FY 2018-2019, ACDP long-term treatment programs were available in 5 prison facilities across the state with program lengths ranging from 120 to 365 days. With the Alexander Correctional Institution program beginning operations in February 2019 and the Greene Correctional Institution program beginning operations in March 2019, ACDP was able to increase the long-term treatment programs availability to 7 prison facilities through the fiscal year. These programs are best indicated for inmates who need intensive treatment as indicated by a SASSI score of 4 or 5, with a substance use history that is lengthy, severe, and those with multiple treatment episodes. Long-term programs begin with a mandatory orientation period, where ACDP staff members conduct assessments to confirm the inmate's need for treatment. After the orientation period and depending upon the results of the assessment and the inmate's level of motivation, the inmate may opt to leave the program. Otherwise, the inmate will continue through the treatment process. Long-term treatment programs address substance use problems and criminal thinking issues throughout the treatment process and utilize a Modified Therapeutic Community model within the correctional environment. All long-term programs are back-end loaded, meaning, inmates leave prison immediately or as soon as possible after successful completion the program.

The overall capacity utilization rate for long-term programs increased from 83% in FY 2017-2018 to 87% in FY 2018-2019. Annual enrollment figures for each long-term prison-based program are listed in Table 10 below.

Table 10 – FY 2018-2019 Enrollment in Long-Term Prison-Based Treatment Programs

Facility	Treatment Slots	Annual Enrollment	Average Daily Inmates	Days with Inmates	Capacity Utilization Rate (%)
NC Correctional Institution for Women	34	120	29	365	89%
Neuse Correctional Institution	62	309	56	354	90%
Dan River PWF	68	187	64	365	94%
Foothills Correctional Institution	32	152	28	365	84%
Morrison Correctional Institution	88	308	72	365	82%
Greene Correctional Institution	64	112	59	101	92%
Alexander Correctional Institution	20	33	16	175	80%
Totals	**368**	**1,221**	**324**		**87%**

The total annual enrollment for long-term programs increased from 933 in FY 2017-2018 to 1,194 in FY 2018-2019. As noted earlier in this report, the overall capacity utilization rate may have been affected by the following program expansions/reductions/closures and available staffing:

Neuse Correctional Institution: In July 2018, ACDP increased the Neuse Correctional Institution, 48 bed, adult female, 120-180-day, intensive outpatient program to 62 beds.

Alexander Correctional Institution: In collaboration with Prisons, ACDP selected Alexander Correctional Institution to house additional treatment slots. ACDP opened a 20 bed, adult male, 180-365-day, intensive outpatient program at Alexander Correctional Institution in February 2019.

Greene Correctional Institution: In collaboration with Prisons, ACDP selected Greene Correctional Institution to house the RSAT treatment slots formally based at Dan River Prison Work Farm.   ACDP opened a RSAT funded, 64 bed, adult male, 120-180-day, intensive outpatient program at Greene Correctional Institution in March 2019.

Long-Term Treatment Need Compared to Treatment Availability

An initial assessment of supply and demand for long-term substance use disorder treatment was completed for FY 2006-2007 to compare the number of long-term treatment slots available to the number of inmates within the prison population in need of long-term substance use disorder treatment.   ACDP continued this assessment in FY 2018-2019 for comparative purposes.

The need for long-term substance use disorder treatment services is significant within the prison population and presents a challenge to ACDP. Long-term treatment need continues to exceed long-term treatment supply.

As shown in Table 11 below the largest gap exists in long-term treatment slots available for male inmates and the number of male inmates in need of treatment. During FY 2018-2019, female inmates had a 25% chance, and male inmates had a 28% chance of being assigned to a long-term treatment program. While these statistics reflect the need versus availability for the particular reporting year, the actual number of offenders requiring treatment grows exponentially as new inmates enter the system.

Table 11 – FY 2018-2019 Yearly Need to Yearly Supply for Long-Term Substance Use Disorder Treatment Slots by Gender and Program Type

Gender	Program Type	Yearly Treatment Slots	Yearly Treatment Need	Chance of Program Placement
Females	Long-term	349	1,397	25%
Males	Long-term	1,012	3,639	28%
Totals		1,361	5,036	27%

Table 12 – FY 2018-2019 Exits from Long-Term Treatment Programs

Type of Exit	Number of Exits	Percent of all Exits
Completion	281	34%
Inappropriate for Treatment	20	2%
Other	57	7%
Removed/Discipline	220	27%
Transferred/Released	65	8%
Withdrawal	186	22%
Totals	829	100%

Table 12 above presents the exits from the ACDP long-term treatment programs. Of all the exits from the programs, 34% were completions - the satisfactory participation in the program throughout the treatment process. The completions decreased as 41% of exits were completions in FY 2017-2018. All other exit types are defined below.

- The Inappropriate for Treatment exit type decreased from 3% in FY 2017-2018 to 2% in FY 2018-2019: This exit type consists of inmates who did not meet the clinical criteria for treatment at the program as determined by the assessment process. When inmates are assigned to a treatment program, program staff conducts a thorough assessment of the inmate's treatment needs.

- The Other exit type increased from 3% in FY 2017-2018 to 7% in FY 2018-2019: This exit type consists of inmates who were demoted or promoted to another custody level requiring the inmate's reassignment to another prison facility, inmates who died, or inmates who were assigned to the program in error.

- The Removed/Discipline exit type increased from 24% in FY 2017-2018 to 27% in FY 2018-2019: This exit type consists of inmates who were removed from the treatment program by staff for administrative reasons or due to the inmate's behavior.

- The Transferred/Released exit type increased from 6% in FY 2017-2018 to 8% in FY 2018-2019: This exit type occurs when the inmate is moved to another prison facility or was released from prison due to coming to the end of their prison sentence.

- The Withdrawal exit type decreased from 24% in FY 2017-2018 to 22% in FY 2018-2019: At the end of the orientation period, the inmates may elect to continue or withdraw from the program. This exit type is made up of inmates who voluntarily withdrew from the treatment program against staff advice at the end of the orientation period or later during the treatment period. These inmates were referred to their Prison Case Manager for an alternative assignment.

The prison-based long-term treatment programs have the highest percentage of exits due to removals and withdrawals. During FY 2018-2019, Greene Correctional Institution and Morrison Correctional Institution had the highest removal rates. Dan River Prison Work Farm and Greene Correctional Institution had the highest withdrawal rate. These are the longest treatment programs with more opportunity for an inmate to be charged with a disciplinary infraction unrelated to the program. Additionally, the population served is a significant factor in that higher-risk inmates are assigned to these programs. Within the long-term programs, there are occasions where inmates receive disciplinary infractions and can return to the program; however more serious or disruptive behaviors can result in a final exit due to disciplinary reasons.

EVALUATION OF EACH SUBSTANCE USE DISORDER PROGRAM FUNDED BY THE DIVISION OF ADULT CORRECTION BASED ON: REDUCTION IN ALCOHOL AND CHEMICAL DEPENDENCY, IMPROVEMENTS IN DISCIPLINARY AND INFRACTION RATES, RECIDIVISM (DEFINED AS RETURN-TO-PRISON RATES), AND OTHER MEASURES

ALCOHOLISM AND CHEMICAL DEPENDENCY PROGRAMS EVALUATION MEASURES

PURPOSE AND EXECUTIVE SUMMARY

Annually, since the 2007 legislative session, the North Carolina General Assembly has required an evaluation of each substance use disorder treatment program funded by the Department (ACDP). The legislation specified that measures of reduction in alcohol and drug dependency, improvements in disciplinary and infraction rates, and recidivism (defined as return-to-prison rates) should be included in the annual report. This report presents statistics for each of the ACDP programs on the required measures for FY 2018-2019.

All ACDP programs were evaluated jointly by program type. The programs include DART Cherry and Black Mountain, both community-based residential facilities for probationers and parolees; prison-based intermediate outpatient treatment programs, which has a 90-day length of stay and accommodates inmates with serious substance use disorder issues; and long-term outpatient treatment programs, which varies in length from 120 to 365 days, serving inmates with a need for intensive substance use disorder treatment services.

REDUCTION IN ALCOHOL AND CHEMICAL DEPENDENCY

ACDP evaluated reduction in alcohol and drug dependency using a repeated measures design, which is a comparison of pre- and post- intervention testing results. ACDP uses the *Brief Situational Confidence Questionnaire* (BSCQ) to measure change in alcohol and drug dependency. Offenders who exited ACDP programs in FY 2018-2019 universally improved their confidence to resist the urge to drink heavily or use drugs in a variety of situations. At the community-based programs, confidence scores moved from the low 50s into the low 70s confidence range. In the prison-based intermediate programs, confidence increases were more modest compared to the community-based residential programs, mostly due to the higher-levels of confidence reported at entry to the program by these participants. Inmates participating in the prison-based long-term treatment programs and with the most severe substance use issues had the most modest improvement, yet the increases in confidence for this population were statistically significant in all sampled circumstances. For participants in all programs, rated confidence at entry to the programs in the ability to resist urges to drink were rated lowest, but participant confidence increased significantly and substantially at program exit. For each situation in which the participant might be in a situation to use drugs or alcohol, rated confidence at program exit to resist use was statistically significantly higher compared to entry.

The BSCQ is a measure that is relevant to the treatment model and provides a consistent measure that can be used on all inmates assigned to programs. The BSCQ asks participants to imagine themselves as they are now in each of eight situations. They are then asked to indicate on a scale how confident they are that they can resist the urge to drink heavily or to use drugs in each of the situations. Each of the eight scale situations consists of a line, anchored by 0% ("not at all confident") to 100% ("totally confident") and participants are asked to place an "X" along the line, from 0% to 100%. Because the BSCQ is a state measure, assessing self-efficacy at various points during treatment, it allows for an evaluation of increases or decreases in self-efficacy as a function of the intervention. ACDP assessed situational confidence at entry and exit.

IMPROVEMENTS IN DISCIPLINARY AND INFRACTION RATES

ACDP evaluated improvement in disciplinary and infraction rates with a repeated measures design, which is a comparison of disciplinary actions that were taken pre- and post- intervention. For inmates who completed prison-based long-term programs in FY 2018-2019 and remained in prison after exiting treatment, the number of infractions remained steady after treatment. Otherwise, neither the rate of infractions nor the severity of infractions committed by inmates who remained in prison after exiting the programs were significantly reduced by program participation. Rather, infractions generally increased post-treatment over pre-treatment. However, inmates who successfully completed prison-based intermediate treatment reduced the severity of infractions when compared to inmates who dropped out of these programs.

These results are not surprising since infractions are one of the primary reasons inmates are removed from programming. However, inmates who exit prison cannot be evaluated on this measure because they are no longer in prison. Furthermore, ACDP incorporates an additional measure of change in inmate behavior that can be used on all inmates assigned to programs. The results of changes in criminal attitudes and thinking are presented in the "Other Measures of Programs' Success" portion of this section.

RETURN-TO-PRISON RATES

A base rate calculation measures recidivism by simply observing exits from a program and calculating a rate of return-to-prison for that group. However, this calculation does not provide a complete picture of program effectiveness because it fails to consider differences among inmates that indicate who is more likely to return to prison. More specifically, base rate calculations cannot account for severity of substance use disorders, family and criminal history, and other interventions that the inmate may have completed while incarcerated. For these reasons, ACDP evaluated each program's impact on recidivism (defined as a return to prison within 3 years) using statistical techniques that consider potential differences among inmates and create equivalent groups appropriate for comparison. This method not only shows when completion of an ACDP program impacts the likelihood of return-to-prison, but also allows for comparison of program participants with inmates not assigned to an ACDP program. Because these techniques (i.e., propensity score analysis) produce a matched subset of inmates, summary statistics using base rate calculations or alternate methodologies for determining return-to-prison rates may produce different figures.

For FY 2018-2019, ACDP evaluated the three-year return-to-prison rates for FY 2015-2016 inmates that exited from prison-based programs by gender, including inmates who exited DART Cherry and Black Mountain as a condition of their early release from prison. Return-to-prison rates were lower for most inmates who completed treatment compared to a matched comparison group. Male completers of prison-based intermediate programs returned at statistically lower rates then their matched counterparts. Similarly, female completers of intermediate programs also returned at statistically significant lower rates then their matched counterparts. Inmates who began ACDP treatment but dropped out before completing the program tended to return to prison at a higher rate than did their matched counterparts, who were never assigned to treatment. Inmates who participated in ACDP programs and completed, returned to prison less frequently than did those who began treatment and did not complete.

OTHER MEASURES OF PROGRAMS' SUCCESS

ACDP continues to incorporate an additional measure of behavior change. The TCU Criminal Thinking Scales (CTS) is relevant to the treatment model and provides a consistent measure that can be used on all inmates assigned to programs. The CTS was developed to provide criminal justice treatment providers with a brief and cost-effective tool for measuring the criminal thinking among offenders. The criminal justice literature highlights criminal thinking as one of several key determinates of an individual's willingness to commit crime both before and after criminal justice sanctions have been applied. Research has shown when anti-social attitudes and cognitions are addressed; risk of future offending can be reduced. The results of the CTS survey provide treatment programs with a method to document the impact of program interventions and the change in offender thinking and attitudes that have been associated with drug use and criminal activity.

Results of testing show that participating inmates lowered their scores on all the CTS subscales. In general, participating inmates significantly reduced their level of entitlement beliefs, justifications of criminal behavior, criminal rationalization, and personal irresponsibility. Scores on the cold heartedness and power orientation subscales were not statistically lower at the prison-based long-term treatment programs, mostly because females increased their scores on these scales. Male participants scored significantly lower on both scales. The results are consistent with those of several year's participants and we are uncertain why the scores increase for long-term female participants, though these results could indicate feelings of greater self-efficacy within this population.

FY 2018-2019 SUMMARY OF FINDINGS

- Offenders who exited ACDP programs in FY 2018-2019 universally improved their confidence to resist the urge to drink heavily or use drugs in a variety of situations.
  - Community-based programs confidence scores moved from the low 50s into the low 70s confidence range.
  - Prison-based intermediate programs confidence increases were more modest compared to the community-based residential programs, mostly due to the higher-levels of confidence reported at entry to the program by these participants.

- o Inmates participating in the prison-based long-term treatment programs and with the most severe substance use issues had the most modest improvement, yet the increases in confidence for this population were statistically significant in all sampled circumstances.
- o For participants in all programs, rated confidence at entry to the programs in the ability to resist urges to drink were rated lowest, but participant confidence increased significantly and substantially at program exit. For each situation in which the participant might be in a situation to use drugs or alcohol, rated confidence at program exit to resist use was statistically significantly higher compared to entry.

- ▪ Inmates who successfully completed prison-based intermediate treatment programs in FY 2018-2019 reduced the severity of infractions when compared to inmates who dropped out of these programs.

- ▪ In FY 2018-2019, ACDP evaluated each program's impact on recidivism (defined as a return to prison within 3 years) using statistical techniques that consider potential differences among inmates and create equivalent groups appropriate for comparison. This method not only shows when completion of an ACDP program impacts the likelihood of return-to-prison, but also allows for comparison of program participants with inmates not assigned to an ACDP program.
  - o Return-to-prison rates were lower for most inmates who completed treatment compared to a matched comparison group.
  - o Male completers of prison-based intermediate programs returned at statistically lower rates then their matched counterparts.
  - o Female completers of intermediate programs returned at statistically significant lower rates then their matched counterparts.
  - o Inmates who began ACDP treatment but dropped out before completing the programs tended to return to prison at a higher rate than did their matched counterparts, who were never assigned to treatment.
  - o Inmates who participated in ACDP programs and completed, returned to prison less frequently than did those who began treatment and did not complete.

- ▪ In FY 2018-2019, ACDP continued to incorporate the TCU Criminal Thinking Scales (CTS) which provides criminal justice treatment providers with a brief and cost-effective tool for measuring the criminal thinking among offenders. The results of the CTS survey provide treatment programs with a method to document the impact of program interventions and the change in offender thinking and attitudes that have been associated with drug use and criminal activity.
  - o Participating inmates lowered their scores on all the CTS subscales.
  - o Participating inmates significantly reduced their level of entitlement beliefs, justifications of criminal behavior, criminal rationalization, and personal irresponsibility.